

# Carrington Primary and Nursery School



## Intimate Care Policy and Procedures

Date of approval:  
Committee: CVS  
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## Policy Statement

Carrington Primary and Nursery School is committed to ensuring that all staff responsible for the intimate care of children undertake their duties in a professional, respectful and dignified manner at all times. We recognise that there is a need to treat all children with respect and dignity when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain. Children's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff will work in partnership with parents/carers and professionals to provide continuity of care.

## Definition

Intimate care is any care which involves washing, touching or carrying out an invasive procedure to intimate personal areas. In most cases such care will involve procedures to do with personal hygiene and the cleaning of associated equipment as part of the staff member's duty of care. This includes toileting, continence care, changing, hygiene support, menstrual care and some medical procedures. In the case of specific procedures only the staff suitably trained and assessed as competent should undertake the procedure (e.g. the administration of rectal diazepam).

## Principles

The child's welfare is paramount. All children have the right to dignity, privacy, safety, inclusion, respect and choice. Independence will be promoted wherever possible and care will be sensitive to cultural, religious and personal values.

This policy reflects current legislation, accepted best practice and complies with the government guidance: Working Together to Safeguard Children 2023, Keeping Children Safe in Education September 2025 and updated guidance in the EYFS Statutory Framework 2025. This policy gives effect to our duty to safeguard and promote the welfare of their pupils under section 175/157 the Education Act 2002 and where appropriate under the Children Act 1989 by creating and maintaining a safe learning environment for children and young people.

This school takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's intimate care needs is an aspect of safeguarding.

The Governing Body recognises its duties and responsibilities in relation to the Equalities Act 2010 which requires that any pupil with an impairment, that affects his/her ability to carry out day-to-day activities, must not be discriminated against.

This intimate care policy should be read in conjunction with the schools' policies as below:

- safeguarding policy and child protection procedures
- staff code of conduct and guidance on safer working practice
- 'Whistle-blowing' and allegations management policies
- health and safety policy and procedures
- Special Educational Needs and Disability (SEND) policy

- Nottingham City Council guidance on moving and handling
- policy for supporting children with medical conditions and the administration of medicines

The Governing Body is committed to ensuring that all staff responsible for the intimate care of pupils will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust. Members of staff must be given the choice as to whether they are prepared to provide intimate care to pupils. All staff undertaking intimate care must be given appropriate training.

Staff will work in close partnership with parent/carers and other professionals to share information and provide continuity of care.

Where pupils with complex and/or long-term health conditions have an Individual Healthcare Plan (IHP) in place, the plan should, where relevant, consider the principles and best practice guidance in this intimate care policy.

### Child focused principles of intimate care

The following are the fundamental principles upon which the Policy and Guidelines are based:



### Child Protection

The governors and staff at Carrington recognise that pupils with special needs and who are disabled are particularly vulnerable to all types of abuse.

The school's child protection procedures will be adhered to.

From a child protection perspective, it is acknowledged that intimate care involves risks for children and adults as it may involve staff touching private parts of a pupil's body. In this school, best practice will be promoted and all adults (including those who are involved in intimate care and others in the vicinity) will be expected to be vigilant at all times, to seek advice where relevant and take account of safer working practice.

Where appropriate, pupils 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 pupil's presentation, e.g. unexplained marks, bruises, etc. they will immediately report concerns to a Designated Safeguarding Lead (DSL). A clear report of the concern will be completed following school procedures and a referral made to Children's Services Social Care, if appropriate, in accordance with the school's child protection procedures.

If a pupil, or any other person, makes an allegation against an adult working at the school this should be reported to the Headteacher (or to the Chair of Governors if the concern is about the Headteacher) who will consult the Local Authority Designated Officer in accordance with the school's policy: Dealing with Allegations of Abuse against Members of Staff and Volunteers. It should not be discussed with any other members of staff or the member of staff the allegation relates to.

