

Lowton West Primary School



Intimate Care Policy

Policy reviewed by N. Gould

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Dr. G Merrett (Chair of Governors)

Mrs J. Westhead (Headteacher)

Lowton West Primary School

Intimate Care Policy

Aiming High Together



School Vision

To inspire, achieve and succeed, we will aim high and build dreams and futures together.

Mission Statement

Providing the highest quality education, care and support for the whole school community.

Our mission statement is based on RESPECT:

***R** = Recognising the needs of the individual child*

***E** = Ensuring a unique and engaging curriculum*

***S** = Supporting each other to learn and achieve*

***P** = Passionate about providing the highest quality education*

***E** = Encouraging creativity, self – expression and imagination*

***C** = Creating confident, resilient, life – long learners*

***T** = The voice of everybody is heard*

All the above statements help us to understand how we can all make a positive contribution to the school and the wider community.

We will do this through our core values:

- Respect
- Resilience
- Kindness
- Confidence

We also, at Lowton West Primary School, strive to develop and uphold British Values. The five British values that the Government has identified for schools to focus on are:

- Democracy
- The Rule of Law
- Individual liberty and mutual respect and tolerance of those with different faiths and beliefs
- Developing personal and social responsibility
- Respect for British Institutions

Statement of intent

Lowton West Primary School is a place where everyone is treated equally, encouraged and respected. We believe that all children should be able to achieve their full potential academically, socially and emotionally. We are committed to our school being a safe and inclusive place where learning is nurtured and encouraged in a happy, caring and fun environment. We all work for our school to be a happy place where good behaviour is expected and all children enjoy their educational journey.

The purpose of this policy is to outline the responsibilities of the school and staff members in supporting pupils with additional needs.

Implementation

As a school, we wish to:

- To safeguard the rights and promote the best interests of the children
- To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one
- To safeguard adults required to operate in sensitive situations
- To raise awareness and provide a clear procedure for intimate care
- To inform parents/carers in how intimate care is administered
- To ensure parents/carers are consulted in the intimate care of their children

Principles

It is essential that every child is treated as an individual and that care is given as gently and as sensitively as possible. As far as possible, the child should be allowed to exercise choice and should be encouraged to have a positive image of his/her own body. It is important for staff to bear in mind how they would feel in the child's position. Given the right approach, intimate care can provide opportunities to teach children about the value of their own bodies, to develop their safety skills and to enhance their self-esteem. Parents and staff should be aware that matters concerning intimate care will be dealt with confidentially and sensitively and that the young persons' right to privacy and dignity is maintained at all times.

Definitions

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, helping someone use the toilet, supporting a pupil to get undressed or dressed at the swimming baths, or washing intimate parts of the body.

In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. the changing of a catheter).

Intimate care can include one or more of the following:

- Supporting a pupil with dressing/undressing
- Providing comfort or support for a distressed pupil
- Assisting a pupil requiring medical care or with Special Educational Needs, who is not able to carry this out unaided, including oral care and feeding
- Cleaning a pupil who has soiled him/herself, has vomited or feels unwell and assisting in toileting issues, including menstrual hygiene

Lowton West Primary 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. At school we recognise 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.

Supporting dressing/undressing

Sometimes it will be necessary for staff to aid a child in getting dressed or undressed. Staff will always encourage children to attempt undressing and dressing unaided.

Providing comfort or support

Children may seek physical comfort from staff. Where children require physical support, staff need to be aware that physical contact must be kept to a minimum and be child initiated. When comforting a child or giving reassurance, the member of staff's hands should always be seen and a child should not be positioned close to a member of staff's body which could be regarded as intimate. If physical contact is deemed to be appropriate staff must provide care which is suitable to the age, gender and situation of the child. If a child touches a member of staff in a way that makes him/her feel uncomfortable this can be gently but firmly discouraged in a way which communicates that the touch, rather than the child, is unacceptable.

Toileting and Personal Hygiene

Intimate care for pupils identified with a medical need or Special Educational Needs must have a Care Plan in operation to support the needs of the pupil. This will identify specific requirements to ensure the pupil is provided for during school hours. Staff should work in pairs to ensure adequate support is provided and consideration given to safe manual handling procedures.

Soiling

Intimate care for soiling should only be given to a child after the parents have given permission for staff to clean and change the child. If a parent does not give consent, the school will contact the parents or other emergency contact giving specific details about the necessity for cleaning the child.

If the parents/carers or emergency contact is able to come within a few minutes, the child is comforted and kept away from the other children to preserve dignity until the parent arrives. Children are not left on their own whilst waiting for a parent to arrive, an adult will stay with them, giving comfort and reassurance. The child will be dressed at all times and never left partially clothed.

