# Intimate Care Policy

| | |
|---|---|
| **Approved by:** | **Full Governing Body** |
| **Date:** | **January 2026** |
| **Next review due by:** | **January 2027** |

## 1.0 INTRODUCTION

At St Leonard's CE Primary School we understand the importance of encouraging independence and giving children the belief that they can do things for themselves. However, there will be occasions when additional help is required. Our Intimate Care Policy has been developed to safeguard children and staff. It is one of a range of specific school policies that contribute to our provision of pastoral care. The principles and procedures within this policy apply to everyone involved in the intimate care of children within our school community. Please note, the word 'school' throughout this policy refers to our Nursery, Reception and Years 1-6 provision.

Children are generally more vulnerable than adults, and staff involved with any aspect of pastoral care must be sensitive to their individual needs. 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 one-off occasion. Such activities include:

- feeding
- oral care
- washing
- changing clothes
- toileting
- first aid and medical assistance
- the supervision of a child involved in intimate self-care

Parents / carers have a responsibility to advise the school of any known intimate care needs relating to their child.

## 2.0 PRINCIPLES OF INTIMATE CARE

The following are the fundamental principles of intimate care upon which our policy guidelines are based:

- Every child has the right to be safe
- Every child has the right to personal privacy
- Every child has the right to be valued as an individual
- Every child has the right to be treated with courtesy, dignity and respect
- All children have the right to be involved in, and consulted with regard to, their own intimate care to the best of their abilities
- All children have the right to express their views on their own intimate care and to have such views taken into account
- Every child has the right to have intimate care at a level that is appropriate and consistent

At St Leonard's CE Primary School, we recognise that all children have different rates of development and may have varying needs during their time at school. Most children will achieve continence before starting full-time school. However, there may be some who are not fully independent and others who remain dependent on long-term support. The achievement of continence can be seen as the most important single self-help skill, improving a person's quality of life, confidence and self-esteem. Wetting and soiling accidents can be a source of stress and embarrassment to children and their families.

Difficulties with continence can severely inhibit a child's inclusion in school and the community. Children with continence difficulties who receive support and understanding from those who act in loco parentis are more likely to achieve their full potential. At St Leonard's CE Primary School we are committed to ensuring that all pupils can access the whole curriculum and are able to be included in all aspects of school life. This includes providing suitable changes of clothing and attending to the continence needs of individual pupils where necessary.

### 2.1 Aims and Objectives:

The aims and objectives of this policy and the schools' intimate care provision are to:

- Ensure that pupils with continence difficulties are not discriminated against, in line with the Equalities Act 2010 and the school's Equality Policy
- Provide help and support to pupils in becoming fully independent in personal hygiene
- Treat continence issues sensitively so as to maintain the self-esteem of the child
- Work in partnership with parents / carers to support a child who is progressing towards independence
- Deliver a suitable Individual Healthcare Plan where necessary for children requiring long-term support, in collaboration with parents / carers (please see section 4.0)
- Ensure that staff providing continence support work within recommended guidelines that protect themselves and the pupils involved, in accordance with the school's Health and Safety Policy and Safeguarding Children Policy

**2.2 Good Practice Guidelines:**

- The management of all children with intimate care needs will be carefully planned where appropriate, in accordance with this policy. Children's privacy and dignity will be of paramount importance at all times.
- Prior permission must be obtained from parents before intimate care procedures are undertaken by staff in school (please see Appendix A).
- An appropriate environment will be selected to ensure privacy and dignity at all times. Intimate care should always be undertaken with sensitivity; the child's welfare is of paramount importance. Any child who has intimate care needs will be attended to in a designated area within school. Children in pull-ups will be changed standing up where possible. Children in nappies and those requiring lay-down care, will be changed using a changing table.
- Equipment used for intimate care (e.g. a changing table) will be thoroughly cleaned immediately after use with antibacterial spray / wipes.
- A record of intervention will be maintained for all children requiring intimate care support  Parents / carers will only be contacted / spoken to in cases where soiling is severe and / or linked to illness, e.g. sickness and diarrhoea, or when a child refuses intimate care support, such as help from staff to change their clothing.
- Emphasis will be on staff providing the minimum level of assistance and intervention, compatible with the particular circumstances and the child's needs.
- Staff training is delivered according to the needs of individual pupils, with support from the School Nurse Service or other health professionals (such as physiotherapy and occupational therapy) as required.
- Staff will be supported to adapt their practice in relation to the needs of individual children, taking into account developmental changes and goals.
- Children will be supported to achieve the highest level of autonomy that is possible and appropriate given their age and abilities. For children in our Nursery and Reception year groups this includes enabling them to work towards the Early Learning Goals for Managing Self. Staff will encourage each child to do as much for them self as they can with regard to managing their own hygiene needs. This may mean, for example, giving the child responsibility for washing themselves.
- The needs and wishes of children and their parents / carers will be taken into account wherever possible within the constraints of staffing and in accordance with the equal opportunities legislation.

