



Fairfield Primary School

Intimate Care Policy

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AIMS

At Fairfield Primary School, we endeavour to provide the best educational opportunities for the children within our care in a secure, happy and hard-working environment. Within this environment, we are committed to providing equality of opportunity, allowing all children to reach their full potential.

This policy has been devised in response to the increasing number of children entering the Early Years setting not toilet-trained. It sets out the procedures we will follow when nappy changing or in the case of a child accidentally wetting or soiling him/herself. All parents are asked to provide spare clothes in a bag regardless of whether their child is toilet-trained. It also states the roles and responsibilities of both the home and school and has an agreement/consent form for parents to sign.

We are an inclusive school and admit children who are not yet fully toilet-trained but we feel that it benefits the child if he/she is out of nappies or at least working towards this by the

time they start school. Parents are made aware that the Early Years team are on hand to offer advice on how to toilet train and are put into contact with relevant support if desired. Parents are also asked to inform us of any medical condition which requires their child to need a nappy.

- This policy should be read in conjunction with Stockton Policy and Practice Guidance for intimate care. (See attached appendix 2)

QUESTIONS AND ANSWERS

- **Who will change the nappy/wet/soiled clothing?**

The Early Years staff.

- **Where will changing take place?**

In the changing room within the Nursery toilets on the changing unit.

The nappy changes will be recorded on a chart in the toilet area and in a separate record book.

Accessing the Changing Unit

Children will be supported to access the changing area in a safe and age-appropriate manner.

- Where possible, children will be encouraged to walk to the changing area independently, supported by an adult where necessary.
 - Staff will use appropriate manual handling techniques and equipment when supporting children onto the changing unit to ensure the safety of both the child and adult.
 - Steps or supportive aids will be used where appropriate to promote independence and reduce the need for lifting.
 - The child's dignity and privacy will be maintained at all times during transfer to and from the changing unit.
 - Staff will explain each step of the process to the child to ensure they feel safe, informed and respected.
 - Where a child has additional physical needs, a personalised approach will be agreed with parents/carers and, where appropriate, outside professionals, and recorded in an individual care plan
- **What resources will be used?**
A changing mat, gloves, blue roll paper, antibacterial wipes, nappy sacks, nappies, baby wipes, cream (when specified by parent/guardian).
 - **How will the nappies be disposed of?**
Put in a nappy sack and in the bin within the changing room. The bin is to be changed twice a week by the council.
 - **What infection control measures are in place?**
Staff will wear disposable gloves while dealing with the incident.
Blue roll paper will be put on the changing mat.
The changing area will be cleaned after use.

Hot water and liquid soap are available to wash hands as soon as the task is completed. Hot air dryer or paper towels are available for drying hands.

- **What will the staff member do if the child is unduly distressed by the experience?**
Staff will comfort and reassure the child, talk through what they are doing and ensure the change is complete swiftly to ensure that the stress is not prolonged.
- **What will the staff member do if he/she notices marks or injuries on the child?**
Follow the school safeguarding policy and report it to the Designated Safeguarding Lead (DSL) and the Early Years Leader.

Special circumstances

There may be reasons why older children may not yet be fully toilet-trained and may still be wearing nappies or equivalent. We will work with parents/carers to facilitate the intimate care of these children.

Children will be changed in the toilet next to the school office as this has a medical changing table that may be needed, although children should be encouraged to stand if it is possible.

Only designated school staff should carry out this changing routine in agreement with parents/carers.

Where possible, the child will be encouraged to change/clean themselves, unless this causes distress.

A meeting with parent will outline a plan to follow that is personal to the child and this will be put into writing.

We will ensure that the pupil concerned is consulted about this plan, where they are able to do so.

We acknowledge that some children may not achieve toilet training due to medical conditions, developmental delay or additional needs; in such cases, the school will provide appropriate, dignified and individualised intimate care in partnership with parents/carers and relevant professionals

MONITORING and REVIEW

It is the responsibility of school staff to follow this policy. The Senior Leadership Team will carry out monitoring in the early years as part of the whole school monitoring system.

