

School Policy:	Policy written by school and adopted by LGB.
-----------------------	--

Intimate Care Policy

BURCHETTS GREEN CE INFANT SCHOOL

Approved by:	LGB
Date:	September 2025
Next review date:	September 2026

Adopted by school:	Burchetts Green CE Infant School
Date:	September 2025

Rationale

Burchetts Green CE Infant School is responsible for the care of all children, whatever their needs or difficulties, including children with learning and physical difficulties who have an increased dependency and require practical support with their intimate care needs at school.

We have defined Intimate Care as direct care of the child in terms of any personal care activity a child would normally be able to do for him/herself. These needs are no different to the needs of a child who is not disabled but there are differences in the nature, method and principles of fulfilling those needs.

Intimate care is a high-risk activity in terms of abuse and it is particularly important that there are guidelines on Intimate Care, both to protect those being cared for and the staff who care for the children's needs. We take the view that everyone is safer if expectations are clear and approaches are as consistent as possible.

The staff at Burchetts Green CE Infant School have recognised the need to design guidelines that encompass all aspects of procedures. They apply to every member of staff involved in the intimate care of the children and they aim to support good practice.

The school has endeavoured to make reasonable adjustments to support children who need intimate care in partnership with parents, staff and outside agencies.

Therefore, our guidelines have the following goals:

- To outline good practice during intimate care tasks so we can distinguish between good and poor care practice
- To protect the children and the staff who are asked to carry out intimate care tasks
- To outline a system that works effectively for the child, ensuring a consistent approach is undertaken and that approaches to intimate care are not markedly different between individuals

Guidelines

1. Schools and Parents working together

All staff involved in Intimate Care routines will have a valid DBS check and will receive appropriate training to carry out this aspect of their work. Parents will receive a copy of the School's Intimate Care policy and will be offered an opportunity to discuss their child's needs with an appropriate member of staff.

The Parent:

- Agreeing to ensure that the child is changed at the latest possible time before being brought to the setting/school
- Providing the setting/school with spare nappies and a change of clothing
- Understanding and agreeing the procedures that will be followed when their child is changed at school – including the use of any cleanser or the application of any cream
- Agreeing to inform the school should the child have any marks/rash
- Agreeing to a 'minimum change' policy ie.: the school would not undertake to change the child more frequently than if she/he were at home
- Agreeing to review arrangements should this be necessary
- Should the soiling be of a nature that constitutes a health and safety concern for the child, the staff or other children, the parent will be required to collect, shower and return to school as soon as possible

The School:

- Agreeing to change the child during a single session should the child soil themselves or become uncomfortably wet
- Agreeing how often the child would be changed should the child be staying for the full day

- Agreeing to monitor the number of times the child is changed in order to identify progress made
- Agreeing to report should the child be distressed, or if marks/rashes are seen
- Agreeing to review arrangements should this be necessary
- Agrees to make reasonable adjustments to enable the child to attend school
- Agrees to clean the child prior to collection for further cleaning, and ensure he/she is not disturbed in any way

The purpose of this agreement should help to avoid misunderstandings that might otherwise arise and help parents feel confident that the setting/school is taking a holistic view of the child's needs.

2. Safeguarding for Children and Adults

Two people needed for the change, one to do the changing and one to ensure the safeguarding of both child and adult.

3. Carers should be aware of the abilities of the child

The child should be enabled and encouraged, as far as is reasonably possible, to contribute to his/her own intimate care

4. Ensure privacy, appropriate to the child's age and gender

The school takes the view that the issue of privacy is important. All children will be changed in a discreet area with all of the necessary equipment to hand i.e. changing mat, protective gloves, wipes, clean nappies, change of clothes etc.

5. Children have the right to be respected

Respect of the child's body and integrity should be included in all care procedures. Ideally, someone who has a positive long-term relationship with the child should carry out intimate care tasks. New members of staff should get to know the children in the classroom context before getting involved in Intimate Care tasks.

6. A strong focus should be evident on choice and decision-making skills

Wherever appropriate, decision making should be an integral part of the process – e.g. Do you want to go to the toilet or not? Should we wash your hands or face first? Can I help fasten your trousers?

7. Pupils will be prepared and involved in what is going to happen

Staff will raise the child's awareness of the process. Objects of reference, symbols, signs, gesture and verbal explanation will be given as appropriate

8. Intimate Care tasks are not an interruption to the timetable

These practices should be valued as part of each child's essential curriculum. They are an opportunity to develop independent and age-appropriate skills, increase dignity and to raise self-esteem.

