

Calmore Infant school



Intimate care
Procedure and Guidance

September 2025

Introduction

At Calmore Infant School we want to ensure that all staff responsible for the intimate care of the children will undertake their duties in a responsible and professional manner at all times. Procedures have been adopted with referral to DFE Guidance including Keeping Children Safe in Education 2025 and Working Together to Safeguard Children 2018.

We recognise there is a need to treat children with respect and care.

The school would expect all children joining school in Yr R to be toilet trained unless there is a medical reason why this has not been possible. If children are not toilet trained, Year R Staff will discuss this at home visits/ induction meetings with parents and advise this needs to be in place before school to ensure children are at the same stage as their peers.

Where there is a medical need and the child cannot be expected to be independently access the toilet, the school would liaise with parents and medical professionals – school nurse etc to ensure the child's need were met. This would take place as part of the 'transition' procedures into school from Pre –School and parents.

There are incidents where children have an 'accident' and the school staff will change the child.

Aims

- To ensure children in school are comfortable and happy at all times
- To ensure that children are treated with sensitivity and respect
- To safeguard the rights and promote the welfare of children
- To provide guidance and reassurance to staff who are required to change children
- To assure parents that staff are knowledgeable about personal care and that their child's needs are considered
- To protect children from discrimination and ensure inclusion for all.

What is intimate care?

'Intimate care' covers any task that involves the washing, touching or carrying out of a procedure to intimate personal body areas and is associated with bodily functions and personal hygiene including:

- toileting- assisting a pupil who has soiled him/herself,
- has been sick or feels unwell,

- washing
- dressing/undressing,
- feeding, oral care.

Working with young children adults are often required to be involved in duties that require intimate care of children and it is a very sensitive issue. Staff are required to be respectful of a child's needs and aware of safeguarding issues- vulnerability of children and vulnerability of adults. The child's dignity should be preserved with a high level of privacy, choice and control. In order to promote independence, children need to be supported in their understanding of toileting procedures.

Staff must be open to scrutiny and work with parents to provide continuity of care to children wherever possible.

Who will undertake intimate care?

This should be undertaken by named staff – not by visitors or parents other than the child's own parents.

In most circumstances the child's regular class LSA will be responsible for changing them. However, this may not be possible, so another member of staff may need to carry out the procedure member. At lunch times this can be an LSA from another year group and at other times it may be a member of the administration team.

Staff will talk to the child to reassure them e.g. if an accident and the child distressed. Staff will talk about what they are doing, promoting and praising independence as well as talking about their learning that day.

Where will intimate care take place?

The majority of times the Intimate care will usually take place in the class toilets as the care will usually be a result of an accident. For children with medical need / physical disability the accessible toilets will be used as the child's equipment can be stored here and as it is likely that there will be heavy soiling it is easier for the area to be kept clean and the child's dignity preserved.

In Yr R and Yr I the class toilet areas are private enough to protect the child's dignity. It also provides the staff undertaking the intimate care with the knowledge that their class teacher is nearby in an adjacent room so they are not vulnerable as well.

In Yr 2 the class toilets are not within the class so it is necessary for the person doing the changing to inform another member of staff and keep outside door open while the child changes themselves in the cubical.

In Yr 1 and Yr R the adult dealing with the incident will need to tell another adult what they're doing and if possible leave adjoining door open. It is not possible to have 2 members of staff involved so as long as another adult has been aware then this will be deemed to be sufficient.

All intimate care procedures will be recorded in a log book, either in a separate class one or in the log book in the accessible toilets if that is where the child has been changed. Parents will be advised at the end of the day if the need to change the child it was the result of 'an accident' or in line with the child's personal care plan/EHCP.

If the accident is more serious in nature, then 2 members of staff may be required to deal with the incident and the incident in this case may well be dealt with in one of the accessibility toilets to allow for more discretion for the child. If a changing mat is required or if the soiling is heavy then the accessibility toilets allow more room. The member of staff will ensure that their colleague is informed and if necessary a second member of staff may be required to help.

If the child is distressed by the experience a phone call will be made to parents. They may be asked to take the child home if they are unwell.

Changing Procedures

- All staff involved have a DBS check
- All staff encourage children to be independent as much as possible.
- All staff will have informed another member of staff that they are dealing with an incident
- All staff will make a record

Soiling

1. Staff respond sensitively and professionally
2. Child will change themselves into dry clothing and wet items bagged up and sent home for washing. The child's independence will be encouraged as far as possible and staff will reassure.
3. Staff to wear disposable plastic apron and gloves - but hand washing essential afterwards

4. A record of the incident will be kept in school and parent informed verbally at home time/ phone call/note.

Heavier soiling/vomit

1. Staff respond sensitively and professionally.
2. Child removed to less public place to avoid humiliation.
3. Child encouraged through guidance and assistance to clean themselves to make them more comfortable.
4. Staff put on disposable apron and gloves.

The process

If adult help is needed, the adult is to remove only the clothes required to reach the soiled pants/ pull ups (for children with medical needs), unless further soiling has occurred and the child needs to be changed fully.

1. Adult to remove soiled pants/ pull ups. Pull ups put in nappy bin in the Pre -school.
2. Child's skin cleaned – wiped- by child wherever possible and wipe disposed of.
3. Child to be dressed or encouraged to dress in clean clothes if soiled. Dirty clothes to be put in a bag and given to parents at the end of the day.
4. Children wash their hands thoroughly
5. Staff to wash hands thoroughly and clear and clean area.
6. If changing mat used- all equipment to be cleaned before and afterwards with antibacterial wash/ spray
7. A record of the incident will be kept in school and parent informed verbally at home time/ phone call/note.
8. If it is suspected that the child is unwell, then the member of staff will take the child to the medical room and office staff will contact home.

In all cases the adult concerned need to be aware of the vulnerability of the situation and is aware of the need to ensure another member of staff is aware of the procedure taking place.