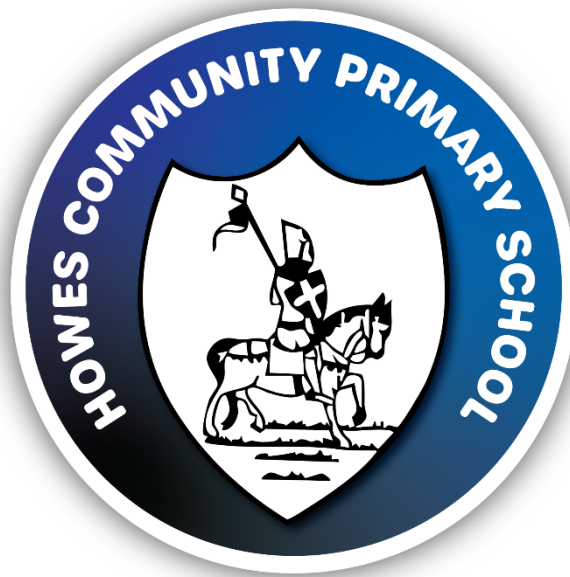


Howes Community Primary School



Intimate Care Policy September 2026

Date Policy Written:	September 2026
Date of next Review:	September 2027
Policy Written by:	Mrs Zoe Cook (Headteacher)

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1. Aims

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- The dignity, rights and wellbeing of children are safeguarded
- Pupils who require intimate care are not discriminated against, in line with the Equality Act 2010
- Parents/carers are assured that staff are knowledgeable about intimate care and that the needs of their children are taken into account
- 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

Intimate care refers to care involving direct or indirect contact with, or exposure of, intimate areas and may include toileting, washing, changing, nappy changing and dressing. Some pupils may also require support with medical procedures; where this is the case, care will be provided in accordance with the school's Supporting Pupils with Medical Conditions Policy, the pupil's Individual Healthcare Plan (where applicable) and any relevant specialist guidance.

Children will not be excluded from education, school activities or educational visits solely because they require intimate care or are not yet fully toilet trained. The school will make reasonable adjustments where required and will work with families and relevant professionals to enable full and safe participation.

2. Legislation and statutory guidance

This policy has regard to relevant legislation and statutory guidance relating to safeguarding, equality, special educational needs and disabilities, medical needs and the welfare of children, including:

The Equality Act 2010, including the school's duty to make reasonable adjustments for disabled pupils; the Children and Families Act 2014, including section 100 regarding support for pupils with medical conditions; Keeping Children Safe in Education 2026; Working Together to Safeguard Children 2026; the Special Educational Needs and Disability Code of Practice: 0 to 25 years; the Statutory Framework for the Early Years Foundation Stage 2026; Supporting Pupils at School with Medical Conditions statutory guidance; the Data Protection Act 2018 and UK GDPR; and relevant health and safety legislation and guidance, including safe moving and handling where appropriate.

3. Role of parents/carers

3.1 Seeking parental permission

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 consent 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 the school is unable to contact parents/carers and intimate care is urgently required, appropriately trained and authorised staff will provide the care needed to protect the child's welfare, dignity, comfort and immediate health needs. Parents/carers will be informed afterwards. Care will not be withheld where a delay would cause distress, discomfort or risk of harm.

3.2 Creating an intimate care plan

Where an intimate care plan is required, it will be agreed in discussion between the school, parents/carers, the child (when 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 child's views and preferences will be taken into account. Staff will explain what they are going to do, seek the child's co-operation and assent wherever possible, and encourage the child to participate in their own care as independently as they can. If a child becomes distressed or refuses, staff will pause and reassess the situation unless immediate intervention is necessary to protect the child's health or safety. Parents/carers and, where appropriate, relevant professionals will be consulted.

The plan will be reviewed annually, 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.

3.3 Sharing information

The school will share information with parents/carers as needed to ensure a consistent approach and will expect parents/carers to share relevant information regarding intimate care needs. Records will be kept in accordance with the school's data protection procedures. Routine care will be recorded where required by an individual care plan. Significant or unusual incidents, injury, distress or refusal, or any departure from the agreed plan will be recorded and shared with parents/carers and/or the Designated Safeguarding Lead (DSL), as appropriate.

4. Role of staff

4.1 Which staff will be responsible

Intimate care will normally be undertaken by appropriately designated, trained and authorised staff. Where a pupil has complex, medical or specialist needs, only staff who have received the necessary training and are competent to carry out the procedure will do so.

Staff will not undertake intimate care procedures for which they have not received appropriate information, instruction or training. Individual arrangements will be agreed through the child's intimate care plan and, where relevant, Individual Healthcare Plan or risk assessment.

Staff carrying out intimate care will have undergone the appropriate safer recruitment and Disclosure and Barring Service (DBS) checks for their role in accordance with Keeping Children Safe in Education 2026.

4.2 How staff will be trained

Staff will receive:

- Training in the specific types of intimate care they undertake if necessary
- Regular safeguarding training
- If necessary, manual/moving and handling training that enables them to remain safe and for the pupil to have as much participation as possible
- Safeguarding training in line with the school's safeguarding arrangements and Keeping Children Safe in Education 2026
- Paediatric first aid training where required by the Early Years Foundation Stage or the member of staff's role

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.

5. Intimate care procedures

5.1 How procedures will happen

Procedures will be carried out in an appropriate location that protects the child's privacy and dignity while maintaining appropriate safeguarding arrangements. At Howes, this will normally be the Reception class bathroom or the wet room where washing or additional facilities are required. Another member of staff must be aware that intimate care is taking place. Where the wet room is used, or where an individual risk assessment or care plan identifies the need, two members of staff will be present. In Early Years, a privacy screen will be used to protect the child's dignity while ensuring appropriate visibility and accountability. The number of adults involved will be proportionate to the child's needs, dignity, safety and any identified risks.

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

- Relevant PPE including: gloves and aprons, wipes and nappy bags.
- A changing station that is conducive to support the child's independence and support staff members so that they can follow moving and handling procedures to avoid injury must be used where possible. No staff member is expected to move a person in a way that could cause harm to themselves or others.

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 discreetly returned to parents/carers at the end of the day.

5.2 Concerns about safeguarding

If a member of staff notices an unexplained physical change, injury, mark, bruise, soreness or other concern while providing intimate care, or if a child says or indicates something that causes concern, the member of staff must follow the school's Child Protection and Safeguarding Policy immediately and report the concern to

the Designated Safeguarding Lead (DSL) or a deputy DSL. Staff must not investigate the concern themselves or ask leading questions.

Any accidental injury, unusual occurrence, significant distress or incident arising during intimate care must be recorded and reported promptly to the appropriate senior member of staff and, where appropriate, to the child's parent/carer.

Any concern or allegation regarding the behaviour of a member of staff during intimate care must be dealt with in accordance with Keeping Children Safe in Education 2026 and the school's procedures for managing allegations and low-level concerns. Where a concern may meet the harm threshold, the school's allegations-management procedure will be followed and advice or referral to the Local Authority Designated Officer (LADO) will be made where appropriate. Concerns that do not meet the harm threshold will be dealt with through the school's low-level concerns procedures. Where a concern relates to the Headteacher, it must be reported to the Chair of Governors in accordance with the school's safeguarding procedures. Alternative arrangements for the child's intimate care will be made where appropriate while a concern is considered, ensuring that the child's needs continue to be met.

6. Monitoring arrangements

This policy will be reviewed annually by Zoe Cook, Headteacher, and Liz Cornfoot, EYFS Lead, or sooner if legislation, statutory guidance or school practice changes. Governors will be notified of each review and will maintain appropriate oversight through safeguarding and SEND monitoring.

7. Links with other policies

This policy links to the following policies and procedures:

- > Accessibility plan
- > Child Protection and Safeguarding Policy
- > Health and Safety Policy
- > SEND Policy
- > Supporting Pupils with Medical Conditions Policy
- > Staff Code of Conduct
- > Managing Allegations and Low-Level Concerns procedures
- > Data Protection Policy
- > Whistleblowing Policy

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	
How many members of staff would you prefer to help, where this can be safely accommodated?	
Is there anything that helps you feel comfortable during intimate care (for example, talking, quiet, privacy or particular routines)?	
Signature of child (where applicable)	
Date	

This plan will be reviewed annually.

Next review date: _____

To be reviewed by: Zoe Cook (Headteacher) and Liz Cornfoot (EYFS Lead)

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	
I give permission for the school to provide appropriate intimate care to my child (e.g. changing nappies, 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 receive routine intimate care (e.g. to be washed and changed following a toileting accident). Instead, the school will contact me or my emergency contact so that appropriate arrangements can be made. I understand that, if the school cannot reach me or my emergency contact and my child requires urgent intimate care, appropriately trained and authorised staff may provide the care necessary to protect my child's welfare, dignity, comfort and immediate health needs, in accordance with the school's Intimate Care Policy.	☐
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	