



Intimate Care Policy

Approved By:	Full Governing Body
Last reviewed on:	September 2026
Next review on:	September 2028

Introduction:

Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene, which demand direct or indirect contact with, or exposure of the genitals. Examples include care associated with continence.

- Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them.
- Staff who provide intimate care to children have a high awareness of child protection issues.
- Staff behavior is open to scrutiny and staff at setting work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.

The 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. The school recognizes that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

OUR APPROACH TO BEST PRACTICE

- All children who require intimate care are treated respectfully at all times; the child's welfare and dignity is of paramount importance.
- Staff who provide intimate care are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/occupational therapist as required.
- Staff will be supported to adapt their practice in relation to the needs of individual children, taking into account developmental changes.
- There is careful communication with each child who needs help with intimate care, in line with their preferred means of communication (verbal, symbolic, etc) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

- As a basic principal, children 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 themselves as they can.
- Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many staff might need to be present when a child's needs help with intimate care. Where possible, one child will be cared for by one lead adult with whom they are familiar. A second adult may provide supervision unless there is a sound reason for having two adults present to provide care. If this is the case, the reasons should be clearly documented.
- If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc she/he will immediately report concerns to the appropriate person for child protection. A clear record of the concern will be completed and referred on if necessary. (see child protection policy)
- The child's needs will remain paramount.
- Further advice will be taken from outside agencies if necessary.

1. Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- The dignity, privacy, rights and wellbeing of every child are safeguarded
- Pupils who require intimate care are not discriminated against, in line with the Equality Act 2010
- Parents/carers are assured that staff are knowledgeable about intimate care and that the needs of their child are taken into account
- Staff carrying out intimate care work do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the pupils involved

Intimate care refers to any care that involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

2. Legislation and statutory guidance

This policy complies with the Department for Education (DfE) statutory safeguarding guidance:

- [Keeping Children Safe in Education](#)
- [Early Years Foundation Stage \(EYFS\) statutory framework](#)

3. Role of parents

3.1 Seeking parental permission

For children who need occasional intimate care, for example as a result of a toilet accident, school will inform parents that this has occurred. This may be done by the class teacher at the end of the school day or by a phone call from the school welfare officer.

For children who need routine intimate care (e.g. for toileting or toileting accidents), parents will be asked to sign a consent form.

For children whose needs are more complex or who need particular support outside of what's covered in the permission form (if used), an intimate care plan will be created in discussion with parents (see section 3.2 below).

Where there isn't an intimate care plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure.

If the school is unable to get in touch with parents and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the school will inform parents afterwards.

3.2 Creating an intimate care plan

Where an intimate care plan is required, it will be agreed in discussion between the school, parents, the child (when possible) and any relevant health professionals.

The school will work with parents and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents will be consulted.

The plan will be reviewed once a year, even if no changes are necessary, and updated whenever there are changes to a pupil's needs.

See appendix 1 for a blank template plan to see what this will cover.

3.3 Sharing information

The school will share information with parents as needed to ensure a consistent approach. It will expect parents to also share relevant information regarding any intimate matters as needed.

4. Role of staff

4.1 Which staff will be responsible

As school staff (teachers/ teaching assistants/ welfare team) are acting in loco parentis during the school day they may be asked to support with the provision of intimate care for pupils.

No other staff members can be required to provide intimate care.

All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.

4.2 How staff will be trained

Staff will receive:

- Training in any specific types of intimate care they undertake
- Regular safeguarding training
- If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as is possible

They will be familiar with:

- The control measures set out in risk assessments carried out by the school
- Hygiene and health and safety procedures, including those related to COVID-19
- They will also be encouraged to seek further advice as needed.

5. Intimate care procedures

5.1 How procedures will happen

Where possible staff will support students to manage their intimate care independently.

When staff need to intervene and provide intimate care, there will always be 2 members of staff present – at least one of whom will have an enhanced DBS with barred list check and both of whom will have had appropriate safeguarding training.

Procedures will be carried out in the Welfare Room, Disabled Toilet or School House Bathroom facility.

When carrying out procedures, the school will provide staff with:

- protective gloves

- cleaning supplies
- changing mats if needed
- bins.

For pupils needing routine intimate care, the school expects parents to provide, when necessary, a good stock (at least a week's worth in advance) of necessary resources, such as nappies, underwear and/or a spare set of clothing.

Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.

Any instances of where intimate care has been provided will be logged in the Welfare Room.

5.2 Concerns about safeguarding

If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the school's safeguarding procedures.

If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to the Welfare Officer.

If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the school's safeguarding procedures as outlined in the school's Safeguarding and Child Protection Policy.

Where the school notices an increasing pattern of soiling instances, it will first hold a meeting with parents/carers and with any other relevant individuals, such as medical professionals involved with the child to discuss why this might be occurring, and how to help the child. If the pattern continues, the school's designated safeguarding lead (DSL) will be notified.

5.5 Specific procedures for toileting accidents

Where pupils are starting school without having been toilet-trained, staff will work with the pupil's parents/carers to agree on a care plan.

The school will record the number of soiling incidents in school, and liaise with the pupil's parent/carers about:

- The outcomes of relevant medical appointments attended by the child
- Whether there is a change in the pattern of soiling incidents, at home or at school
- Whether the current plan is working

6. Monitoring arrangements

This policy will be reviewed by the Full Governing Body every two years. At every review, Full Governing Body will approve the policy.

7. Links with other policies

This policy links to the following policies and procedures:

- Accessibility audit and plan
- Child protection and safeguarding
- Health and safety
- SEN Policy
- Supporting pupils with medical needs

Appendix 1: template intimate care plan

PARENTS/CARERS	
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	
CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	

PARENTS/CARERS	
Signature of child	
Date	

Appendix 2: template parent/carer consent form

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carer	
Address	
I give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting)	☐
I will advise the school of anything that may affect my child's personal care (e.g. if medication changes or if my child has an infection)	☐
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns	☐
I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident). Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed).	☐

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE

I understand that if the school cannot reach me or my emergency contact if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.

Parent/carer signature

Name of parent/carer

Relationship to child

Date