Rockwood Nursery School

Intimate Care Policy and Guidance

Updated September 2026

Introduction

Rockwood Nursery School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all children with respect and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain.

Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff members who provide intimate care to children have a high awareness of safeguarding issues. Staff will work in partnership with parents/carers to provide continuity of care.

Definition

Intimate care is any care which involves washing, touching or carrying out an invasive procedure to intimate personal areas. In most cases such care will involve procedures to do with personal hygiene and the cleaning of associated equipment as part of the staff member's duty of care. In the case of specific procedures only the staff suitably trained and assessed as competent should undertake the procedure.

Our Approach to Best Practice

The management of all children with intimate care needs will be carefully planned. The child who requires care will be treated with respect at all times; the child's welfare and dignity are of paramount importance.
Staff members who provide intimate care are fully aware of best practice. Suitable equipment and facilities will be provided to assist children who need special arrangements following assessment from the appropriate agencies.

It is essential that the adult who is going to change the child informs the teacher and/or another member of staff that they are going to do this. There is no written legal requirement that two adults must be present. However, in order to completely secure against any risk of allegation, a second member of staff may be present where resources allow.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes and age and stage of development. Wherever possible, staff involved in intimate care will not be involved in the delivery of relationships and sex education to the children in their care as an extra safeguard to both staff and children involved.

The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for him/herself as they are able.
Individual intimate care plans will be drawn up for children as appropriate to suit additional specific needs or circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers will need to be present when the child is toileted.

Wherever possible the child should be cared for by an adult of the same gender. However, in certain circumstances this principle may need to be waived where the failure to provide appropriate care would result in negligence of the child, for example, female staff supporting boys in our school, as no male staff members are available within the class.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's personal care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

The Protection of Children

Safeguarding Procedures and Multi-Agency Protection procedures will be adhered to. Where parents do not co-operate with intimate care agreements concerns should be raised with the parents in the first instance. A meeting may be called that could possibly include the health professional and a senior leader to identify the areas of concern and how all present can address them. If these concerns continue there should be discussions with the school's safeguarding leader about the appropriate action to take to safeguard the welfare of the child.

If any members of staff have concerns about physical changes to a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate designated person for safeguarding. If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of the process in order to reach a resolution; staffing schedules will be altered until the issue(s) are resolved.
All staff will be required to read the 'Intimate Care Policy and Guidance' document.

Intimate Care Guidance

Rockwood Nursery School is committed to providing personal care that has been recognised as an assessed need and indicated in the care plan for an individual child, in ways that:

- maintain the dignity of the individual child.
- are sensitive to their needs and preferences.
- maximise safety and comfort.
- protect against intrusion and abuse.
- respect the child's right to give or withdraw their consent. Parents will be contacted if this is experienced and the child remains soiled.
- encourage the child to care for themselves as much as they are able and
- protect the rights of everyone involved

The diversity of individuals and communities is valued and respected. No child or family is discriminated against.

Definition

Intimate personal care includes hands-on physical care in personal hygiene, and physical presence or observation during such activities. Intimate personal care tasks can include:

- body bathing other than to arms, face and legs below the knee.
- toileting, wiping and care in the genital and anal areas.
- dressing and undressing.
- application of medical treatment, other than to arms, face and legs below the knee

Scope

This guidance applies to all staff undertaking personal care tasks with children but particularly to those who are in the Early Years Foundation Stage. The normal range of development for this group of children indicates that they may not be fully toilet trained. Due to parenting issues it may be that some may not even have commenced toilet training at this age. In addition to this there are other vulnerable groups of children that may require support with personal care on either a short, longer term or permanent basis due to SEN and disability, medical needs or a temporary impairment.
This could include:

- children with limbs in plaster
- children needing wheelchair support
- children with pervasive medical conditions

Toilet Training

Starting nursery school has always been an important and potentially challenging time for both children and the schools that admit them. It is also a time of growth and very rapid developmental change for all children. As with all developmental milestones in the Early Years Foundation Stage (EYFS), there is wide variation in the time at which children master the skills involved in being fully toilet trained.

