



INTIMATE CARE AND NAPPY CHANGING POLICY

1. Statement of Intent

Chinley Primary School is committed to ensuring that all children are treated with dignity, respect and sensitivity. Intimate care is provided in a way that meets the individual needs of each child and supports their wellbeing, independence and self-esteem.

We work in partnership with parents and carers to ensure that children's needs are understood, anticipated and met appropriately. All intimate care is carried out in line with safeguarding expectations and with full regard for the child's privacy and dignity.

2. Legal and Statutory Framework

This policy is written with reference to the following statutory and regulatory guidance:

- **EYFS Statutory Framework (2024)**
- **Keeping Children Safe in Education (KCSIE 2024)**
- **Working Together to Safeguard Children (2023)**
- **Equality Act 2010**
- **SEND Code of Practice (2015)**
- **Health and Safety at Work Act 1974**
- **Safer Working Practice Guidance (2024)**
- **Data Protection Act 2018 / UK GDPR**

All staff involved in intimate care must follow the school's **Safeguarding and Child Protection Policy**, **Whistleblowing Policy**, **Health and Safety Policy**, and **Staff Code of Conduct**.

3. Definition of Intimate Care

Intimate care refers to any care that involves physical contact in personal or private areas of the body, including:

- Changing nappies, pull-ups or soiled clothing
- Supporting a child with toileting or wiping
- Cleaning a child who has soiled themselves or vomited
- Assisting with dressing or undressing
- Providing physical comfort to a distressed child
- Any procedure that requires direct contact with intimate areas



4. Principles of Good Practice

Chinley Primary School ensures that:

- Children are treated as individuals and their needs are respected.
- Children's privacy and dignity are maintained at all times.
- Children are encouraged to be as independent as possible.
- Children are asked for **permission** before intimate care is carried out.
- Children's preferences, communication methods and comfort are considered.
- Staff use appropriate PPE and follow infection control procedures.
- Intimate care is recorded and communicated to parents where required.
- Staff are trained and confident in providing intimate care safely.

5. Staffing and Safeguarding

- Intimate care is carried out by **staff known to the child**.
- All staff providing intimate care must hold an **enhanced DBS check**.
- **Unregulated volunteers and students must not** carry out intimate care.
- Staff follow **Safer Working Practice Guidance**, ensuring visibility where appropriate.
- Doors remain **unlocked** unless there is a safeguarding or medical reason.
- Where possible, intimate care is provided by **one member of staff**.
- If two adults are required, the reason is **recorded**.
- Staff must be alert to any safeguarding concerns and report them immediately to the **Designated Safeguarding Lead (DSL)**.

6. Consent, Child Voice and Independence

- Children are asked for **verbal consent** before intimate care begins.
- Children are encouraged to do as much as they can independently.
- A child's **right to refuse** is respected unless there is a medical or safeguarding concern.
- Staff communicate clearly and reassuringly throughout the process.



7. Care Plans

For children who require ongoing intimate care:

- A **written Intimate Care Plan** will be created with parents/carers.
- The plan will outline routines, preferences, equipment, staffing and review dates.
- Plans will be reviewed **at least annually** or sooner if needs change.

For children in Nursery who wear nappies or pull-ups, consent for changing is obtained during induction and the child's individual needs are discussed with parents at this stage.

8. Hygiene and Infection Control

Staff must:

- Wash hands before and after providing intimate care.
- Wear **fresh disposable gloves and aprons**.
- Use designated changing areas and mats.
- Dispose of waste in line with **COSHH** and clinical waste regulations.
- Clean changing areas with antibacterial spray after each use.
- Soiled clothing is **double-bagged** and sent home unwashed.

9. Nappy Changing Procedure

1. Explain the process to the child and gain consent.
2. Gather all necessary equipment before starting.
3. Support the child to stand or lie down depending on their needs and preference.
4. Wear gloves and apron.
5. Change the nappy/pull-up and clean the child appropriately.
6. Dispose of waste in the designated clinical waste bin.
7. Clean the changing area.
8. Wash hands thoroughly.



9. Record the change on the **changing chart**.

10. Toileting and Soiling

If a child needs support with toileting or has soiled themselves:

- Staff will reassure the child and explain what is happening.
- Children will be encouraged to clean themselves where possible.
- Staff will assist sensitively if needed.
- Privacy will be provided appropriate to age and situation.
- Soiled clothing will be double-bagged and sent home.
- Staff and children will wash hands thoroughly afterwards.

11. Supporting Dressing and Undressing

Staff may assist children with dressing or undressing when necessary, for example after toileting accidents or for PE. Staff will:

- Encourage independence wherever possible.
- Maintain the child's dignity at all times.
- Ensure no child is left unclothed for longer than necessary.