This policy will be reviewed before the start of each academic year and will evolve to incorporate the views of all staff concerned.

Appendix 1

THE FOLLOWING IS A COPY OF THE HOME-SCHOOL PARTNERSHIP AGREEMENT

All parents are asked to provide spare clothes in a bag regardless of whether their child is toilet-trained.

Parents are expected to provide a bag with a suitable amount of nappies, wipes and any cream needed.

If a child requires cream to be administered, the parent is expected to sign a permission form beforehand.

THE PARENT/GUARDIAN

- ✓ I agree to ensure that my child is changed at the latest possible time before being brought to the setting/school.
- ✓ I agree to provide the setting/school with spare nappies, wipes and a change of clothing.
- ✓ I have read the intimate care policy. I understand and agree the procedures that will be followed when my child is changed at school.
- ✓ I agree to inform the setting/school should the child have any marks/rash.

THE SCHOOL:

- ✓ We agree to change the child during a single session should the child soil themselves or become uncomfortably wet.
- ✓ We agree to complete a nappy change every 3 hours should a child be accessing the nursery's 30-hour provision or after school club.
- ✓ We agree to monitor the number of times the child is changed.
- ✓ We agree to report should the child be distressed, or if marks/rashes are seen.

SIGNED _____ **Parent/Guardian DATE** _____

Appendix 2



Children and Young People

Big plans for the young people of our Borough

Policy and Practice Guidance to foster safer working practices for Intimate/personal Care and Dignity for the child or young person requiring adult support.

It doesn't matter where children live, what language they speak, what their parents do, whether they are boys or girls, what their culture is, whether they have a disability or whether they are rich or poor. No child should be treated unfairly on any basis.

(Taken from A Summary of the rights under the Convention on the Rights of the Child)

Purpose of the guidance

This guidance refers to all children, of any age, who may require support for intimate/personal care from an adult on a daily basis and those who may require it occasionally or exceptionally.

As with all developmental milestones, there is a wide variation in the time at which children and young people develop and intimate/personal care may need to be provided at any stage.

Staff who work with children and young people or those with special needs will realise that the issue of intimate/personal care is a difficult one and will require staff to be respectful of children's needs. Intimate/personal care can be defined as care tasks of an intimate/personal nature, children and young people's dignity must to be preserved and a high level of privacy, choice and control would need to be provided to them.

Schools/settings are committed to ensuring that all staff responsible for the intimate/personal care of children will undertake their duties in a professional manner at all times at the appropriate developmental level and degree of understanding. No child should be attended to in a way that causes distress or pain. This guidance is to help ensure good practice in this area.

Legislation

This policy and practice will support staff to overcome any challenges and be confident they are meeting the requirements of the Early Years Foundation Stage, Special Educational Needs and Disability Act (2001), the Disability Discrimination Act (1995), Equality Act (2010) and related legislation. Please reference and add link to medication policy for schools. Children and Families Act 2014 <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted> Education Health Care Plans 37 – 50.

The Equality Act (2010) states that the responsible body of a school must not discriminate against a person:

- (a) In the arrangements it makes for deciding who is offered admission as a pupil.
- (b) As to the terms on which it offers to admit the person as a pupil.
- (c) By not admitting the person as a pupil.

It is not acceptable to ask parents to come to change their child if a child has a recognised disability as this is a direct contravention of the Act. Also leaving any child soiled for any length of time is considered a safeguarding issue since it places the child at risk of significant harm.

Facilities

Current Department for Education recommendations for purpose built foundation stage units include an area for changing and showering children to meet and support the development needs of young children.

If a school does not fall within this category, a suitable place for changing children, including providing the necessary resources should be provided. The Department of Health recommends an extended cubicle with a wash basin be provided within the class toileting area. It recommended that:

1. Where possible children or young people are changed standing up
2. Less mobile children or young people, or children in the foundation stage, may prefer to be changed on a suitable changing mat on the floor whilst still ensuring the dignity of the child.
3. Dispose of nappies observing the appropriate procedures.

