Intimate Care Policy

Policy Number: 2.4

Date: 1 March 2026

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1. Introduction

We are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. No child is excluded from our school that, for whatever reason, may not be toilet trained and we also work with Parents/Carers to support toilet training where necessary.

2. Aims

- To ensure that the School works in partnership with parents or carers to ensure that they fully understand the school's policies and procedures when dealing with intimate care.

- To ensure that the provision of intimate personal care fully meets the needs of the school's child protection policy.

- To ensure that the intimate care of children is done in a sympathetic manner and children are treated with respect.

- To consider every child's needs individually, taking full account of their age, special needs disability, and gender ensuring everything will be done to avoid embarrassment The Intimate Care Policy and Guidelines apply to everyone involved in the intimate care of children.

3. Policy Rationale

We are committed to ensuring that all staff responsible for the intimate care of children undertake their duties in a professional manner at all times. We recognise that there is a need to treat children with respect when engaged in any form of intimate care. The child's welfare and dignity are paramount at all times.

4. Definition

'Intimate care' is defined as any involvement that requires touching or the carrying out of invasive procedures to support the personal care needs of the child. Where possible children will carry out these tasks independently; however, for a small number of learners, especially those with a physical/learning disability or those with medical needs, intimate care support may be required on either a regular or intermittent basis in order to address need.

5. Principles of Intimate Care

The following are the fundamental principles upon which this policy and guidelines are based We believe that every child has the right to:

- Be kept safe.
- Personal privacy.
- Be valued as an individual.
- Involvement in their own intimate care.
- Be treated with dignity and respect.
- Express their views on their own intimate care and to have their views considered.
- Privacy and a professional approach from all staff that meet their needs.
- Be accepted for who they are, without regard to age, gender, ability, race.

Intimate care is any care which involves washing, touching or carrying out an invasive

procedure that most children carry out for themselves but which some are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development. Care may involve help with drinking, eating, dressing and toileting.

6. Responsibilities and Guidelines to delivery of Intimate Care

The delivery of intimate care should be undertaken by professionally qualified staff and governed by their professional code of conduct, Volunteers/Non-Teaching staff or students, should never be asked to conduct intimate care. Staff must support the child in the achievement of the highest level of autonomy that is possible given their age and ability. Staff will follow the relevant procedures:

- Where necessary care plans will be drawn up for individual children, making it explicit that parents are involved in the care plan process.

- Senior leaders ensure that all staff undertaking the intimate care of children are familiar with and understand the 'Safe Touch/Intimate Care' policy and guidelines.
- The Safe Touch/Intimate Care Policy will be highlighted as part of the Induction Process for all new members of staff.

- If a staff member has concerns about a colleague's intimate care practice, they must report this to the named individual within the whistleblowing policy (usually the Headteacher or 'Designated Safeguarding Lead.')

- Whilst toileting, intimate care procedures may be carried out by one member of staff (2 where appropriate) changing areas should also be clear and visible to other members of staff.

- Where it is not possible for a second member of staff to be present the primary adult should make a second adult aware that changing is happening.

- Adults should wear disposable gloves and an apron. These should be put on before changing starts and the area is prepared (if appropriate depending on age). Children should be encouraged to help during this time. For example, they may unfasten their shoes or lift up their legs when being cleaned. They should be encouraged to wash their hands, using the soap dispensers and dry them with paper towels.

- Staff will safely store wet or soiled clothing in a sealed bag to be returned to parents/carers.

- Any materials used in cleaning a child (or nappies) should be disposed of in a sealed bag, then put in one of the first aid waste bins and not placed in the sanitary waste bins.

- Staff undertaking intimate care with a child will record this action on CPOMS following completion.

- Sanitary products are available and stored in secure locations within school, in order to support older girls experiencing their period. Staff working with these age groups should familiarise themselves with the location of these items and where the sanitary disposal units are located.

7. Key Procedures

- Staff will encourage each child to do as much as they can for themselves e.g., giving the child responsibility for washing themselves.
- The needs and wishes of children and parents will be considered wherever possible within the constraints of staffing and equal opportunities legislation.
- The school's Child Protection/Safeguarding procedures will be adhered to at all times.

8. Child Protection

There is no legal requirement for two adults to be present and such a requirement might be impractical. The normal process of changing a child who has had an accident should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the changing process to ensure abuse does not take place. If there is a known risk of false allegations by a child, then a single practitioner should not undertake changing. Personal and intimate care of children with special needs and/or disabilities will be undertaken with sensitivity, the need to protect staff and in accordance with the needs and wishes of the child and parent/carer wherever practicable.

9. Review Cycle

This policy is the responsibility of the Designated Safeguarding Lead (DSL) and will be reviewed annually. Should amendments to the policy be required at an earlier date in the light of changes to legislation, guardian, practice or a relevant incident, these will be adopted by the Governor with responsibility for safeguarding and the Chair of Governors.

10. Document Change History

Date of change	Detail significant changes and any new legislation / guidance taken into account
October 2022	New policy taken to Board for approval October 2022 Adopted by Board
September 2023	Reviewed
10/10/2023	Reviewed and adopted by board as part of Annual Safeguarding Review
1 September 2024	Policy reviewed. No changes made.
1 September 2025	Policy reviewed. No changes made.
1 March 2026	Intimate Care Policy separated from Safe Handling Policy, no changes made.
1 September 2026	Policy reviewed. No changes made.