# WIDEY COURT PRIMARY SCHOOL

## Intimate Care Policy

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| **Policy reviewed on:** | September 2026 |
| **Date of next Review:** | September 2027 |
| **Who reviewed this policy:** | Headteacher / Deputy Headteacher / School Operations Lead |

**1. Policy Statement**

Widey Court Primary School is committed to providing a safe, caring and inclusive environment in which every child is treated with dignity, respect and compassion.

The school recognises that some children will require support with intimate care. This may include assistance with toileting, changing clothes, continence management, personal hygiene, menstrual care or other personal care needs.

The purpose of this policy is to ensure that intimate care is provided:

- safely and appropriately;
- in a way that protects the child's dignity, privacy and wellbeing;
- consistently by appropriately trained staff;
- in accordance with safeguarding requirements;
- in partnership with parents and carers;
- in a way that promotes the child's independence wherever possible;
- without discrimination or embarrassment.

The school recognises that intimate care can be a sensitive area for children and staff. All care will therefore be undertaken with professionalism, sensitivity and respect.

**2. Aims**

This policy aims to:

1. Ensure that children receive appropriate and consistent intimate care.
2. Protect the dignity, privacy and wellbeing of every child.
3. Promote children's independence and self-care skills.
4. Ensure staff understand their responsibilities when providing intimate care.
5. Provide clear procedures for recording and reporting intimate care.
6. Ensure that safeguarding is central to all intimate care arrangements.
7. Ensure children are encouraged to communicate their preferences and concerns.
8. Ensure parents and carers are appropriately involved in planning their child's intimate care.
9. Ensure that reasonable adjustments are made for children with SEND or medical needs.
10. Ensure that staff and children understand appropriate professional boundaries.

**3. What is Intimate Care?**

Intimate care is care that involves supporting a child with personal or private aspects of their daily life.

This may include:

- supporting a child to use the toilet;
- wiping or cleaning after toileting;
- changing nappies or pull-ups;

- changing wet or soiled clothing;
- managing continence products;
- supporting a child who is menstruating;
- assistance with washing or cleaning;
- supporting a child with personal hygiene;
- applying prescribed creams or treatments where appropriately authorised;
- assistance with clothing where this involves intimate areas;
- supporting children with personal care following illness, accidents or medical needs.

Intimate care does not include ordinary physical contact such as comforting a child, administering a first aid treatment to a non-intimate area, or helping a child with their coat or shoes.

**4. Principles of Intimate Care**

The following principles apply to all intimate care:

**Dignity**

Children will be treated with dignity and respect at all times.

**Privacy**

The child's need for privacy will be respected while ensuring that appropriate safeguarding arrangements are maintained.

**Independence**

Children will be encouraged and supported to do as much as they can for themselves.

**Choice**

Where possible, children will be offered choices about how their care is provided.

**Communication**

Staff will explain what they are doing before and during intimate care, using language appropriate to the child's age and understanding.

**Safeguarding**

Staff must maintain professional boundaries and follow all school safeguarding procedures.

**Consistency**

Where possible, intimate care will be provided by familiar and appropriately trained staff.

**Equality**

No child will be disadvantaged because they require intimate care. Appropriate reasonable adjustments will be made where necessary.

**5. Partnership with Parents and Carers**

The school will work closely with parents and carers to understand a child's individual intimate care needs.

Parents and carers should provide relevant information about:

- the child's toileting arrangements;
- continence needs;
- preferred methods of support;
- communication needs;
- medical or physical needs;

- allergies or skin sensitivities;
- products normally used;
- any cultural or personal considerations;
- strategies that encourage independence.

Where a child has ongoing or significant intimate care needs, an **Individual Intimate Care Plan** should be developed in consultation with parents/carers and, where appropriate, the child. The plan should be reviewed regularly and whenever the child's needs change.

**6. Individual Intimate Care Plans**

An Individual Intimate Care Plan may be appropriate where a child:

- requires regular assistance with toileting;
- is not yet independently toilet trained;
- requires regular changing of continence products;
- has a disability or SEND need affecting personal care;
- has a medical condition affecting continence or personal hygiene;
- requires specialist equipment or procedures;
- requires intimate care that differs significantly from the usual arrangements in school.

The plan should include, where appropriate:

- the child's name and relevant details;
- the nature of the support required;
- the level of independence the child has;
- the agreed method of support;
- communication preferences;
- equipment and products required;
- staffing arrangements;
- privacy arrangements;
- relevant medical information;
- arrangements for emergencies;
- arrangements for recording care;
- review arrangements.

The child's views should be included wherever appropriate.

