



## **Intimate Care Policy 2026**

<b>Date Issued:</b>	<b>March 2026</b>
<b>Prepared/Reviewed by:</b>	<b>Head Teacher</b>
<b>Review date:</b>	<b>March 2028</b>
<b>Date Adopted by Governing Body:</b>	<b>May 2022</b>

This policy represents the agreed principles for intimate care throughout the school and aims to foster safer working practices for intimate care and dignity for the child requiring adult support.

### **Introduction**

The Equality Act (2010) states that the responsible body of a school must not discriminate against a person:

(a) In the arrangements it makes for deciding who is offered admission as a pupil.

(b) As to the terms on which it offers to admit the person as a pupil.

(c) By not admitting the person as a pupil.

It is not acceptable to ask parents to come to change their child if a child has a recognised disability as this is a direct contravention of the Act. Also leaving any child soiled for any length of time is considered a safeguarding issue since it places the child at risk of significant harm.

### **Legislation**

This policy and practice will support staff to overcome any challenges and be confident they are meeting the requirements of the Early Years Foundation Stage, Special Educational Needs and Disability Act (2001), Equality Act (2010), Supporting Pupils at School with Medical Conditions (2014 updated 2017), SEND Code of Practice (2014) and related legislation.

### **The purpose of this policy is**

- 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 of care of their children.

### **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 Durham Lane Primary School are DBS checked on application and cannot undertake tasks within school until all checks are completed satisfactorily.

Students, work experience students, parent helpers or other volunteers **will never** be involved in intimate care issues.

### **The Protection of Children**

- In Durham Lane Primary School, Education Child Protection Procedures and Inter-Agency Child Protection procedures will be adhered to.
- If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the Head Teacher as Designated Safeguarding Officer or, in her absence, the Deputy Head Teacher and this will be recorded on CPOMS.
- If a child becomes distressed or unhappy about their intimate care needs being met by a particular member of staff, the matter will be looked into and outcomes recorded on CPOMS. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.
- If a child makes an allegation against a member of staff, all necessary procedures will be followed.

### **Safeguarding and Welfare Requirements**

There is no legal requirement that a second member of staff must be available to supervise the intimate care process. Criminal Record Bureau /disclosure and barring service (**CRB/DBS**) are rigorous and are carried out to ensure the safety of children with staff employed in Durham Lane Primary School. We have a duty to ensure staff are not employed without a **CRB/DBS**. Section 24 (Intimate Care). In the Government guidance for "Safer Working Practice for staff working directly with Children and Vulnerable Adults Addendum"

(April 2020), it states that, “When assistance is required, this should normally be undertaken by one member of staff, however, they should try to ensure that another appropriate adult is in the vicinity who is aware of the task to be undertaken and that, wherever possible, they are visible and/or audible. Intimate or personal care procedures should not involve more than one member of staff unless the pupil’s care plan specifies the reason for this.” At Durham Lane, we adhere to this principle whenever possible.

### **Principles**

This guidance refers to all children, of any age, who may require support for intimate care from an adult on a daily basis and those who may require it occasionally or exceptionally.

As with all developmental milestones, there is a wide variation in the time at which children and young people develop and intimate care may need to be provided at any stage.

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a pupil after they have soiled themselves) to intimate personal areas. 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 administration of rectal diazepam).

The issue of intimate care is a sensitive one and will require staff to be respectful of the child’s needs, including their cultural background. The child’s dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.

At Durham Lane Primary School, we ensure that children and young people’s dignity is preserved and that a high level of privacy, choice and control are needed to provide for them. We are 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 the appropriate developmental level and degree of understanding. No child should be attended to in a way that causes distress or pain. This guidance is to help ensure good practice in this area.

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.

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact. The expectation is that staff will work in ‘limited touch’ cultures and that when physical contact is made with pupils this will be in response to the pupil’s needs at the time, will be of limited duration and will be appropriate given their age, stage of development and background.

Staff should be aware that even well-intentioned physical contact might be misconstrued directly by the child, an observer or by anyone the action is described to. Staff must therefore always be prepared to justify actions and accept that all physical contact be open to scrutiny.

Physical contact which is repeated with an individual child or young person is likely to raise questions unless the justification for this is formally agreed by the child, the organisation and those with parental responsibility.

### **Our approach to best practice**

- The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child’s welfare and dignity is of paramount importance.
- Staff who provide intimate care are trained to do so (including Child Protection, as well as Health and Safety training in lifting and moving if necessary) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist if this is required.
- Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes.
- 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. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.

- 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. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present.

