



LAUNDE PRIMARY SCHOOL

Toileting and Intimate Care Policy

Written: June 2025

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Signed Copy Held centrally

All children at Launde Primary School have the right to be safe and treated with dignity, respect and privacy at all times to enable them to access all aspects of the school and curriculum.

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 Safeguarding Policy, Health and Safety Policies and Administering of Medicines Policy.

This policy has due regard to the legislation and guidance of:

The Equality Act, Keeping Children Safe in Education and The Children and Families Act

Launde Primary School will ensure that:

- No child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day-to-day activities.
- No child with a named condition that affects personal development will be discriminated against
- No child who is delayed in achieving continence will be refused admission
- No child will be sent home or have to wait for their parents/carer due to incontinence
- Adjustments will be made for any child who has delayed incontinence

Intimate Care Tasks include the following:

- dressing and undressing (underwear)
- washing including intimate parts
- helping someone to get on or off the toilet
- changing nappies
- carrying out a procedure that requires direct or indirect contact to an intimate personal area.

Partnership with Parents/Carers

Staff at Launde Primary School work in partnership with parents/carers to provide care appropriate to the needs of the child. The care plan 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)
- Appropriate training as required
- 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 may be asked to supply the following:

- Additional nappies
- Wipes, creams, nappy sacks etc
- Additional set of clothes
- Spare underwear

Best Practice

When intimate care is required, the member of staff explains fully the task that is to be carried out and the reason stated for this. Staff will encourage children to do as much for themselves as they can. All staff maintain high standards of personal hygiene and will take all practicable steps to prevent and control the spread of infection by cleaning the area thoroughly after use and through careful hand washing. If physical contact with the child is necessary, disposable gloves and aprons are available and should be worn.

All staff involved in intimate care will:

- Consult with colleagues where any variation from agreed procedure/care plan is necessary
- Record the justification for any variations to the agreed procedure/care plan and share this information with the pupil and their parents/carers
- Avoid any visually intrusive behaviour
- Always consider the supervision needs of the pupils and only remain in the room where their needs require this.
- Not change or toilet pupils in the presence or sight of other pupils
- Not assist with intimate or personal care tasks which the child is able to undertake independently.

Written guidelines will specify:

- Who will carry out the care, if possible, this should be a person of the child's choice or the child's key person, and what, if any training / assessment they might require.
- What equipment / resources will be required to undertake personal care.
- What resources will be used (Cleansing agents used or cream to be applied)
- How equipment / waste will be disposed of e.g., double bagged / use of nappy disposable unit.
- How the child's clothes, if soiled, will be returned to the parents. Spare clothes may be required.
- What Infection Prevention measures are in place?
- What the staff member will do if the child is unduly distressed by the experience or if the staff member notices marks or injuries.
- Arrangements for care during school trips and residential visits.

Dealing with body fluids

Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely by depositing them in the appropriate bins provided. When dealing with body fluids, staff will use appropriate PPE: disposable plastic gloves, aprons, face mask and if required face shield/goggles.

Soiled clothing should be double bagged and passed discretely to the parent/ carer. Staff will not rinse clothing.

Used PPE will be double bagged and disposed of in the allocated bin.

Safeguarding

Staff are trained in the signs and symptoms of child abuse which is in line with Government guidelines.

All staff working in our school have a DBS check. If a child has regularly requires intimate care, staff members who will carry this out are identified on the intimate care plan.

When a child requires intimate care, the reason for this will be logged with the reason, date and time (*appendix 2*).

If a member of staff is concerned about any physical or emotional changes to a child, such as soreness, marks, bruises or distress, they will inform the Headteacher immediately. The Safeguarding Policy will then be implemented.

If a child should become unhappy about being cared for by a particular member of staff, school staff will look into the situation and discuss it with the child's parents/ carers. Advice from other agencies will be sought as appropriate.

Links with other policies

A signed record of all intimate and personal care tasks undertaken must be kept including: -

- In which room the tasks were carried out.
- Details of the task and care that was carried out.
- Time of entry to the room.
- Time the task was completed, and all parties left the room.
- Names of the staff members involved in carrying out the care.

Should a member of staff be concerned about a child's physical or psychological wellbeing they must discuss this immediately with the Designated Safeguarding Lead (DSL)

Appendix 1 – Frequently Asked Questions

It is not part of my job description to change nappies or pants. Do I still have to do this?