3.0 ROLES AND RESPONSIBILITIES

3.1 Parents / Carers

An effective working relationship between parents / carers and school is particularly necessary for children with intimate care needs. This ensures that a child's needs are properly identified, understood and met. To facilitate this, parent's / carers have the following responsibilities:

- To regularly review the school's Intimate Care Policy, in order to understand the procedures that will be followed when their child requires intimate care support
- To work in partnership with school to support a child who is progressing towards continence independence
- To ensure that their child is changed at the latest possible time before being brought to school
- To provide school with nappies and a full change of clothing where necessary
- To inform the school should the child have any marks or a rash
- To work closely and transparently with appropriate health care professionals (e.g. the School Nurse Service or Family Health Visitor) if their child has complex continence needs, including full involvement in forward planning
- To advise school of any known and / or new intimate care needs relating to their child at the earliest opportunity, and review arrangements as needed

### 3.2 School Staff

The staff at St Leonard's CE Primary School will follow agreed procedures when attending to the care or continence needs of any pupil within our setting, whether this is a child with an Individual Healthcare Plan or a child who has had an occasional 'accident'. These procedures are as follows:

- A 'minimum change' policy will be operated, i.e. the school will not undertake to change the child more frequently than if s/he were at home.
- A child's clothing will be changed as appropriate, as soon as possible
- Appropriate cleaning products will be used, and staff will adhere to health and safety guidelines (detailed below)
- Staff will report marks or rashes to parents / carers and a Designated Safeguarding Lead if appropriate
- A record of intervention will be maintained for all children requiring intimate care support. Parents / carers will only be contacted / spoken to in cases where soiling is severe and / or linked to illness, e.g. sickness and diarrhoea, or when a child refuses intimate care support, such as help from staff to change their clothing.
- An appropriate environment will be selected to ensure privacy and dignity at all times. Children in Nursery will be changed in the allocated changing area, this is adjacent to the Nursery classroom. Children will be positioned on the changing table to encourage discretion. If children are changed standing up this can be done in the cubicle. The medical room will be used to for nappy changing in Years Reception to Six.
- Careful consideration will be given to each child's situation to determine how many staff might need to be present when a child requires intimate care support. In the majority of cases one child will be supported by one staff member, including when a staff member is supporting a child of the opposite sex. If there is a clear rationale for having more adults present, this will be agreed with parents / carers and clearly documented e.g. through an Individual Healthcare Plan.
-

### 3.3 Links with outside agencies

Positive links with outside agencies will be nurtured. This enables school based plans to take account of the knowledge, skills and expertise of other professionals, to ensure a child's well-being and development remains paramount.

## 4.0 INDIVIDUAL HEALTH CARE PLANS

A small number of children will require an Individual Healthcare Plan. This is a document that is drawn up involving people who might be required to contribute to a child's care whilst they are in school. This could

include the Inclusion Manager, the Class Teacher, support staff, other staff members who might need to provide medical or emergency care, parents / carers and the child themselves. Professionals from outside of school might also be involved, depending on the child's needs, such as the GP or School Nurse Service.

An Individual Healthcare Plan is intended to set out what support a child needs to fully participate in school life. It is a written document that specifies this support – for example, what medicines school can administer, and the procedures that will be followed in a medical emergency.

Individual Healthcare plans are kept confidential, but school will need to share key information with anyone who might be required to provide support. Individual Healthcare Plans are not the same as Education, Health and Care (EHC) plans, which set out the support needed by children with special educational needs and disabilities, although some children may have both types of plan.

School in conjunction with parents / carers will agree how often an Individual Healthcare Plan will be reviewed. Often this happens once a year, but it may need to happen more frequently if a child's condition is unstable or their medication changes, for example.