For a variety of reasons children in the EYFS may:

- be fully toilet trained
- have been fully toilet trained but regress for a little while in response to the stress and excitement of beginning school
- be fully toilet trained at home but prone to accidents in new settings
- be on the point of being toilet trained but require reminders and encouragement
- not be toilet trained at all but likely to respond quickly to a well-structured toilet training programme
- be fully toilet trained but have a serious disability or learning difficulties
- have delayed onset of full toilet training in line with other development delays but will probably master these skills during the Early Years Foundation Stage
- have SEND and might require help (during the EYFS and beyond) with all or some aspects of personal care such as washing, dressing or toileting.

Schools are **not** expected to toilet train pupils. Therefore, unless a child has a disability, as defined through legislation, it is expected that parents/carers will have trained their child to be clean and dry before their completion of the EYFS. Staff will change children who wet or soil themselves during the school day and parents will be requested to clean and return clothes provided.

Parents should be encouraged to train their child at home as part of their daily routine, and schools should reinforce these routines whilst avoiding any unnecessary physical contact. If at all possible, staff should work with children of the same gender and be mindful of and respect the personal dignity of the pupils when supervising, teaching or reinforcing toileting skills.

Safeguarding

The Statutory Framework requires Early Years providers to: safeguard children; ensure the suitability of adults who have contact with children; promote good health; manage behaviour and maintain records, policies and procedures. Schools are required to comply with KCSIE statutory guidance (Keeping Children Safe in Education 2026) and the Guidance for Safer Working Practice (Feb 2022).

This guidance is not prescriptive but offers advice for good practice based on the practical experience of staff in providing intimate care. Staff should be aware of these guidelines and encouraged to follow them for their own protection as well as for the protection of the children. They should also have a good knowledge of the school's Safeguarding. All staff members have to undertake safeguarding training. Policies and procedures should be in place as part of safeguarding framework relating to safeguarding both children and adults. It is also important that school leaders ensure staff are supported and trained so that they feel confident in their practice. DBS checks are rigorous and are carried out to ensure the safety of children with staff employed in schools and settings. All schools/ settings have a duty to ensure staff members are not employed without a CRB check. This must be checked before allowing staff to change children. It is essential that safer working practices are adhered to and that no setting or school simply relies on the results of a DBS check to ensure that staff are working appropriately. All schools are required to maintain a single central register which lists qualifications as well as details of training undertaken and checks undertaken.

It is essential that the adult who is going to change the child informs the teacher and/or another member of staff that they are going to do this. There is no written legal requirement that two adults must be present. However, in order to completely secure against any risk of allegation, a second member of staff may be present where resources allow.

Health and Safety

The school must promote the good health of children attending the setting and take necessary steps to prevent the spread of infection, and take appropriate action if children are ill or infectious.

Induction procedures and continued CPD should be in place within the school to support staff in dealing appropriately with issues of intimate care.

Rockwood Nursery School has procedures in place for dealing with spillages of bodily fluids such as the process to be followed when a child accidentally wets or soils himself, or is sick while on the premises. The same precautions will apply for nappy/pull ups/changing.

This could include:

- staff to wear fresh disposable aprons and gloves while changing a child
- soiled nappies/pull ups securely wrapped and disposed of appropriately in nappy sacks
- changing area/ toilet to be left clean
- site supervisor to be informed
- hot water and soap available to wash hands as soon as changing is done
- paper towels to be available to dry hands

Facilities and Resources

Providers must ensure there are suitable hygienic changing facilities for changing any children who are in nappies and providers should ensure that an adequate supply of clean bedding, towels, spare clothes and any other necessary items is always are available. A suitable place for changing children, including providing the necessary resources (see Health and Safety section) should be included in a school's Access Plan. The Department of Health recommends that one extended cubicle with a washbasin should be provided in each school for children with disabilities. Rockwood Nursery School has 2 accessible toilets, each containing washing facilities. 1 toilet (in the Owl bathroom), contains a shower.

