



Aim High; Be Resilient; Take Care of Each Other

The Carey Federation Intimate Care Policy

Last update: June 2025
To be reviewed: June 2026

Related Policies/Guidance:

- Safeguarding and Child Protection Policy
- Supporting pupils with medical conditions policy
- Staff Code of Conduct
- Positive handling policy

Ashwater and Halwill Primary Schools are committed to safeguarding and promoting the welfare of our children. We are committed to ensuring that all staff are responsible for the intimate care of children and will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all children with respect and sensitivity when intimate care is given. Procedures have been adopted with referral to DfE Guidance including Keeping children safe in education (2023) and Working together to safeguard children (2023). We recognise there is a need to treat all children with respect; no child should be attended to in a way that causes stress or pain and instead this time is used to create opportunities for children's Personal, Social and Emotional Development. This policy also seeks to safeguard staff involved.

Contents of the policy:

- 1) What is intimate care?
- 2) Who will undertake Intimate Care?
- 3) Where will the Intimate Care take place?
- 4) What safeguarding guidance will be followed?
- 5) Practicalities

1) What is intimate care?

Working with young children will often require adults to be involved in duties which require intimate care of children. Intimate care may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident. Such activities can include: feeding or washing, touching or carrying out a procedure to intimate personal areas or parts of the body not usually on display and is often associated with bodily functions and personal hygiene, including toileting, washing and dressing, as part of a staff member's duty of care. Examples may include support with dressing and undressing (underwear) helping someone use the toilet or washing intimate parts of the body, cleaning a pupil who has soiled him/herself or vomited. It is also associated with other accidents that may require a child to remove their clothes. These include changes required as a result of water play, messy play, sickness and weather.

In some extenuating cases a child may need an examination or administration of medicines to a part of the body not usually on display.

Intimate care is a sensitive issue and staff are respectful of a child's needs. The management of all children with intimate care needs will be carefully planned. The child's welfare and dignity should always be preserved with a high level of privacy, choice and control. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance. There should be a high level of awareness of child protection issues.

Individual intimate care plans will be initiated and followed, for any pupil requiring regular intimate care following advice and guidance from health care professionals. The plan should be written and agreed by parents and staff and signed by both. The needs and wishes of children and parents will be

taken into account wherever possible, within the constraints of safeguarding, staffing and equal opportunities legislation.

The school will not undertake any invasive procedures. The exception to this is where prior permission from parents has been given and where staff can correctly manage the procedure i.e. use of epipen for anaphylaxis, or insulin given for Type 1 Diabetes. Staff will work in partnership with parents/carers to provide continuity of care to children wherever possible.

2) Who will undertake Intimate Care?

Staff who provide intimate care are trained to do so (including Child Protection) and are given advice on Moving and Handling and are fully aware of best practice. Suitable equipment and facilities will be provided to assist with children who need special arrangements following assessment from physiotherapist/occupational therapist or other professional organisations.

- Intimate care is only to be carried out by school staff and not visitors, volunteers or parents/carers other than the child's own. All members of staff carrying out intimate care procedures are DBS checked.
- In most circumstances, the child's regular key person or teaching assistant or class teacher will be responsible for changing them. However this is not always possible, so another member of staff may need to carry out the procedure.
- As we do not allow people other than staff members to change children, the child will know who is changing them and will have seen them before.
- It is not appropriate for students, volunteers or external staff to carry out intimate care procedures.
- The experience is made as pleasant for the child as possible by ensuring that they are spoken to at all times, provided with as many opportunities to be independent and praised for this.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children will not usually be involved with the delivery of sex education to the children in their care as an additional safeguard to both staff and children involved. Staff who provide intimate care will be supported / supervised by another colleague.

3) Where will the Intimate Care take place?

