

Cockton Hill Infants' School Intimate Care Policy



Headteacher: Tom Cuthbertson
Chair of Governors: Bob Woods

	Date	Name	Position
Written By		Tom Cuthbertson	Head Teacher
Reviewed	23/6/2026	Tom Cuthbertson	Head Teacher
Equality Reviewed	23/6/2026	Bob Woods	Chair of Governors
Approved	23/6/2026	Bob Woods	Chair of Governors
Review date	23/6/2027		

1. Introduction & Aims

Intimate care routines are essential throughout the day to meet children's basic needs. This may include nappy changing, supporting children with toileting, changing clothes, and giving first aid treatment and specialist medical support, where required.

We wish to ensure the safety and welfare of all children from age 2 to 7 receiving intimate care, respecting their right to privacy, dignity, and body autonomy, whilst ensuring that staff are fully supported and protected from false allegations.

We aim to support all parties through the following actions:

- Ensuring all staff undertaking intimate care routines have suitable enhanced DBS checks.
- Training all staff in the appropriate methods for intimate care routines and arranging specialist training where required, i.e. first aid training, specialist medical support etc.
- Working closely with parents on all aspects of the child's care and education. If a child requires specific support the setting will arrange a meeting with the parent to discover all the relevant information relating to this to enable the staff to care for the child fully and meet their individual needs.
- Ensuring all staff have an up-to-date understanding of safeguarding/child protection and how to protect children from harm. This will include identifying signs and symptoms of abuse and how to raise these concerns as set out in the separate school safeguarding/child protection policy.
- Conducting regular risk assessments on all aspects of the setting operation including intimate care and reviewing the safeguards in place. The setting has assessed all the risks relating to intimate care routines and has placed appropriate safeguards in place to ensure the safety of all involved.

2. Definition of Intimate Care

Intimate care is defined as any activity which requires the washing, touching, or dressing of an individual for reasons of personal hygiene, medical care, or safety. In our school context, this includes:

- Nappy and pull-up changing for nursery and preschool cohorts.
- Assisting a child who has had a toileting accident (wet or soiled clothes).
- Supporting a child with wiping, cleaning, and re-dressing.
- Administering certain medical treatments or personal applications (e.g., prescribed creams or catheter care).

3. Safeguarding & The Balance of Privacy

In order to maintain the child's privacy, we will carry out the majority of these actions on a one-to-one basis. However, to safeguard both the child and the practitioner, the following protocols must be followed:

- Staff must always notify a colleague verbally before leaving the room to perform an intimate care routine.
- Care must be delivered in a designated area (e.g., the disabled toilet or nursery changing area). Doors should remain unlocked and unbolted. Where privacy screens are used, they should allow the staff member to remain within audible, and ideally visible, range of other adults if required.
- Staff will use child-centered language. They will talk to the child throughout the process, explaining what they are going to do before doing it (e.g., "I am going to wipe your bottom

now to make you clean, is that okay?"). This encourages the child's active participation and respects their body autonomy.

- **Strict Restrictions:** Under no circumstances will student teachers, parent volunteers, or temporary supply staff be permitted to perform intimate care routines or change a child unsupervised.

4. Health, Hygiene, and Infection Control

To minimize the risk of cross-contamination and infection, staff must adhere strictly to the following health and safety procedures:

- **Personal Protective Equipment (PPE):** Staff must wear fresh, disposable plastic aprons and gloves for every individual nappy change or incident involving bodily fluids.
- **Surface Sanitization:** Changing mats and toilets must be cleaned down with an approved anti-bacterial spray and disposable paper towels before and immediately after every use.
- **Hygienic Waste Disposal:** All soiled nappies, pull-ups, wipes, and PPE must be placed into a nappy sack and disposed of in a dedicated, foot-operated clinical waste bin, separate from standard classroom waste.
- **Handwashing:** Both the staff member and the child must wash their hands thoroughly with warm running water and liquid soap immediately after the routine is completed.
- **Soiled Clothing:** Soiled clothing must be placed securely in a sealed plastic bag and sent home with parents at the end of the day. Clothing must never be rinsed or washed by hand at school to avoid the spread of pathogens.

5. Early Years Specifics & Promoting Independence (Ages 2–5)

For our youngest learners, intimate care is a core component of their development and learning journey. In alignment with statutory Early Years Foundation Stage (EYFS) guidance:

- **The Key Person System:** Wherever operationally possible, a child's designated Key Person (or an established co-worker known closely to the child) will carry out their intimate care to preserve continuity and emotional security.
- **Appropriate Facilities:** Nappy changing must take place on a designated, secure changing table or floor mat designed for this purpose. Children must never be changed on standard tables, school desks, or carpeted floors.
- **Partnership for Independence:** We work dynamically with parents to mirror toilet training routines established at home. Staff will actively encourage children to take steps toward independence, such as pulling down their own underwear or attempting to wipe themselves, offering praise and support throughout.

6. Individual Intimate Care Plans & Record Keeping

To ensure transparency, accountability, and clear lines of communication:

- **Individual Care Plans:** Children with known, long-term medical conditions, developmental delays, or complex physical needs will have a formal Individual Intimate Care Plan drawn up in consultation with parents, the SENDCo, and any relevant healthcare professionals. This plan will specify named handlers, preferred routines, and equipment required.
- **The Intimate Care Log:** Every instance of intimate care (outside of standard independent toileting) must be recorded in the setting's secure Intimate Care Log. The log will capture:
 - The date and exact time of the routine.
 - The child's initials.
 - The reason for the care (e.g., heavy wet nappy, soiled accident, medical application).
 - The name and signature of the staff member who provided the care.

- **Parental Notification:** Parents will be informed discreetly on the same day if their child has required an intimate care change. This will be communicated via a sealed note in the child's book bag or a direct, private message on the school's parental communication app.

7. Reporting Concerns & Child Protection

Intimate care routines provide a unique vulnerability window where welfare concerns may become apparent. Staff must remain vigilant and remember that this policy works directly alongside the school's primary Safeguarding Policy:

- **Physical Observations:** If a staff member notices unusual marks, unexplained bruising, lacerations, or swelling in the child's intimate areas during a routine, they must not question the child directly about it.
- **Reporting Protocol:** Any physical concerns, or any unusual comments/disclosures made by the child during an intimate care routine, must be documented immediately and reported directly to the Designated Safeguarding Lead (DSL) or Deputy DSL in accordance with the separate school Safeguarding / Child Protection Policy.
- **Allegations Against Staff:** If a child makes an allegation against a staff member concerning an intimate care routine, the procedures detailed in the school's primary Safeguarding Policy for managing allegations against staff will be immediately triggered, involving the Headteacher and the Local Authority Designated Officer (LADO).