All settings have a duty of care to their children. Attending to personal needs falls into this category.

While there is no duty on teachers and school support staff to change nappies or pants, staff can volunteer. However, where some staff are willing to provide personal care and others not, the organisation would need to discuss the issue, so that children, parents, and staff continue to feel valued.

However, settings/schools do have a duty of care to support the child in the same way that parents/carers do at home. Where no volunteers come forward the setting/school will need to employ staff appropriately.

It is highly recommended that when job descriptions are reviewed, personal care and the promotion of independent self-care skills should be considered.

Who provides the nappies?

The child's parent/carer should provide the nappies and any creams/lotions and nappy sacks. However, if you have a nappy disposal unit, nappy sacks will not be required.

Wipes for cleaning the child can be provided by parents or the setting. It will need to be made clear on your policy who will provide these. Alternatively, water and wipes can be made available by the setting.

The setting should provide disposable gloves and aprons for the staff.

Anti-bacterial spray for cleaning the area afterwards is required and should be provided by the setting.

If you do not have a purpose-built changing area, the toilet area can be used. The dignity and privacy of the child is paramount. It is not appropriate to carry out tasks on the floor.

How do we dispose of the nappies?

A risk assessment should be carried out.

Nappies and wipes can be double bagged and placed in the domestic waste bins. If a nappy disposal unit is used, the contents should be put into a sealed bag (if not double bagged already) and placed in the main bin.

Soiled nappies should not be given to parents at the end of the session as this is unhygienic and demeaning.

Do we need more than one person to change a child?

No, all staff are DBS checked. Recruitment and selection procedures and ongoing suitability checks, such as supervisions and appraisals provide evidence that staff are suitable.

Your safeguarding policy should also state what staff should do if they have concerns and linked to your person care policy.

Most children are out of nappies by the time they are 3 years old, why is this an issue?

All children are unique and have a right to be seen as an individual. Personal circumstances, health or development have to be viewed holistically with the child's right to access services. Children should not be discriminated against due to individual needs. Around 10% of children are unable to achieve this milestone for a variety of reasons and will require support throughout school years.

How do we manage changing older children?

All children vary considerably in their needs and wishes around personal care. The setting should talk to the children and liaise with the parents so needs can be understood and met. Dignity and privacy are paramount.

How do we manage children becoming upset when they have 'accidents' or need changing?

It is important all staff, following a clear management lead, are positive in their attitude to personal care. As with all emotional experiences children benefit from acknowledgement and acceptance of their feelings and an empathic and solution focused response. '...and should be encouraged to have a positive image of her/his body' [Lenehan et al., 2004 p23]

It is vital that the child has a key person, who is familiar with and respected by the child. It is important that contingency plans are in place in the event of staff absence, and that the child is comfortable with the alternative staff member.

Appendix 2

INTIMATE CARE PLAN	
Name of child	
Type of intimate care needed	
How often care will be given	
What training staff will be given	
Where care will take place	
What resources and equipment will be used, and who will provide them	
How procedures will differ if taking place on a trip or outing	
Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan	
Name of parent or carer	
Relationship to child	
Signature of parent or carer	
Date	

Appendix 3

Intimate Care Log	
Name of child	
Date	
Time	
Reason for care	
Where took place	
What care was needed	
Other adult informed	
Carried out by	

Summary of Toileting Policy for Schools, Settings and Academies

- Not every child achieves continence as part of usual milestone achievement.
- All children should be looked after as individuals, with any additional needs supported where necessary with reasonable adjustments.
- Incontinence is classed as a disabling condition and as such is protected under the Equality Act 2010.
- Schools have a duty of care to support children as their parents support them.
- Intimate or personal care procedures should not involve more than one member of staff unless the pupil's care plan specifies anything different.
- Should a member of staff be concerned about a child's physical or psychological well-being they must discuss this immediately with the Designated Safeguarding Officer (DSO).
- All staff involved in supporting a child or young person with toileting must have received the relevant training in order to support each individual child appropriately.
- A care plan will be put in place for each child, written and agreed by the child, child's parents/carers, school and health care professional where appropriate.
- Toilet facilities should be clean and warm and allow absolute privacy and dignity for the child.
- Toilet facilities should be available at all times.
- Children and young people with continence issues should be able to access school trips and residential visits in the same way as all the other students in the school.