Priors Hall – a learning community

Intimate Care Policy

2026 - 2027

'Ready for Learning, Ready for Life'

Curiosity Kindness Resilience Respect

Introduction

Intimate care is any care associated with procedures relating to bodily functions, bodily products and personal hygiene. Intimate care requires direct or indirect contact with or exposure of intimate parts of the body, such as cleaning up after a child who has soiled themselves. In addition, some children may need help with dressing/undressing or using the toilet. Most children can carry out these functions themselves, but it is recognised that some are unable to, due to physical disability, learning difficulties, medical needs or needs arising from the child's stage of development.

This Intimate Care Policy safeguards children and staff and ensures good practice is followed. At Priors Hall, all staff are checked with the (Enhanced) Disclosure and Barring Service (DBS) and we are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional and caring manner at all times. Intimate care of children is part of a child's right, alongside other aspects of their learning and development. We believe that every child has the right to feel safe and secure. We do not discriminate against children who have not reached a stage where they can manage their own personal hygiene and as such, welcome all children to participate in our school and provide appropriate support for each child on an individual basis. We recognise the need to treat all children with respect and dignity when intimate care is given. No intimate care experience should ever cause distress, embarrassment or pain.

This policy should be used in conjunction with the Child Protection Policy, First Aid Policy, Whistleblowing Policy and Managing Allegations against a Member of Staff Policy.

Aims

At Priors Hall – A Learning Community we aim to:

- Safeguard the rights and promote the welfare of all children and young people, including those who may be more vulnerable to abuse.

- Provide guidance and reassurance to staff whose duties may include intimate care. This will extend to specialist training when appropriate.

- Assure parents and carers that staff are knowledgeable about personal care and that their child's individual needs and concerns are taken into consideration.

- Remove barriers to learning and participation, protect from discrimination and ensure inclusion for all children and young people within our setting.

A Culture of Consent

We believe that children have ownership over their own bodies and that they have a right to autonomy over who provides 'intimate care' for them. Trusting relationships built between staff and children should ensure that children feel safe and recognise intimate care as part of the holistic care provided by trusted adults, based on their developmental needs. Prior to all instances of changing, the child should be asked **"Is it OK if I change you?"** Where a child refuses, they should be asked if there is a particular adult that they trust and would prefer to undertake their intimate care. **"Who would you like to change you?"** If a child will not allow an adult to change them, the adult should explain the reasoning behind the requirement for change "**It's really important that you get changed, we need to look after your body. At the moment your body isn't clean and that isn't healthy for you.**" Intimate care may present vulnerability for staff and child. Parents should understand that in an instance where their child refuses to be changed by a teacher, we will adhere to our culture of consent and respect that they are not comfortable to be changed. In this situation, the parent will be contacted.

Best Practice

Once a child has reached Key Stage One (the September after they are 5), individual intimate care plans are written for particular children to suit their individual circumstances. We work with parents of any child who requires intimate care to establish a preferred procedure for supporting the child.

In instances where these procedures may require specialist training, we seek out training for the staff involved in a child's care, ensuring that the child's key person and at least one other member of staff accesses the training.

Staff members who are known to the child assume responsibility for changing children. The staff member who is involved will always ask the child for permission to assist them. The child is supported to achieve the highest level of autonomy and independence possible, given their age and ability. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is supported. Where possible, one child will be supported by one adult, unless there is a sound reason for having more adults present. It is the parent's responsibility to provide nappies, disposal bags, wipes, changing mat. Changing should take place in an environment that offers discretion and privacy for the child, but where the conversation may be audible or adult visible. An adult should never close the door of an enclosed toilet space and work in isolation with a child.

Working with Parents

Partnership with parents is an essential principle in our setting and is particularly necessary in relation to children needing intimate care. We recognise that the information required to carry out intimate care is gained from parents via written permission (see Appendix 1). We acknowledge that cultural influences may affect what is deemed 'intimate' and ensure we pay regard to social, ethnic and cultural perspectives through open dialogue with parents.

Parents should be encouraged and empowered to work with staff to ensure that their child's needs are identified, understood and met.

When any intimate care provided for children with individual care plans, it will be recorded on their own personal record (see appendix 2). All information concerning intimate care procedures is recorded and filed.

We appreciate that sometimes children have toileting 'accidents', which are out of character for them. In the event of this, and in the absence of a personal intimate care plan, the child would be fully encouraged and supported to achieve the highest level of independence that is possible given their age and ability. Staff will encourage the child to do as much for his/herself as possible and parents will be informed the same day. On the rare occasion that a child is soiled and is emotionally distressed and unable to clean themselves, parent/carers will be contacted so that the child can be taken home for bathing.

Health and Safety

Guidelines for Changing Children

- If possible, children should be changed standing up or using the variable height changing table (changing area/toilet) to avoid lifting of children.
- The child's skin should be cleaned with a disposable wipe.
- Nappy creams/lotions should be labelled with the child's name and used only if prescribed for that child (by their parents). These must not be shared.
- Disposable gloves should be worn when changing nappies. The nappy should be folded inward to cover faecal material and double wrapped in a nappy bag. Soiled nappies should be disposed of into the bin provided. The disposal bin should be lined and emptied daily, replacing the used bin liner.
- Any soiled or damp clothing should be placed in a plastic carrier bag in the bin provided in the changing area/toilets.
- Once the child has been changed and removed from the changing area, the surface should be cleaned with an antibacterial detergent spray or wipe and left to dry.
- Gloves, apron and any items used for cleaning the changing area will be wrapped and disposed of via domestic waste.
- Hands should be thoroughly washed afterwards.
- Complete the intimate care record.

Safeguarding

Child Protection procedures are adhered to as outlined in the Child Protection Policy. All children are taught personal safety skills carefully matched to their level of development and understanding to build their confidence and assertiveness about their own body and its worth. Confident and assertive children who feel their body belongs to them may be more able to identify abuse.

If a member of staff has a concern about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will follow our safeguarding procedures.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, this will be investigated and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. If a child makes an allegation against a member of staff, procedures will be followed as per the 'Managing allegations against staff' policy.

Allegations of Abuse

Personnel working in intimate situations with children can feel particularly vulnerable. This school policy is in place to reassure both staff involved and the parents of vulnerable children. Action will be taken immediately should there be a discrepancy of reports between a child and a member of staff. Where there is an allegation of abuse, the Headteacher must be directly informed, in order to start the safeguarding procedure.

Safeguarding Statement

Safeguarding is everybody's business. Priors Hall – a Learning Community has an unwavering commitment to safeguarding to ensure that: all our children and young people are safe and feel safe; that children, parents/carers and staff are able to talk about any safeguarding concerns and feel assured that they will be listened to; and that all staff and volunteers are aware of and implement safeguarding procedures and guidance, including what to do if they suspect a child or young person may be experiencing, or be at risk of harm. In essence, we instil a culture of vigilance.

All concerns should be given to our school Designated Safeguarding Leads: Jenny Forshaw (DSL) Jacqueline White (Assistant Headteacher and DDSL), Tess McQuade (Headteacher and DDSL), Justin Pye (Assistant Head and DSO), Charlotte Brazier (Assistant Head and DSO), Alex Crawford (Nursery Lead Teacher and DSO), Lucy Nisbet (SENDCo and DSO) and Calla Haycock-Hall (Pastoral Lead and DSO).

- In any case where an adult is concerned that a child is, or may be, at risk of significant harm they must report this immediately to the DSL or to a member of the Safeguarding Team who will make a referral directly to Northamptonshire Multi-Agency Safeguarding Hub (MASH) on 0300 126 7000.

- If a child or other person is at immediate risk of harm, the first response should always be to call the police on 999. This policy applies to all adults, including volunteers, working in or on behalf of Priors Hall – a Learning Community.
- If a concern is in relation to a member of staff at Priors Hall (who is not the Headteacher), please contact Tess McQuade on 01536 216090 to report this concern.
- If a concern is in relation to the Headteacher, please contact the Chair of Governors (Matt Miller) via email on SBoak@IFTL.co.uk or IFTL Safeguarding Lead (Kim Kemp) via email on KKemp@iftl.co.uk

Appendix 1

(Letter to parent(s) outlining policy/procedures and their consent to carry out 'intimate care')

Dear Parents/Carers,

I am writing to you regarding occasions when your child may need 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 and agree to the school carrying out 'intimate care' procedures when necessary.

Yours sincerely,

Lucy Nisbet

SENDco

I have read a copy of the School's 'Intimate Care Policy.' I agree to the school supporting my child with 'intimate care' when necessary.

Signed:_____

Name:_____

Name of child:_____

Date:_____

Appendix 2

TOILET TRAINING/CHANGING RECORD

(To be completed on every occasion after providing intimate care)

Date	Name	Time	Verbal Consent	Adult	Notes