9. Never do any task unless you are confident in your ability to do it

Never guess; ask a colleague to help.

10. If you are concerned – report it

Intimate Care tasks should never be approached light heartedly. If a child has soreness or something to cause you concern, follow School's Child Protection Procedures.

11. Health and Safety Issues

Barrier materials will always be used e.g. disposable gloves. Appropriate Positive Handling Procedures will be followed when necessary.

12. Sharing of Information

The school may wish to seek the advice of the school nursing service or other health professional. Should this need arise, parental consent will be sought before sharing any personal information

Main Procedures

- Staff to wear disposable gloves and aprons while dealing with the incident
- Soiled nappies to be double wrapped
- Soiled training pants and or underwear to be disposed of as instructed by parents
- Changing area (the accessible toilet) to be cleaned after use with disinfectant
- Hot water and liquid soap available to wash hands as soon as the task is completed
- Hot air dryer or paper towels available for drying hands

RESOURCES

The School will seek parental views on practices at home. Preferred materials will be used and parents will be encouraged to resource their child's needs whenever possible.

Appendix 1

(Headed Paper)

Dear Parents

I am writing to you regarding your child's need for support with intimate care routines. We have drawn up the attached guidelines to ensure that your child's needs are met in a professional and dignified manner at all times.

I would be grateful if you could sign and return the slip below once you have read the guidelines.

Yours sincerely

Rob Harris

Headteacher

✂-----

I have received a copy of the School's Intimate Care Policy.

I *would/would not** like an opportunity to discuss the School's Intimate care Policy with a member of staff.

Signed: _____

Name: _____

Date: _____

* Please delete as appropriate

Appendix 2

TOILET TRAINING/CHANGING PLAN

Child's Name _____ D.O.B. _____

Name of Adult _____

Date	Time	Code	BSS	Adult Signature	Comment

TP=Tried Potty

TT=Tried toilet

UP=Used toilet

WP=Wet Pants

S=Sore

AC=Applied Cream

WB=Wipe Bottom

SP=Soiled Pants

BSS = Bristol Stool Scale

Appendix 3

Toileting and intimate care for all children

The Disability Discrimination Act can only make requirements of a setting in respect of children with disabilities/additional needs.

- All settings should be prepared to change nappies and soiled pants and support toilet training programmes for all children regardless of whether or not they have a specific diagnosis or disability.
- An intimate care policy should be in place in all early years' settings and schools and should be adhered to by all staff.
- In order to maintain high quality and inclusive childcare, practitioners will be expected to change nappies.
- Parents and carers should never feel under pressure to have their child toilet trained before they will be accepted into an early year's unit or school – it may leave them feeling anxious or inadequate.
- Practitioners should support and reassure parents and carers that their child will be welcomed into the group.

Every child is an individual and, therefore, will have a unique developmental pattern. Toilet training is a developmental stage that may create anxiety for the child and their parents and carers. Some children will be out of nappies between the ages of two and three – for others it will be later and for some it may never happen.

GUIDANCE ON INTIMATE CARE

Lack of toilet training should not be a barrier for children attending early year's settings and schools.

The Disability Discrimination Act makes specific requirements regarding children with disabilities/additional needs, which has implications for our practice for all children.

The Disability Discrimination Act makes it clear that:

- If a child cannot be toilet trained in time for playgroup/nursery because of a disability/additional need, the setting has a duty to look into the situation and consider how they can make 'reasonable adjustments' to enable the child to attend. This means they have to think about what can be done within the setting to allow the child to be changed when necessary and for a toilet training programme to be supported as and when appropriate.
- The setting also has a legal duty to anticipate adjustments to accommodate disabilities/additional needs and not simply to respond to them on arrival.
- There must be no 'blanket policies' in any setting. For example, "We don't take children unless they are toilet trained/we don't take children in nappies".

Settings must anticipate having to make 'reasonable adjustments' to meet the needs of all children with disabilities/additional needs who may come into the setting in the future. The setting may make a decision regarding reasonable adjustments in consultation with the responsible body for that setting – governing body, LA, voluntary, private, independent group etc. Any decision about how reasonable adjustments are due to cost, health and safety or resource issues should be taken in the light of the Disability Discrimination Act. **There would have to be 'material and substantial' reasons not to make these adjustments.** Parents wanting their child to be educated in the setting would have the right to challenge this decision through the Special Educational Needs and Disability Tribunal (SENDAT).