The guidance is that whenever possible it is recommended that:

- mobile children are changed standing up
- if this is not possible the next best alternative is to change a child on a purpose-built changing bed (these are available as fixed and can accessed by the child with support)
- children in EYFS may be changed on a mat on a suitable surface if it is not possible for them to change standing up or on a changing bed.
- If facilities described above are not available, then children in EYFS may be changed on a changing mat on the floor.

Consideration of challenges for schools:

It can take around ten minutes to change an individual child. The resource allocation of staff time is therefore an important consideration that is constantly changing. It is therefore important that SLT remain aware that their staff allocations will need to be flexible in order to match need. Ten minutes is not dissimilar to the amount of time allocated to work with a child on an individual learning target. The leader of EYFS will monitor the number of children requiring intimate care and inform SLT if there are implications on staff time and ratios of care.

Changing time can be a positive learning time and an opportunity to promote independence and self-worth. The Senior Leadership Team will need to ensure that, where necessary, resources from the mainstream funding are ring fenced for support to SEND so that children's individual needs are met, including for toileting issues.
In practical terms toileting issues require the provision of:

- hot running water and soap (antibacterial where possible)
- toilet rolls
- antiseptic cleanser
- bowl/bucket
- paper towels/cloths
- disposable aprons and gloves
- nappy bags/sacks
- cleaning equipment
- bin
- a supply of spare nappies and wipes (provided by the child's parent/ carer)
- spare clothes (it always useful for each child to have their own spare clothes on their peg to change into for physical and emotional comfort).

Checks should be made beforehand to ensure that there are suitable facilities for intimate care available on excursions where they will be necessary and consider how intimate care can be dealt with in relation to after school club, transport to and from school etc.

School and Parent Partnership

Partnership between parents and school is an important principle in any educational setting and is particularly necessary in relation to children. Much of the information required by the school to make the process of intimate care as comfortable as possible is available from the parents. Regular consultation and information sharing remain an essential feature of this partnership. Issues around toileting should be discussed at a meeting with the parents/carers prior to admissions into the school/setting. Senior leaders must be made aware of these at this point. This will include admissions for children into EYFS and will also provide an opportunity to involve other agencies as appropriate, such as a Health Visitor.

Parents/ Carers will be asked to:

- agree to change the child at the latest possible time before coming to school
- provide spare nappies, wet wipes and a change of clothes
- understand and agree the procedures to be followed during changing at school
- agree to inform school should the child have any marks/rash
- agree how often the child should be routinely changed if the child is in school for the day and who will do the changing
- agree to review the arrangements, in discussion with the school, should this be necessary
- agree to encourage the child's participation in toileting procedures wherever possible.

The school will:

- agree to change the child should they soil themselves or become wet
- agree how often the child should be routinely changed if the child is in school for the full day and who would be changing them
- agree a minimum number of changes
- agree to report to a SLT member or SENDCo should the child be distressed or if marks/ rashes are seen
- agree to review arrangements, in discussion with parents/ carers, should this be necessary
- agree to encourage the child's participation in toileting procedures wherever possible
- discuss and take the appropriate action to respect the cultural practices of the family

The process for the management of a child's personal care needs may need to be further clarified through a Health Care Plan. For example, where the school has concerns about parental support, for children due to transfer to primary who are not toilet trained and for children with SEND.

When appropriate, parents and school will need to agree a toilet training programme. In the very small number of cases where parents do not co-operate or where there are concerns that:

- the child is regularly coming to school in very wet or very soiled nappies/pull ups and
- there is evidence of excessive soreness that is not being treated
- the parents are not seeking or following advice.

In the first instance concerns should be raised with the parents. A meeting may be called that could possibly include the health visitor and head teacher to identify the areas of concern and how all present can address them. If these concerns continue there should be discussions with the school's DSL about the appropriate action to take to safeguard the welfare of the child.

Confidentiality

Confidentiality is an important issue. All schools should have, as part of their partnership working, a Confidentiality section which is shared with all staff, parents and, where possible, pupils. Sensitive information about a child should be shared only with those who need to know, such as parents or other members of staff who are specifically involved with the child. Escorts and others should only be told what is necessary for them to know to keep the child safe. Parents and children need to know that where staff members have concerns about a child's wellbeing or safety arising from something said by the child or an observation made by the staff then the school's Responsible Person for Safeguarding will be informed. This may lead to the procedures set down in the school's Safeguarding Policy being implemented.