## 5.0 HEALTH AND SAFETY PROCEDURES

When dealing with personal care and providing continence support, staff will follow agreed health and safety procedures to protect both the child and the member of staff. In conjunction with the school's Health and Safety Policy, these procedures are as follows:

- Staff will wear disposable gloves. Aprons are provided to be used at staff's discretion.
- Soiled continence products will be placed in a hygienic disposal system
- The changing area and equipment will be cleaned thoroughly after use using antibacterial spray / wipes
- Water and liquid soap will be available for staff to wash their hands as soon as the task is completed
- Paper towels will be available for staff to dry their hands
- Appropriate Lifting and Handling Procedures will be followed when / where necessary

## 6.0 SAFEGUARDING AND CHILD PROTECTION

The normal process of changing continence or wet and soiled clothes should not raise safeguarding and / or child protection concerns. Safeguarding procedures and Inter-Agency Child Protection procedures will be accessible to staff and adhered to. All staff involved in the provision of intimate and / or personal care will have all relevant checks completed before allowing them to be left alone with children (e.g. enhanced DBS checks) and will be subject to robust internal procedures such as reference checking and monitoring.

Where appropriate, all children will be taught personal safety skills carefully matched to their level of development and understanding. If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. they will immediately report concerns to a Designated Safeguarding Lead. Safeguarding procedures will then be followed, and guidance provided to the member of staff.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents / carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. If a child or their parent / carer makes an allegation against a member of staff, all necessary procedures will be followed in accordance with the school's Safeguarding Children Policy.

## 7.0 MONITORING

The EYFS Foundation Stage Leader and the SENDCO will take responsibility for monitoring that agreed procedures are being followed, in accordance with this policy, and are meeting the needs of children and their families. Advice may be sought from the School Nurse Service and school Designated Safeguarding Leads.

This policy operates in conjunction with relevant legislation and other related school policies, as detailed in sections 8.0 and 9.0 below.

**8.0 RELEVANT LEGISLATION AND GUIDANCE**

- Children Act 1989
- Childcare Act 2004 and 2006
- Disability Discrimination Act 1995
- UN Convention on the Rights of the Child (1989)
- Health and Safety at Work etc. Act 1974
- Equality Act 2010

"Toileting and Personal Care Guidance for Schools and Early Years Settings in Oxfordshire. July 2021" https://schools.oxfordshire.gov.uk/sites/default/files/2023- 10/personal_care_policy_document.pdf

- Statutory framework for the early years foundation stage (published 31st March 2021, effective 1st September 2021): https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/974907/EYFS_framework_-_March_2021.pdf

9.0 RELATED POLICIES:

- Accessibility Policy and Plan
- Medical Needs Policy
- Behaviour Policy
- Safeguarding Children Policy
- Equal Opportunities Policy
- Health and Safety Policy
- Special Educational Needs and Disabilities (SEND) Policy

**APPENDIX A – Intimate Care Policy Agreements**

**NAME OF CHILD: …….. DOB: ……..**

**The parent: I agree to…**

- Review the school's Intimate Care Policy (available on the school website), in order to understand the procedures that will be followed if / when my child requires intimate care support
- Work in partnership with school and supporting healthcare professionals (as applicable) to support my child if they are progressing towards continence independence
- Ensure that my child is changed at the latest possible time before being brought to school
- Provide school with nappies, wipes, nappy sacks and a full change of clothing where necessary
- Inform school should my child have any marks or a rash
- A 'minimum change' policy being in operation – I understand that the school will not undertake to change my child more frequently than if s/he were at home
- Advise school of any known and / or new intimate care needs relating to my child at the earliest opportunity, and review arrangements as needed
-

Signed: …….. Print Name: ……..…….

**The school: We agree to…**

- Select an appropriate environment in which to carry out intimate care support to ensure privacy and the child's dignity at all times
- Change the child should they soil themselves or become uncomfortably wet, in accordance with the school's Intimate Care Policy
- Ensure staff adhere to the school's Health and Safety and Safeguarding Children Policies when delivering intimate care support
- Monitor the number of times the child receives intimate care support in order to identify progress made. A record of intervention will be maintained.
- Ensure staff report marks or rashes to parents / carers and a Designated Safeguarding Lead if appropriate

Signed: …….. Print Name: ……..…….

Date: .....

## APPENDIX B – Record of Intimate Care Intervention

| **RECORD OF INTIMATE CARE INTERVENTION –** to be used for all children requiring intimate care support |
|---|

| **NAME OF CHILD** | |
|---|---|

| **Date** | **Time** | **Procedure** | **Staff Initials** | **Parent/Carer to be informed?** (only necessary where soiling is severe and / or linked to illness, e.g. sickness and diarrhoea, or when a child refuses intimate care support, such as help from staff to change their clothing) |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |