



# **Intimate Care Policy**

September 2025

To be reviewed September 2028

**Aim**

This policy aims to ensure that each child is treated with respect and dignity during moments of intimate care and that the potential risks to adults associated with toileting and intimate care needs are managed appropriately. It ensures that employees do not work outside the remit of their responsibilities as set out in this policy.

**Rationale**

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with our Child Protection Policy, Health and Safety Policies and Medication Policy.

**Intimate Care Tasks** – covers any task that involves dressing and undressing, washing including intimate parts, helping someone use the toilet, changing nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

Abercromby Nursery School aims to:

- Safeguard the rights and promote the best interests of the children
- Ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one
- Safeguard adults required to operate in sensitive situations
- Raise awareness and provide a clear procedure for intimate care
- Inform parents/carers in how intimate care is administered
- Ensure parents/carers are consulted in the intimate care of their children

**Partnership with Parents/Carers**

Staff at Abercromby Nursery School work in partnership with parents/carers to provide care appropriate to the needs of each individual child, according to their age and stage of development in becoming independent in their self-care. Our aim is to work together with parents and carers to promote every child's journey towards independence.

Parents/Carers are asked to supply nappies, wipes, nappy sacks, spare clothes and spare underwear as needed.

In order to achieve our aims we will:

**Support dressing/undressing**

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed. Staff will always encourage children to attempt undressing and dressing unaided.

**Provide comfort or support**

Children may seek physical comfort from staff. Our children are very young and often need physical reassurance e.g. through a hug, or sitting close to an adult. Where children require that close physical support, staff need to be aware that physical contact must be child initiated and led, and must be sensitive to when a child has had enough. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body which could be regarded as intimate. Staff must provide care which is suitable to the age, gender and situation of the child.

If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently discouraged in a way which communicates that the touch, rather than the child, is unacceptable.

### **Nappy Changing Procedure**

Best practice is that the child has their nappy changed by their Keyperson, someone they have formed an attachment to and are comfortable with. We record the times when children are changed and this is carried out as and when necessary for the individual child.

- Strict hygiene procedures are followed when supporting children to use the toilet and changing nappies.
- The changing area is kept warm and there are safe and comfortable areas to lay young children if they need to have their personal needs met.
- Each child who wears nappies, has a named basket on the shelf in the changing area, with their own nappies, wipes and nappy sacks. They will also have a change of clothes in a named PE type bag, which is kept on the child's peg.
- Gloves and aprons are put on before changing starts and the areas are prepared. The mat is sprayed by anti-bacterial spray and wiped clean and dried after each nappy change.
- In addition, we ensure that nappy changing is relaxed and a time to promote independence in young children.
- Staff are gentle when changing; they avoid pulling faces and making negative comment about 'nappy contents'.
- Staff do not make inappropriate comments about young children's genitals when changing their nappies.
- Young children from two years can wear 'pull ups' or other types of trainer pants as soon as they are comfortable with this and their parents have begun the first stages of toilet training.
- Young children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet.
- All children should be encouraged to wash their hands and have soap and paper towels to hand. They should be allowed time for some play as they explore the water and the soap.
- Nappies and 'pull ups' are disposed of hygienically. Any soil (faeces) in nappies or pull ups is flushed down the toilet and the nappy or pull up is bagged and put in the special lined bin (this is considered double wrapping). The used nappies are then placed in the specified yellow bin outside and collected by a reputable disposal company every fortnight. Cloth nappies, trainer pants and ordinary pants that have been wet or soiled are rinsed and bagged for the parent to take home.
- Older children access the toilet when they have the need to and are encouraged to be independent.
- At all times staff will respect the privacy of the individual when addressing care needs.

### **Cleaning older children who have had a toilet accident.**

When cleaning a child, staff are always aware of the possibility of invading a child's privacy and respect the child's wishes and feelings. If a child needs to be cleaned, staff make sure that:

- Protective gloves are worn
- The procedure is discussed in a friendly and reassuring way with the child throughout the process
- The child is encouraged to care for him/herself as far as possible
- Physical contact is kept to the minimum possible to carry out the necessary cleaning
- Privacy is given appropriate to the child's age and the situation.
- All spills of vomit, blood or excrement are wiped up and flushed down the toilet
- Any soiling that can be, is flushed down the toilet
- Soiled clothing is put in a plastic bag, unwashed, and sent home with the child.

### **Children with SEND**

Where appropriate, a specific plan will be completed for SENDs children. This will set out:

- What care is required
- Number of staff needed to carry out the task (if more than one person is required, reason will be documented)
- Additional equipment required
- Child's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions
- Child's level of ability i.e. what tasks they are able to do by themselves
- Acknowledge and respect for any cultural or religious sensitivities related to aspects of intimate care
- Be regularly monitored and reviewed in accordance with the child's development

Parents/Carers are asked to supply spare clothes and spare underwear.

### **Hygiene**

All staff are familiar with normal precautions for avoiding infection, and follow basic hygiene procedures, including the use of protective, disposable gloves and aprons. A fresh set is put on for each child.

### **Protection for staff**

Members of staff are aware of the danger of allegations being made against them and take precautions to avoid this risk. These include:

- Gaining a verbal agreement from another member of staff that the action being taken is necessary
- Allowing the child, wherever possible, to express a preference to choose his/her carer and encouraging them to say if they find a carer to be unacceptable
- Allowing the child a choice in the sequence of care
- Being aware of and responsive to the child's reactions

### **Safeguarding**

All staff are DBS checked on application and cannot undertake personal care tasks within the setting until all checks are completed satisfactorily. Personal and professional references are also required and unsuitable candidates are not permitted to work within the school.

Volunteers do not carry out intimate care procedures.

Staff are trained on the possible signs and symptoms of abuse (full training annually, safeguarding updates half termly) and have read part 1 of the DfE guidance 'Keeping

Children Safe in Education'. If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc they will inform the Safeguarding Lead immediately. The Safeguarding Policy will then be implemented.