Information concerning intimate care will be recorded in the Intimate Care/Change log in each changing area and which can be accessed to check records on request by parents/carers. Parents or carers will be updated as needed on collection of their child.

Sharing information between home and schools is important to secure the best care for pupils but the consent of parents and their children who are able to give such consent is needed for the head teacher to pass on information about their child's health to school staff or other agencies. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the young person's right to privacy and dignity is maintained at all times. Agreeing a Procedure for Personal Care in School Intimate care in school can be provided only by those who have specifically (either as part of their agreed job description or otherwise) indicated a willingness to do so.

Schools should have clear, written guidelines for staff to follow when changing a child so that staff members are not put at any unnecessary risk.
Rockwood guidelines are:

- That the key person or teacher will normally change the child, or another suitable adult in the family room who is familiar to the child
- They will be changed in the bathroom area, unless this is in use and the additional bathroom needs to be used in another changing area.
- Staff will wear provided PPE equipment including gloves and apron.
- Resources provided by the parents will normally be used, if none are provided, nursery clothes and wipes will be used.
- All nappies will be disposed of into the nappy bin
- If a child is unduly distressed or if marks or injuries are noticed, school safeguarding policy will be followed.

- Any changes will be recorded on the intimate care record in each room and any significant change will be communicated to parents/guardians at the end of sessions/day.

Note: Staff should take care (both verbally and in terms of their body language) to ensure that the child is never made to feel insecure. Best practice should be followed and by ensuring that all of those involved with intimate care receive specific induction from the school on these procedures and protocols:

In summary

- Be fully aware of the legislative framework
- Recognise that for most children, achieving continence is one of many developmental milestones,
- Work in partnership with parents/ carers prior to and after admissions into the school
- Take full account of the religious views and cultural values attached to aspects of intimate care related to the child
- Agree with parents, staff and children, the appropriate terminology for private parts of the body and functions.
- Use these terms as appropriate.
- Agree a written procedure for personal care/ toileting
- Respect each child's personal dignity
- Get to know the child in a range of contexts to gain an appreciation of his/her moods and verbal/non-verbal communication
- Ensure clarity in job descriptions of the personnel involved in changing children
- View 'changing' time as a positive learning experience (aiming to gradually increase the child's independence and self-worth).

During Intimate Care:

- Speak to the child personally by name so that s/he is aware of being the focus of the activity
- Give explanations of what is happening in a straightforward and reassuring way
- Enable the child to be prepared for and to anticipate events while demonstrating respect for his/her body e.g. by giving them a strong sensory clue such as using a sponge or pad to signal an intention to wash or change
- When washing, always use a sponge or flannel and where possible encourage the child to attempt to wash private parts of the body him/herself
- Provide facilities which afford privacy and modesty e.g. separate toileting and changing for boys and girls or at least adequate screening; bathing changing one child at a time
- Respect a child's preference for a particular carer and sequence of care
- Keep records, which note responses to intimate care and changes in behaviour
- Best practice should be followed by ensuring that all those involved with intimate care receive specific induction from the school on these procedures and protocols.

Personal Care Guidance

Children are entitled to respect and privacy at all times and especially when in a state of undress, changing clothes, bathing or undertaking any form of personal care. There are occasions where there will be a need for an appropriate level of supervision in order to safeguard children and/or satisfy health and safety considerations. This supervision should be appropriate to the needs and age of the children concerned and sensitive to the potential for embarrassment.
Adults need to be vigilant about their own behaviour, ensure they follow agreed guidelines and be mindful of the needs of the children with whom they work.
This means that adults should:

- avoid any physical contact when children are in a state of undress
- avoid any visually intrusive behaviour

- where there are changing rooms announce their intention of entering

This means that adults should not:

- change in the same place as children
- shower or bathe with children
- assist with any personal care task which a child can undertake by themselves