

LOVE, COURAGE & RESPECT
Learning and Achieving Through Love, Courage and Respect

BRIGHSTONE C.E. PRIMARY SCHOOL



Intimate Care Policy 2025 - 2026

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1. Aims

Pupils may require assistance with intimate care as a result of their age, due to have SEND or an impairment which may affect their ability to carry out normal day-to-day activities. In all instances, effective safeguarding procedures are of the utmost importance.

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- Pupils are treated with care and respect when intimate care is provided
- The dignity, rights and wellbeing of every child are safeguarded
- Pupils who require intimate care are not discriminated against, in line with the Equality Act 2010
- Pupils have the right to give or withdraw consent
- Parents/carers are assured that staff are knowledgeable about intimate care and that the needs of their child are considered
- 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
- Pupils are encouraged to care for themselves as much as they can, where possible and in agreement with parents/carers

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

Definitions

For the purpose of this policy, intimate care is defined as any care which may involve the following:

- Washing
- Touching
- Carrying out an invasive procedure
- Changing a child who has soiled themselves
- Providing oral care
- Feeding
- Assisting in toilet issues

- Providing menstrual care
- Providing comfort to an upset or distressed pupil

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of, the genitals.

Examples of intimate care include support with dressing and undressing (underwear), changing incontinence pads, nappies or medical bags such as colostomy bags, menstrual hygiene, helping someone use the toilet, or washing intimate parts of the body.

Pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

The provision of personal care will always be deemed to be regulated activity regardless of frequency and whether they are supervised or not.

2. Legislation and statutory guidance

This policy complies with [statutory safeguarding guidance](#).

It has due regard to all relevant legislation and statutory guidance including, but not limited to:

- Children and Families Act 2014
- Education Act 2011
- Health Act 2006
- Equality Act 2010
- DfE Keeping Children Safe in Education 2025

3. Role of parents/carers

For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parents/carers 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/carers (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 applicable.

If the school is unable to get in touch with parents/carers 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/carers afterwards.

Parents/carers will change their child, or assist them in going to the toilet, at the latest possible time before coming to school.

Parents will provide spare nappies, incontinence pads, medical bags, wet wipes, cream, sanitary items and a change of clothing, including underwear, in case of accidents.

A copy of this policy will be with parents/carers to ensure that they understand the policies and procedures surrounding intimate care.

Parents/carers will inform the school should their child have any marks or rashes or if there are cleanliness concerns.

Parents/carers will come to an agreement with staff in determining how often their child will need to be changed.

Parents/carers will complete the required medication forms for children who require cream or lotion to be applied to their skin.

Parents/carers will work with school staff to support the intimate care plan by providing consistency by replicating procedures at home.

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

The school will work with parents/carers 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 considered. If there's doubt whether the child is able to make an informed choice, their parents/carers will be consulted.

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

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

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

4. Role of staff

4.1 Which staff will be responsible

Any roles who may carry out intimate care will have this set out in their job description. This includes teachers and teaching assistants.

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 the 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 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

They will also be encouraged to seek further advice as needed. Training may be provided by the Local Authority, by the Nursing Team, by a national training programme (e.g. The National College), and advice about routines may be obtained from the child's parents/carers.

5. Intimate care procedures

5.1 How procedures will happen

Wherever possible, there will be two members of staff present during all intimate care procedures. This follows health and safety, and safeguarding, best practice. Where this is not possible, the member of staff who has carried out the procedure will make a record of the procedure on the pupil's intimate care plan. If a pupil doesn't have an intimate care plan, the parents will be informed discretely.

Procedures will be carried out in an appropriate room or area, depending on the nature of the intimate care required.

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

- protective gloves
- cleaning supplies
- changing mats
- plastic bags

For pupils needing routine intimate care, the school expects parents/carers 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 discretely returned to parents/carers at the end of the day.

Soiled nappies, incontinence pads and medical bags will be securely wrapped and disposed of appropriately. Where a pupil requires intimate care or toileting support, nappies, incontinence pads and medical bags will be disposed of in an ordinary bin, as per health and safety guidelines.

The changing area or toilet will be left clean. Hot water and soap will be available to wash hands. Paper towels will be available to dry hands.

5.2 Staff and facilities

Staff members who provide intimate care will be suitably trained, and will be made aware of what is considered good practice.

Suitable equipment and facilities will be provided to assist pupils who need special arrangements following assessment from a physiotherapist or occupational therapist. This may include the following:

- Adjustable bed
- Changing mat
- Non-slip step
- Cupboard
- Adapted toilet seat or commode seat
- Hoist
- Swivel mat
- Disposable gloves/aprons
- Nappies, pads and medical bags
- Tissue rolls (for changing mat/cleansing)
- Supply of hot water
- Soap
- Barrier creams
- Antiseptic cleanser for staff
- Antiseptic cleanser for the changing bed/mat
- Clinical waste bag
- Spillage kit

The school has three accessible toilet facilities with a washbasin which includes space for a changing area.

Mobile pupils will be changed while standing up where possible. Pupils who are not mobile will be changed on a purpose-built changing bed or changing mat on the floor.