### **Procedures at Durham Lane Primary School**

Our procedures for children with medical needs takes account of the statutory guidance in “Supporting Pupils at School With Medical Conditions guidance” (DfE 2014)- see separate policy.

### **Parental Involvement**

A home/school Intimate Care Plan will be put in place which makes clear the partnership between staff and parents when children are coming to school. This will be reviewed on a regular basis with parents. Such an agreement helps to avoid misunderstandings and also helps parents/carers feel confident that the school will meet their children’s needs. (See appendices).

Should a child with complex intimate care needs be admitted, the child’s medical practitioners will be closely involved and a separate more specialised individual intimate care plan may be required.

Specific issues around toileting are discussed at a private meeting with the parent/carer prior to admission into school. The meeting provides an opportunity to involve other agencies as appropriate, such as a Health Visitor, School Nurse or Children’s Centre Staff.

### **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.

At Durham Lane Primary School, we provide information for parents of the policy and practice in the school. Such information includes an Intimate Care Agreement form 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. (see proformas in the appendices).

As part of our good practice, our school has introduced a note book/proforma to record who changes a child, how often this task is carried out and the time they left/returned to the classroom following this task.

Examples of good practice provide reassurance for parents that systems are in place and our school has implemented procedures for staff to follow. It also ensures that there is transparency which may protect the staff member carrying out the changes.

### **Equipment Provision**

At Durham Lane Primary School, we believe parents have a role to play when their child is still wearing nappies. The parent should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Our school will be responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste (all are available in the changing area/ disabled toilet).

### **Facilities**

Children who have long-term incontinence will require specially adapted facilities. We provide a dedicated disabled toilet in the Early Years corridor opposite Reception as well as a disabled toilet facility which contains equipment necessary for changing children.

It is recommended that:

1. Where possible, children or young people are changed standing up.
2. Less mobile children or young people, or children in the Foundation Stage, may prefer to be changed on a suitable changing mat on the floor whilst still ensuring the dignity of the child. The dignity and privacy of the child should be of paramount concern.

### **Health and Safety**

Staff should always wear gloves when dealing with a child who is bleeding, wet or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag. This bag should then be placed in the grey nappy bin which is specifically designated for the disposal of such waste. This is situated in the disabled toilet.

The yellow bin, situated in the disabled toilet, is to be used for waste from cuts, grazes etc. and is emptied on a weekly basis. This is collected as part of the usual refuse collection service as this waste is not classed as clinical waste.

### **Special Needs**

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered when preparing and implementing Intimate Care Plans for each child. As with all arrangements for intimate care needs, agreements between the child, those with parental responsibility and the school should be transparent and recorded. If it is necessary to toilet or clean a child with additional needs who has wet or soiled themselves, the child's age and level of self-help skills will be taken into consideration. As with any child, the staff will decide if the child needs verbal support or physical support i.e. cleaning/wiping. 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. Staff will complete the basic needs proforma (see appendices).

Regardless of age and ability, the views and/or emotional responses of children with special needs should be actively sought (with advocacy arrangements made for those who can't) in regular reviews of these arrangements. (see appendices for proforma).

### **Soiling (infrequent/ not happening on a regular basis)**

Parents of pupils due to start in the Early Years Foundation Stage are made aware of school procedures in relation to soiling, cleaning and changing, during induction meetings and in literature provided. Any child who has soiled, is comforted and kept away from the other children to preserve dignity. The child's age and level of self-help skills will be taken into consideration. Judgements will be made as to whether the child requires verbal support / instruction, or physical support. 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. Staff will complete the basic needs proforma (see appendices)

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

- 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 or excrement are wiped up and flushed down the toilet and blood which is wiped up goes into the yellow bin ;
- 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

### **Supporting dressing/undressing**

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

### **Pupils in distress**

There may be occasions when a distressed pupil needs comfort and reassurance that may include physical touch such as a caring parent would give. Staff must remain self-aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation.

Judgement will need to take account of the circumstances of a pupil's distress, their age and the extent and cause of the distress. Unless the child needs an immediate response, staff should consider whether they are the most appropriate person to respond; it may be more suitable to involve the child's relative. Particular care must be taken in instances which involve the same pupil over a period of time. 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. The staff member must then inform the Head Teacher, Deputy Head Teacher or another member of the SLT who will advise them of what to do. This will be recorded on CPOMS.

Where a member of staff has a particular concern about the need to provide this type of care and reassurance, they should seek further advice, from the Head Teacher, Deputy Head Teacher or another member of the SLT.