12. Safeguarding Children

Staff must report immediately to the DSL if:

- They notice marks, bruises or injuries during intimate care.
- A child becomes unusually distressed or anxious.
- A child makes a concerning comment.
- All concerns are recorded in line with the school's safeguarding procedures.

13. Protection of Staff

To protect staff from allegations:



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- Staff will inform another adult when intimate care is taking place.
- Staff will be sensitive to a child's reactions and preferences.
- Any concerns about a child's discomfort with a particular adult will be reported to the DSL.
- Staff will follow the **Whistleblowing Policy** if they have concerns about colleagues.
- If an allegation is made against a member of staff, the school will follow its **Managing Allegations Procedures**.

14. Data Protection

- Intimate care records are stored securely.
- Only relevant staff have access.
- Parents are informed of what information is recorded and why.

15. Monitoring and Review

This policy will be reviewed **annually** or sooner if statutory guidance changes.

Reviewed by: Anna Portman

Date: Approved by Governors: Minute Number:



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APPENDIX 1

INTIMATE CARE PLAN

1. Child Details

Child's Name:	
Date of Birth:	
Class / Year Group:	
Primary Language / Communication Needs: Medical Needs / Diagnoses (if applicable):	

2. Reason for Intimate Care Plan

(Describe why the child requires intimate care. Examples: toileting delay, medical condition, SEND need, temporary injury, nappy use, personal care support.)

Summary of need:

3. Type(s) of Intimate Care Required

Tick all that apply:

- ☐ Nappy changing
- ☐ Support with toileting
- ☐ Cleaning after soiling
- ☐ Support with dressing/undressing
- ☐ Support with menstrual care (if applicable)



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- ☐ Medical-related intimate care
- ☐ Other (please specify):

4. Child's Preferences

(Record the child's communication style, preferred language, comfort items, preferred staff, or any sensory needs.)

Child's preferences:

5. Parent/Carer Instructions

(Include routines, products to use, creams, wipes, nappy brands, cultural or religious considerations.)

Parent/carers guidance:

6. Equipment and Supplies

(Identify who provides what.)

Provided by parents/carers:

- Nappies / pull-ups



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- Wipes
- Spare clothing
- Creams (with signed medical consent if required)
- Other:

Provided by school:

- PPE (gloves, aprons)
- Changing mat
- Clinical waste disposal

7. Location of Intimate Care

(Where intimate care will take place.)

Designated area:

8. Staffing Arrangements

Named staff responsible for intimate care:

- 1.
- 2.
- 3.

Backup staff (if primary staff unavailable):

Staff training required: ☐ Yes ☐ No If yes, specify:

Two-adult requirement: ☐ Not required ☐ Required (reason must be recorded):

9. Procedure to Follow

(Outline the agreed routine step-by-step.)

Procedure:



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1. Gain child's consent and explain what will happen.
2. Encourage independence where possible.
3. Use PPE and follow hygiene procedures.
4. Carry out intimate care as agreed.
5. Dispose of waste appropriately.
6. Clean area and wash hands.
7. Record the care provided.
8. Inform parents if required (EYFS requirement).

10. Recording and Communication

How will intimate care be recorded?

- ☐ Changing chart
- ☐ Medical/health log
- ☐ Other:

How will parents be informed?

- ☐ Daily verbal feedback
- ☐ Written note
- ☐ Home-school communication system
- ☐ Only if concerns arise

11. Safeguarding Considerations

- Staff must report any marks, injuries, or concerning behaviour to the **DSL immediately**.
- Any refusal or distress must be recorded and shared with parents and the DSL.
- Staff must follow the **Safer Working Practice Guidance** at all times.



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12. Health & Safety / Infection Control

- PPE must be worn.
- Clinical waste must be disposed of in designated bins.
- Changing area must be cleaned after each use.

13. Review Arrangements

Review frequency: ☐ Termly ☐ Every 6 months ☐ Annually ☐ Other:

Next review date:

14. Agreement and Signatures

Parent/Carer

I agree to the intimate care arrangements outlined in this plan and confirm that the information provided is accurate.

Name:

Signature:

Date:

School Staff Member Completing Plan

Name:

Role:

Signature:

Date:

Designated Safeguarding Lead (DSL) Approval

Name:

Signature:

Date:



CHINLEY PRIMARY SCHOOL

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APPENDIX 2 – EYFS CHANGING RECORD

Chinley Primary School Nursery

Name of child _____

Soiled	Wet	Nappy	Time	Date	Comment	Signed



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