**7. Staff Responsibilities**

Staff providing intimate care must:

- treat the child with dignity and respect;

- explain what they are going to do;
- encourage the child to participate as much as possible;
- maintain appropriate professional boundaries;
- use appropriate protective equipment;
- follow the child's individual care plan where one is in place;
- follow infection-control procedures;
- maintain confidentiality;
- record care where required;
- report any concerns immediately in accordance with safeguarding procedures;
- report any unusual marks, injuries, changes in behaviour or other concerns to the Designated Safeguarding Lead or appropriate safeguarding lead.

Staff must never:

- make inappropriate comments about a child's body;
- ridicule, shame or embarrass a child;
- unnecessarily expose a child;
- use intimate care as a form of punishment;
- photograph or record a child during intimate care;
- discuss a child's intimate care needs unnecessarily with others;
- carry out care beyond their training or competence.

**8. Staffing Arrangements**

The school will seek to ensure that intimate care is provided by appropriately trained staff.
Where reasonably practicable:

- a familiar member of staff will provide the care;
- the child's preferences will be taken into account;
- staffing arrangements will be appropriate to the child's age, needs and circumstances;
- staff will work within professional boundaries.

The school recognises that children may have preferences regarding the sex of the member of staff providing intimate care. These preferences will be considered wherever reasonably practicable, while recognising staffing and safeguarding requirements.
The school will never place a child or member of staff in an unsafe situation in order to meet a particular staffing preference.

**9. Safeguarding and Professional Boundaries**

Intimate care must always be carried out in accordance with the school's safeguarding procedures.
Staff should maintain an appropriate balance between:

- providing the child with privacy and dignity; and
- ensuring that the child's safety and the staff member's professional protection are maintained.

Where possible, staff should work in a way that allows appropriate visibility or awareness of the care being provided without unnecessarily compromising the child's privacy.
If a child makes an allegation or disclosure during intimate care, the member of staff must:

1. Listen calmly.
2. Take the child seriously.
3. Avoid leading questions.
4. Avoid promising confidentiality.
5. Record the child's words as accurately as possible.
6. Report the concern immediately to the Designated Safeguarding Lead in accordance with the school's safeguarding procedures.

Staff must not investigate the concern themselves.

**10. Toileting**
Children will be supported to develop independence with toileting in a manner appropriate to their age and developmental stage.
Staff may provide assistance where a child:

- needs help accessing or using the toilet;
- needs help with clothing;
- requires assistance with wiping or cleaning;
- has an accident;
- has a continence-related need;
- requires additional support due to SEND or medical needs.

Staff should encourage children to undertake as much of the process independently as they are safely able to do.
Children should not be made to feel ashamed or embarrassed if they have an accident.

**11. Changing After an Accident**
If a child has wet or soiled themselves:

1. Reassure the child calmly.
2. Provide privacy.
3. Encourage the child to change themselves wherever possible.
4. Provide assistance only where necessary.
5. Use gloves and appropriate protective equipment.
6. Place soiled clothing in an appropriate sealed bag for the child to take home.

7. Dispose of waste in accordance with the school's infection-control arrangements.
8. Clean and disinfect the changing area appropriately.
9. Wash hands thoroughly.
10. Record the incident where required by the school's procedures or the child's individual care plan.
11. Inform parents/carers where appropriate.

Staff should use matter-of-fact and reassuring language and should never express disgust or embarrassment.

**12. Nappy and Continence Care**

Some children, particularly in EYFS or children with SEND or medical needs, may require support with nappies or continence products.
Where regular changing is required, an individual care plan should normally be agreed.
Staff should:

- follow the agreed changing routine;
- use appropriate gloves and protective clothing;
- maintain the child's dignity;
- encourage the child's involvement;
- check the child's skin for any obvious signs of irritation or concern;
- report concerns appropriately;
- dispose of waste safely;
- clean the changing area after use;
- wash hands thoroughly.

Staff should not apply creams, lotions or medication unless this is covered by the school's agreed procedures and appropriate parental/medical authorisation.

**13. Menstrual Care**

The school will provide appropriate support for pupils who begin menstruation.
Children will be treated sensitively and without embarrassment.
The school will:

- provide access to appropriate menstrual products;
- provide suitable facilities for changing and disposal;
- respect the child's privacy;
- support children who require additional assistance;
- provide appropriate information and reassurance;
- communicate with parents/carers where appropriate.

Where a pupil requires physical assistance with menstrual care because of SEND or medical needs, an individual care plan should be considered.

**14. Children with SEND**

The school recognises that children with SEND may have additional or different intimate care needs.

Staff will work with parents/carers, the child and relevant professionals where appropriate to ensure that reasonable adjustments are made.

This may include:

- additional time;
- visual prompts;
- adapted communication;
- specialist equipment;
- accessible toilet facilities;
- individual routines;
- additional staff training;
- individual intimate care plans.