Staff will be supported to adapt their practice in relation to the needs of individual pupils, taking into account developmental changes such as the onset of puberty or menstruation.

5.3 Swimming and offsite visits

Pupils in Y3 and Year 6 participate in swimming lessons at West Wight swimming pool. During these lessons, pupils are entitled to privacy when changing. However, some pupils will need to be supervised during changing. Parental consent will be obtained before assisting any pupils in changing clothing before and after swimming lessons. This would be on very rare occasions.

Details of any additional arrangements will be recorded in the pupil's intimate care plan.

Before offsite visits, including residential trips, the pupil's individual intimate plan will be amended to include procedures for intimate care whilst off the school premises.

Staff will apply all the procedures described in this policy during residential and off-site visits. Meetings with pupils away from the school premises, where a chaperone is not present, will not be permitted, unless approval has been obtained by the headteacher.

Consent from a parent will be obtained and recorded prior to any offsite visit.

5.4 Toilet training

Members of staff providing care will inform another member of staff prior to taking a pupil to be changed or to use the toilet.

Where potties are used, they will be emptied immediately and cleaned with an anti-bacterial spray. The potty or toilet is checked to assess whether it is clean before use and toilet paper is well stocked.

Gloves and aprons will be worn before each change and the area should be prepared to ensure it is clean and suitable for use. Gloves must be worn at all times when changing nappies, and during any instances where the member of staff could come into contact with bodily fluids.

All pupils will be accompanied to the toilet and will be appropriately supervised and supported during the toilet training stage. Staff will be sensitive and sympathetic when changing pupils and will not make negative facial expressions or negative comments. Pupils' efforts will be reinforced by praise where appropriate.

Staff are required to ensure that soiled/wet nappies are changed as soon as possible. Where pupils are left in soiled nappies and/or clothes, this will be dealt with in line with the school's Disciplinary Policy and Procedure.

Pupils will be encouraged to wash their hands with soap and warm water, with assistance provided where necessary.

If a pupil has a toileting accident, they will be offered assistance to change or be changed by a member of staff regardless of their age.

To build independence, pupils will be encouraged to replace their own clothes and flush the toilet, if they are capable of doing so.

Parents are consulted on the approach to toilet training their pupil to ensure there is consistency with the approach at home. Pupils' progress is discussed at handover with parents. If any pupil is struggling with toilet training techniques or has any issues, e.g. a rash, this will be discussed with the teacher and the pupil's parents.

5.5 School responsibilities

Arrangements will be made with a multi-agency to discuss the personal care needs of any pupil prior to them attending the school.

Where possible, pupils who require intimate care will be involved in planning for their own healthcare needs, with input from parents welcomed.

In liaison with the pupil and parents, an individual intimate care plan will be created to ensure that reasonable adjustments are made for any pupil with a health condition or disability.

Regular consultations will be arranged with all parents and pupils regarding toilet facilities.

The privacy and dignity of any pupil who requires intimate care will be respected at all times. A qualified member of staff will change the pupil, or assist them in changing themselves if they become wet, or soil themselves. Any pupil with wet or soiled clothing will be assisted in cleaning themselves and will be given spare clothing, nappies, pads, etc., as provided by the parents.

Members of staff will respond to accidents in a calm and sympathetic manner. Accurate records of times, staff, and any other details of incidents of intimate care will be kept in a Record of Intimate Care Intervention, and they will be stored in the locked Medical Cupboard in the main office / Reception classroom. Records of intimate care provided to pupils with an intimate care plan will be recorded on their personal intimate care plan.

Arrangements will be made for how often the pupil should be routinely changed if the pupil is in school for a full day, and the pupil will be changed by a member of known staff. A minimum number of changes will be agreed.

The family's cultural practices will always be taken into account for cases of intimate care.

Parents/carers will be contacted if the pupil refuses to be changed or becomes distressed during the process.

Excellent standards of hygiene will be maintained at all times when carrying out intimate care.

6. Safeguarding

All staff receive safeguarding training, in line with the Child Protection and Safeguarding Policies.

Intimate care is a regulated activity; therefore, only members of staff who have an enhanced DBS certificate with a barred list check are permitted to undertake intimate care duties.

Wherever possible, staff involved in intimate care will not be involved in the delivery of sex education to the pupils in their care as an extra safeguard to both staff and pupils involved.

Individual intimate care plans will be drawn up for pupils as appropriate to suit the circumstances of the pupil.

Each pupil's right to privacy will be respected. Careful consideration will be given to each pupil's situation to determine how many carers will need to be present when the pupil requires intimate care.

If any member of staff has concerns about physical changes to a pupil's presentation, such as marks or bruises, they will report the concerns to the DSL immediately and record it on MyConcern.

Special consideration will be taken to ensure that bullying and teasing does not occur.

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 DSL.

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.

7. Monitoring arrangements

This policy is reviewed by the DSL and Headteacher annually. At every review, the policy will be approved by the governing board. All changes will be communicated to relevant stakeholders.

8. Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEND
- Supporting pupils with medical conditions

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?	
Signature of child	
Date	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

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 and contact details	
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). 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	

Appendix 3: Record of Intimate Care Intervention

[illegible]