If a parent/carer or emergency contact cannot attend, the school seeks to gain verbal consent from parents/carers for staff to clean and change the child. This permission will be sought on each occasion that the child soils him or herself. If a parent cannot be contacted, a child will not be left in distress and school staff (two staff members present) will sensitively help to clean and change the child.

If the parents and emergency contacts cannot be contacted the Head Teacher will be consulted. If put in an impossible situation where the child is at risk, staff will act appropriately and may need to come into some level of physical contact in order to aid the child.

When touching a child, staff should always be aware of the possibility of invading a child's privacy and will respect the child's wishes and feelings.

If a child needs to be cleaned, staff will make sure that:

- Disposable aprons and protective gloves are worn
- The procedure is discussed in a friendly and reassuring way with the child throughout the process
- The child is encouraged to care for him/herself as far as possible
- Physical contact is kept to the minimum possible to carry out the necessary cleaning.
- Privacy is given appropriate to the child's age and the situation
- All spills of vomit, blood or excrement are wiped up and disposed of according to the school's health and safety policy
- Any soiling that can be, is flushed down the toilet
- Soiled clothing is put in a plastic bag, unwashed, and sent home with the child

Hygiene

All staff must be familiar with normal precautions for avoiding infection, must follow basic hygiene procedures and have access to protective, disposable gloves.

Protection for staff

Members of staff need to have regard to the danger of allegations being made against them and take precautions to avoid this risk. These should include:

- Gaining a verbal agreement from another member of staff that the action being taken is necessary
- Allow the child, wherever possible, to express a preference to choose his/her carer
- Allow the child a choice in the sequence of care
- Be aware of and responsive to the child's reactions

Where possible, pupils who require intimate care will be involved in planning for their own healthcare needs wherever possible, 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.

Safeguards for children

There is an obligation on local authorities to ensure that staff who have substantial, unsupervised access to children undergo police checks. All staff at Lowton West Primary School are DBS checked and cannot undertake tasks within school until all checks are completed satisfactorily. The DBS's aim is to help organisations in the public, private and voluntary sectors by identifying candidates who may be unsuitable to work with children or other vulnerable members of society. Personal and professional references are also required and unsuitable candidates are not permitted to work within the school. All those working with children should be closely supervised throughout a probationary period and should only be allowed unsupervised access to children once this has been completed to their supervisor's satisfaction.

It is not appropriate for volunteers to carry out intimate care procedures. Students should only do so under the supervision of a trained member of staff, following consultation with the student's college supervisors and parents.

Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training which may include Manual Handling Training) and are fully aware of best practice. Direct training for all staff involved in a child's Care Plan will be sort from the appropriate Health Professionals. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required. Schools may also contact the School Nurse for additional support and guidance when producing Care Plans.

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/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.

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 themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

Children wearing nappies

Schools may have concerns regarding Child Protection issues when they are asked by parents to admit a child who is still wearing nappies. Child protection need not present an issue. It is good practice to provide information for parents of the policy and practice in the school. Such information should include a simple agreement in the form of an intimate care plan for parents to sign - outlining who will be responsible, within the school, for changing the child and when and where this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task right from the outset.

Staff will use a note book to record who changes a child, how often this task is carried out and the time they were changed. Examples of such good practice provide reassurance for parents that systems are in place and that schools have implemented procedures for staff to follow.

Parents have a role to play when their child is still wearing nappies. Parents will change their child, or assist them in going to the toilet, at the latest possible time before coming to school. Parents will provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

Parents will inform the school should their child have any known marks or rashes.

First Aid and intimate care

Staff who administer first aid of a more intimate nature should ensure wherever possible that another adult is present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Regular requirements of an intimate nature should be planned for. Agreements between the school and those with parental responsibility and the child concerned should be documented and easily understood. The necessity for such requirements should be reviewed regularly. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed.

Offsite visits

Before offsite visits, including residential trips, the pupil's individual intimate care 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.

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

The school's Intimate Care Policy takes into account the requirements of the:

- Children and Families Act 2014
- Special Educational Needs and Disability Code of Practice 2014
- Equality Act 2010

- Health Act 2006
- DfE: Working Together to Safeguard Children (Last updated 12th June 2025)
- DfE: Keeping Children Safe in Education September 2025
- guidance from the Council for the Disabled and the updated Disabled Children and the Equality Act 2010: what teachers and schools need to know and what schools need to do (July 2025)
- [Guides and training packages for schools on the Disability duties in the Equality Act](#)

It also links to the following policies:

- Safeguarding and Child Protection Policy
- Health and Safety Policy
- SEND Policy and SEND Information Report
- Supporting Pupils with Medical Conditions
- Equality Policy
- Staff Code of Conduct
- Whistleblowing Policy
- Medicines in Schools Policy

Appeal:

Any appeals against this policy will be through the school's complaints procedure.