



Queen's Park Mission Statement

Bravely navigate a changing world—with curiosity, confidence, and joy.

Queen's Park Vision

Our children love coming to school. They experience success through strong, trusting relationships, a deep sense of belonging, positive connections with others, and the courage to challenge themselves.

We celebrate the strength of our diverse community. We create a safe, welcoming environment where every child is seen, heard, and truly valued. Learning is exciting and challenging, with plenty of opportunities to explore new ideas, aim high, and discover individual talents.

We encourage children to ask big questions, stand up for what they believe, and understand different perspectives.

Together with families, we help children develop the knowledge, skills, and character they need to thrive in a changing world. We want every child to feel proud of who they are—and brave enough to shape a better future.

Queen's Park Values

Kindness - Integrity - Excellence - Collaboration

Intimate Care and Toileting Policy and Procedures

Date	September 2025
Review Date	September 2026
Based on	Hill Park School, Brighton. Intimate Care training.

Introduction



Intimate Care Policy

Queen's Park Primary School's primary concern is to address the needs of all children to help them enjoy and achieve. We work in partnership with parents/carers and encourage and support the involvement and inclusion of individual children. The application of this intimate care policy ensures that children with additional toileting needs can access all aspects of schooling.

Children's dignity will be preserved and the highest level of privacy, choice and control will be provided to them. Staff who provide intimate care to children are safeguarding trained and work in partnership with parents/carers to provide continuity of care to children wherever possible.

Queen's Park Primary 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.

Definition

Intimate care is any care which involves washing, touching or carrying out a procedure invasive to privacy to intimate personal areas. Examples include care associated with continence and nappy changing as well as more ordinary tasks such as help with washing.

Child Protection

- If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the designated safeguarding lead, who will follow the procedures outlined in the Child Protection policy.
- If any parent or member of staff has concerns or questions about intimate care procedures or individual routines please see the SENDCo or a member of SLT at the earliest possible opportunity.
- 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 as part of this process in order to reach a resolution.
- The setting operates a Whistle-blowing Policy as a means for staff to raise concerns relating to their peers. The management supports this by ensuring staff feel confident in raising worries as they arise in order to safeguard the children at the school.
- If an allegation is made against a member of staff, the setting will follow the procedure outlined in the Safeguarding and managing allegations against staff Policies.

General procedures

Intimate Care Policy

All staff who provide intimate care are trained to do so, including Child Protection and Health & Safety training.

There is careful communication with each child who requires assistance with intimate care in line with their preferred means of communication to discuss the child's needs and preferences. Staff will encourage each child to do as much for themselves as they can and individual intimate care plans will be drawn up for the child in consultation with parents/carers and relevant professionals.

One child will be cared for by one adult where possible with a second adult alerted to the incident. However, in some circumstances, it may be necessary to have 2 members of staff present (please see below for example circumstances). Parents/carers will be involved with their child's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the child's care plan. The needs and wishes of children and parents will be carefully considered alongside any possible constraints.

Nappy/ Pad changing procedure

- Intimate care procedures will be carried out by the child's key staff member or a familiar adult wherever possible.
- A child will always be consulted before an intimate care routine takes place following their preferred means of communication. This gives the child time to process what is going to happen next. They will never be forced to leave what they are doing.
- Mobile children can be changed standing up. The child's preference/needs will be considered, together with any assessed risks involved.
- Staff will wash their hands and wear disposable gloves while changing a child. These items will be supplied and replenished by the school. For more information on Infection Control, please see our Infection Control Standard.
- Soiled nappies, pads, wipes and gloves will be securely wrapped and disposed of appropriately in the designated covered bin with a disposable liner. The bin will be emptied at least once a day and the liner replaced.
- The changing area will be cleaned with a detergent spray or soap and water.
- Hot water and soap is available for staff to wash hands as soon as changing is finished.
- Paper towels and a hand dryer are available.

In the case of children not being toilet trained when starting school

Intimate Care Policy

- Where a child is not toilet trained upon entry to school, and has no identified medical need, staff will work closely with the child and parent to ensure children are toilet trained by October half term at the latest. A referral will also be made to the school nurse to gain further support.
- The Hive will be the designated area for the changing of children who are not toilet trained and children will be supported to change here twice a day (once in the morning and once in the afternoon).
- One adult will support the child but there may be another adult with children in the room for changing. Adults will use screens to preserve dignity.
- The adult should narrate the process aloud as the guide the child through the process making every effort to allow the child to be as independent as possible.

For further wetting incidents:

- Use the children's toilets. One adult will support the child by narrating the process as they are guided to change independently. The child should change their underwear themselves in the toilet; the adult can support with uniform, shoes and bagging dirty items. A second adult will be alerted.
- Parents/carers will be informed.

For extreme soiling incidents:

- Use the disabled toilets (unless it is at a regular changing time in the Hive). The door should remain partially open. The staff member should narrate the process aloud. A second adult will be alerted.
- Parents/carers will be informed.

Senior Leader Declaration

I have read, understood and agree to enforce the Intimate Care & Toileting Policy.

Signature:

Printed:

Date:

Employee Declaration

I have read, understood and agree to follow the Intimate Care & Toileting Policy.

Signature:

Printed:

Date:

Parent/Carer Declaration

I have read, understood and agree to enforce the Intimate Care & Toileting Policy.

Signature:

Printed:

Date:



INDIVIDUAL CARE PLAN: INTIMATE CARE (From Hill Park)

Name of child _____

Date of birth _____ Date plan was written _____

Was this care plan discussed with child? YES / NO

If no, please indicate reason

Agreed with parent Date: _____ Signature: _____

Please describe here the type of intimate care that requires assistance

E.g. child soils and requires assistance/supervision with cleaning themselves, disposing of soiled pad / underwear and re-clothing, child needs assistance with dressing, feeding and medication etc.

Does this intimate care procedure require additional training for staff members? YES / NO

If YES, please indicate here who will provide the training and how often staff will need to have refresher training.

Who will provide the care? Please list staff members trained to provide this care.

Name	Position/job	Date of training

Communication/choice.

How is the child going to indicate who they want to assist in their care, when they need assistance and if they have any preferences relating to their intimate care? This may need to involve the wider MDT and the development of their communication system.



Where will this care be provided? Please be specific about identified area.

Detail here what equipment the child / young person may need (i.e. continence pad - size, catheters, toilet seating, gastrostomy equipment etc.) and who is responsible for providing it.

What is the child able to do for themselves?

This will need to be considered as an area for encouraging learning and promoting independence, no matter how small the participation. Please list termly learning goals.

Any other comments

Agreed by _____ please sign, print name and role

Signed _____ Print _____

Role _____ Date _____

Agreed by _____ please sign, print name and role

Signed _____ Print _____

Role _____ Date _____

Agreed by _____ please sign, print name and role

Signed _____ Print _____

Role _____ Date _____