- Intimate care will often take place in the toilets / cloak room / classroom or an area which is private enough to respect the child's dignity but allows the adult to be seen at all times to prevent them from allegations or bringing their behaviour into question.
- Where possible, another adult should stay close by while the procedure is carried out, but does not need to stand as a 'witness' to the procedure.
- No adult will be left alone behind a fully closed door when carrying out intimate care procedures. This puts both the safety of the child and staff member at risk.
- The staff member will notify the parents by completing an intimate care form or the child's personal care plan/individual healthcare plan if in place.
- If a child refuses staff assistance a parent or carer will be called.
- If a child is unduly distressed by the experience, a phone call will be made to parents/carers. They may be asked to take the child home if the child is distressed or unwell.

4) What safeguarding guidance will be followed?

Child Protection Procedures and Multi-Agency Child Protection procedures will be adhered to.

Staff members will follow the school's Safeguarding and Child Protection Policy. If a member of staff notices marks, injuries, bruising or undue soreness, staff members will follow the school's Safeguarding policy. This will be recorded using the school's CPOMS system and reported to the Designated Safeguarding Lead.

If a child makes an allegation about a member of staff, this should be reported to the Executive Headteacher, who will seek and follow the advice from the Local Authority Designated Officer (LADO). If the allegation is against the Executive Headteacher, the allegation should be reported to the Chair of Governors who will also seek and follow advice from the LADO.

5) Practicalities

It is generally expected that most children will be toilet trained and out of nappies before they begin at school. (With the exception of the younger years at Ashwater Pre-school) However, we recognise that children will join the Carey Federation having reached differing levels of independence and development in toileting and self-care. Therefore, it is inevitable that from time to time some children will have accidents and need to be attended to. In order to help the children to become aware of their bodily needs and respond to them in time, those who wish to go to the toilet are always allowed to go. Children in the EYFS have access to the toilet whenever they need to and are encouraged to be as independent as is age and developmentally appropriate. They are reminded at regular times to go to the toilet and are also encouraged to develop good hygiene routines such as washing their hands after the toilet. As children progress through the school, they are encouraged to use the toilet during break times.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted. The child 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 him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves.

If a child requires to be changed:

- Remove their soiled clothes
- Clean skin (this usually includes bottom, genitalia, legs, feet)
- Dress child in their own clothes or those provided by the school
- Wrap soiled clothes in plastic bags and give to parents to take home.

Individual Intimate Care Plan

Child's Name:	Date: DOB:	Condition:
Details of need: - Changing of nappy/pull up, or pants when wet or soiled. - To support toilet training, if/when required - Examples may include support with dressing and undressing (underwear) helping someone use the toilet or washing intimate parts of the body, cleaning a pupil who has soiled him/herself or vomited. - To provide emotional support if/when required.		
Facilities and equipment: (Clarify responsibility for provision of supplies e.g. parent / carer / school / other) Changing area to be used or private from other children.		Agencies involved: None
How your child's needs will be met: Changing of nappy/pull up, when wet or soiled. To support toilet training, if/when required Parents will provide nappies/pull-ups and wipes. However, if these are not available we will use school supplies. Your child may be changed by any of the Federation teaching or support staff team.		
What we are aware of: To ensure that privacy is given. To report to parents if we have any concerns. We do not administer creams unless a medical form has been submitted.		
This current plan has been agreed by:		
Name: Mrs Alford	Role: Executive Headteacher	Date: June 2025

I understand that;

- I give permission for any of the school staff to work individually with my child.
- I give permission to the school to provide appropriate intimate care support to my child.
- I will advise the Head Teacher of any medical needs my child may have which affects issues of intimate care.

Name

Signature

Relationship to Child

Date

Changes Made to Policy

January 2023

p.3 Date of publication changed with reference to DfE Guidance including Keeping children safe in education (2022) and Working together to safeguard children (2022).

p.6 In the appendix, staff member Miss Batstone removed and Mis Dannan replaced.

June 2024

Intimate Care Plan-

- point added: Examples may include support with dressing and undressing (underwear) helping someone use the toilet or washing intimate parts of the body, cleaning a pupil who has soiled him/herself or vomited.
- Staff names removed – instead generic reference to all staff
- EHT signature removed

June 2025

p.3 Section 2, bullet point one – ‘named staff’ changes to ‘school staff’

p.3 Section 2, bullet point four- external staff added

p.5 Bullet point one- ‘named staff’ changed to ‘school staff’