The child's dignity, autonomy and right to participate in decisions about their care will remain central.

**15. Medical Needs**

Some children may require intimate care as part of the management of a medical condition.

Where this is the case, the school will follow relevant medical procedures and the child's healthcare plan where applicable.

Staff will only undertake specialist procedures for which they have received appropriate training and authorisation.

Where necessary, advice should be sought from relevant healthcare professionals.

**16. Hygiene and Infection Control**

Staff must follow the school's infection-control procedures.

This includes:

- washing hands before and after intimate care;
- wearing disposable gloves where appropriate;
- using disposable aprons where appropriate;
- maintaining clean and suitable changing facilities;
- disposing of waste safely;
- cleaning and disinfecting surfaces and equipment;
- storing clean and soiled clothing separately;
- following relevant procedures for bodily fluids.

Staff should not assume that gloves replace the need for effective handwashing.

**17. Recording Intimate Care**
The school will maintain appropriate records of intimate care where this is necessary.
Records may include:

- date and time;
- type of care provided;
- staff member providing the care;
- relevant observations;
- products used where appropriate;
- any concerns or unusual observations;
- communication with parents/carers where appropriate.

Records must be factual and objective.
They should not contain unnecessary personal information.

**18. Confidentiality**
Information relating to a child's intimate care needs is confidential.
Information should only be shared with staff who need to know in order to provide appropriate care or safeguard the child.
Information must be handled in accordance with the school's data protection and confidentiality procedures.

**19. Children's Rights and Voice**
Children should be encouraged to express their views about their intimate care wherever their age and understanding allow.
Staff should:

- listen to children's preferences;
- respect reasonable requests;
- explain routines clearly;
- provide reassurance;
- encourage children to ask for help;
- help children develop independence.

A child should never be made to feel that requiring intimate care is something to be ashamed of.

**20. Refusal of Intimate Care**
A child may sometimes refuse intimate care.
Staff should:

1. Remain calm and reassuring.
2. Establish whether the child understands what is being offered.
3. Encourage the child to undertake the care independently where possible.
4. Offer reasonable choices.

5. Consider whether there is a reason for the refusal, such as embarrassment, pain, fear or communication difficulty.
6. Follow the individual care plan where one exists.
7. Seek additional assistance where necessary.
8. Inform parents/carers and relevant school staff where appropriate.

If refusal creates an immediate health, safety or safeguarding concern, the school's safeguarding and/or medical procedures must be followed.

**21. Staff Training**

Staff involved in intimate care will receive appropriate guidance and training.
Training may include:

- safeguarding;
- professional boundaries;
- infection control;
- manual handling where relevant;
- continence care;
- SEND-specific needs;
- medical procedures;
- use of specialist equipment;
- confidentiality and data protection.

Staff should not undertake specialist intimate care procedures unless appropriately trained and authorised.

**22. Allegations or Concerns About Staff**

Any allegation or concern regarding the conduct of a member of staff during intimate care must be treated seriously and managed in accordance with the school's safeguarding procedures and the **Keeping Children Safe in Education** guidance.
The school's Designated Safeguarding Lead should be informed immediately.
Where the concern relates to the Headteacher, the school's procedure for reporting concerns about the Headteacher must be followed.
Staff must not attempt to investigate allegations themselves.

**23. Parents and Carers: Communication**

The school will communicate openly and sensitively with parents/carers about significant or ongoing intimate care needs.
Parents/carers will normally be informed where:

- a child has had a significant toileting accident;
- a child requires repeated or additional intimate care;
- there is a change in the child's care needs;
- staff identify a potential health concern;

- an incident occurs that requires further action.

Routine arrangements may be recorded through the child's individual care plan or agreed communication system.

**24. Facilities and Equipment**
The school will make reasonable efforts to ensure that suitable facilities are available for children requiring intimate care.
Facilities should, where possible, provide:

- appropriate privacy;
- suitable changing surfaces where required;
- access to handwashing facilities;
- appropriate storage;
- suitable disposal arrangements;
- access to necessary continence or personal care products;
- appropriate cleaning materials.

Specialist equipment will only be used by staff who have received appropriate training.

**25. Equality and Inclusion**
The school is committed to ensuring that intimate care arrangements do not discriminate against children on the basis of disability, age, sex, race, religion or belief, or any other protected characteristic.
The school will make reasonable adjustments where required and will ensure that children requiring additional intimate care are fully included in school life.

**26. Monitoring and Review**
The Headteacher and relevant senior leaders will monitor the implementation of this policy.
The policy will be reviewed annually, or sooner where:

- legislation or statutory guidance changes;
- school procedures change;
- an incident identifies a need for amendment;
- the needs of pupils change;
- feedback from staff, parents/carers or pupils indicates that changes are required.