Safeguarding and Welfare Requirements

All staff working in schools and settings with this responsibility of carrying out intimate/personal care procedures must have been recruited and selected robustly with

appropriate levels of vetting checks necessary for their role. (regulated activity DBS). There is no legal requirement that a second member of staff must be available to supervise the intimate care process.

[Guidance for Safer Working Practice Oct 2015.pdf](#) point 15 Intimate/Personal Care

Best Practice guidance would be 'staff should ensure that another appropriate adult is in the vicinity and is aware of the task to be undertaken'.

Management of Intimate/Personal Care Support in your School/Setting

Staffing

Teaching Assistants have been given working conditions at level 2 which means that there is some exposure to disagreeable, unpleasant environmental working conditions i.e. toileting as an inherent part of the job role.

Under normal circumstances, it would be expected that this job be carried out by TAs and not by teachers – although in extreme urgent cases no adult looking after a child should refuse to change them.

Agreeing a Procedure for Support in your School/Setting

Specific issues around toileting should be discussed at a private meeting with the parents/carers prior to admission into school. The meeting will also provide an opportunity to involve other agencies as appropriate, such as a Health Visitor, School Nurse or Children's Centre Staff.

A home/school intimate/personal care support policy should be in place which makes clear the partnership with parents when children are coming to your school. Such an agreement helps to avoid misunderstandings and also helps parents/carers feel confident that the school will meet their children's needs. See Practice guidance for example.

Where appropriate, parents and school staff will also need to agree a personal intimate care plan and training programme. Should a child with complex intimate care needs be admitted, the child's medical practitioners will need to be closely involved and a separate more specialised individual intimate care plan may be required.

Students, work experience students, parents and volunteers **should never** be involved in intimate/personal care issues. (Please ensure this is cross referenced with Safeguarding Policy or schools' own Student and Volunteer guidance/ working practices.)

It is good practice if all parties clearly understand at the outset, what physical contact is necessary and appropriate in undertaking specific activities. Keeping parents/carers and pupils informed of the extent and nature of any physical contact may also prevent allegations of misconduct or abuse arising. (Reference Safeguarding/Whistle Blowing Policies).

Partnership Working

Best practice guidance includes school making reasonable adjustments to meet the child or young person's personal needs.

Schools are expected to meet the needs of children with delayed personal development in the same way as they would meet the individual needs of children or young people with any other delayed development e.g language. Children and young people should not be excluded from normal school activities because there may be intimate/personal care issues.

Good practice should be for schools to engage with all families, and staff should take care both verbally and in terms of their body language to ensure that the child or parents are never made to feel as if their individual needs cannot be met.

If there are a significant number of young children arriving at school who have not yet developed their intimate/personal care skills, staff are advised to contact the Health Visiting Team or Children's Centre in their area to discuss their concerns. Staff at Children's Centres are able to organise a course for parents relating to the intimate care concerns.

If children are entering primary or secondary school with intimate/personal care needs which have not been addressed staff are advised to contact the specialist community nursing service

This means that school/settings should:

- Have written care plans in place for any pupil who could be expected to require intimate care
- Ensure that pupils are actively consulted about their own care plan

This means that staff should:

- Adhere to their organisation's intimate and personal care and nappy changing policies
- Make other staff aware of the task being undertaken
- Always explain to the pupil what is happening before a care procedure begins
- Consult with colleagues where any variation from agreed procedure/care plan is necessary
- Record the justification for any variations to the agreed procedure/care plan and share this information with the pupil and their parents/carers
- Avoid any visually intrusive behaviour
- Where there are changing rooms announce their intention of entering
- Always consider the supervision needs of the pupils and only remain in the room where their needs require this.

This means that adults should not:

- Change or toilet in the presence or sight of pupils
- Shower with pupils
- Assist with intimate or personal care tasks which the pupil is able to undertake independently.