#### **First Aid and intimate care (See First Aid Policy)**

Staff who administer first aid ensure, wherever possible, that another adult or other children are 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, where possible.

#### **Children getting changed**

Children are entitled to respect and privacy when changing clothes. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying or teasing does not occur. This means that adults should announce their intention of entering rooms where children may be getting changed, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore staff need to be vigilant about their own conduct. In classrooms where windows are visible to members of the passing public, teachers should be vigilant and ensure that blinds are closed during dressing and undressing.

#### **Changes made June 2017:**

Pages 2 and 5 CPOMS added

Page 7 flushable wipes will be used wherever possible

#### **Changes made May 2018**

EMP McGuckin to E Barrett

#### **Changes made May 2020**

Page 1 changed date

Page 2 "Safer Working Practice for staff working directly with Children and Vulnerable Adults Addendum" (April 2020). Slight change of wording :At Durham Lane, we adhere to this principle whenever possible.

Page 4 Changed This is situated in the disabled toilet.

Page 6 added In classrooms where windows are visible to members of the passing public, teachers should be vigilant and ensure that blinds are closed during dressing and undressing.

Appendix 1 added 'signing' bullet point 4. Changed tense of imperative verbs

Changes made March 2026

Page 4 Added new disabled toilet in the reception corridor

**Durham Lane Primary School**  
**Changing Guidelines**

**Wet Change**

- Spare clothes can usually be found in most classroom cupboards.
- Reassure child by explaining what will happen.
- Make sure appropriate 'clean' clothing is available i.e. dry underwear, trousers, socks etc.
- Adult to use waterproof gloves.
- Ask the child to remove wet clothing and place into carrier bag, helping if and when necessary.
- Ask child to wipe (wash if using wet wipes) themselves – placing all wipes into sanitary bin provided in changing area. (Do not flush down toilet, unless flushable wipes are used).
- Child to dress themselves as much as possible – helping if necessary.
- Both child and adult need to wash hands. (Gloves go in sanitary bin).
- Child to take bag with wet clothes home at end of day.
- Make teacher/parent aware of incident.

**Soiled Change**

Follow procedure as above being aware of the following:-

- If appropriate, child to wipe away as much faeces as possible.
- Adult to 'wipe' away as much faeces as possible (being aware of safeguarding child's privacy and your personal safeguarding) using toilet tissue followed by wet wipes if necessary.
- Soiled wipes should be placed in nappy sack and put in sanitary bin. Flushable wipes are used wherever possible.
- Soiled clothes need to be 'double' bagged.

In all cases, parents must be informed. If this becomes a regular problem, the Head Teacher must be informed and appropriate follow up considered

**We aim to work closely with you and your child to ensure that they feel confident, secure and respected at school/ setting.**



Our Parents/Carers, you can help support us by:

- ☑☑changing your child/young person at the latest possible time before coming to school
- ☑☑providing spare nappies/ pull ups, wet wipes and sufficient changes of clothes
- ☑☑wash and returning any clothing provided by the school as soon as possible.
- ☑☑signing a mutual agreement to the procedures to be followed during changing at school
- ☑☑assisting us by informing our staff if your child/young person has any marks/rashes
- ☑☑encouraging your child's self-help in intimate care procedures, wherever possible.
- ☑☑discussing any concerns regarding your child/ intimate care progress with our staff

Our staff will support you by:

- ☑☑changing your child should s/he require it.
- ☑ informing you if your child has any marks/rash and take further action as appropriate
- ☑☑encouraging your child in their participation in their intimate care procedures wherever this is possible
- ☑☑respecting cultural practices through discussion with you, the parents/Carer.

Parent/Carer's Signature.....

Staff Signature.....

**APPENDIX 3  
Durham Lane Primary School**

**Intimate Care Plan**

<b>Child's Name:</b>	<b>Date:</b>
<b>Nominated Carers:</b>	
<b>Main areas of need:</b>	

**Detailed plan:**

(Please refer to any toileting plans, dressing or undressing and medical needs)

This plan was written by..... on .....

This plan was agreed with parents/carers on (date) .....

This child's views were sought for this plan on (date) .....

(If not, please state why not):

Signed (Head Teacher) ..... Date .....

Signed (TA Support Staff) ..... Date .....

..... Date .....

..... Date .....

..... Date .....

Signed (Parent/Carer) ..... Date .....

**Durham Lane Primary School  
Basic & Intimate Care Record**



<b>Date/Notes</b>	<b>Basic Care</b> (Taking child to the toilet)	<b>Intimate Care</b> (cleaning the child)
	<i>Signature</i>	<i>Signature</i>