Similarly, any adult who has concerns about the conduct of a colleague at the school or about any improper practice will report this to the Headteacher or to the Chair of Governors, in accordance with the child protection procedures and 'whistle-blowing' policy.

### **Best practice**

Pupils who require regular assistance with intimate care have written Individual Education Plans (IEP), health care plans or intimate care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. Ideally the plan should be agreed at a meeting at which all key staff and the pupil should also be present wherever possible/appropriate. Any historical concerns (such as past abuse) should be taken into account. The plan should be reviewed as necessary, but at least annually, and at any time of change of circumstances, e.g. for residential trips or staff changes (where the staff member concerned is providing intimate care). Procedures for educational visits/day trips should also be taken into account.

Where relevant, it is good practice to agree with the pupil and parents/carers appropriate terminology for private parts of the body and functions and this should be noted in the plan.

Where a care plan or IEP is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g., has had an 'accident' and wet or soiled him/herself). It is recommended practice that information on intimate care should be treated as confidential and communicated

in person, by telephone or through parental contact on Class Dojo, not through the home/school diary.

In relation to record keeping, a written record should be kept every time a child has an invasive medical procedure, e.g. support with catheter usage (see aforementioned multi-agency guidance for the management of long term health conditions for children and young people).

Accurate records should also be kept when a child requires assistance with intimate care; these can be brief but should, as a minimum, include full date, times and any comments such as changes in the child's behaviour. It should be clear who was present in every case. These records will be kept in the child's file and available to parents/carers on request.

All pupils will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each individual pupil to do as much for his/herself as possible.

Staff who provide intimate care are trained in personal care (eg health and safety training in moving and handling) according to the needs of the pupil. Staff should be fully aware of best practice regarding infection control, including the requirement to wear disposable gloves and aprons where appropriate.

Staff will be supported to adapt their practice in relation to the needs of individual pupils taking into account developmental changes such as the onset of puberty and menstruation.

There must be careful communication with each pupil who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc) to discuss their needs and preferences. Where the pupil is of an appropriate age and level of understanding, permission should be sought before starting an intimate procedure.

Staff who provide intimate care should speak to the pupil personally by name, explain what they are doing and communicate with all children in a way that reflects their ages

Every child's right to privacy and modesty will be respected. Careful consideration will be given to each pupil's situation to determine who and how many carers might need to be present when s/he needs help with intimate care. SEN advice suggests that reducing the numbers of staff involved goes some way to preserving the child's privacy and dignity. Wherever possible, the pupil's wishes and feelings should be sought and taken into account.

An individual member of staff should inform another appropriate adult when they are going alone to assist a pupil with intimate care.

The religious views, beliefs and cultural values of children and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.

Adults who assist pupils with intimate care should be employees of the school, not students or volunteers, and therefore have the usual range of safer recruitment checks, including enhanced CRB checks.

All staff should be aware of the school's confidentiality policy. Sensitive information will be shared only with those who need to know.

Health & Safety guidelines should be adhered to regarding waste products, if necessary, advice should be taken from the DCC Procurement Department regarding disposal of large amounts of waste products or any quantity of products that come under the heading of clinical waste.

No member of staff will carry a mobile phone, camera, I-pad or similar device whilst providing intimate care.

### **Children with SEND**

Carrington is committed to the full inclusion of children with Special Educational Needs and Disabilities (SEND). Children with SEND requiring intimate care will have individual Personal Intimate Care Plans linked to EHCPs or IEPs where appropriate. Plans will include communication needs, equipment, manual handling, safeguarding measures, dignity, independence support and medical needs. Support will be adapted to developmental, emotional and physical needs. Children with SEND are recognised as potentially more vulnerable and enhanced safeguarding vigilance will be applied.

### **Physiotherapy**

Pupils who require physiotherapy whilst at school should have this carried out by a trained physiotherapist. If it is agreed in the IEP or care plan that a member of the school staff should undertake part of the physiotherapy regime (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally, written guidance given and updated regularly. The physiotherapist should observe the member of staff applying the technique.

Under no circumstances should school staff devise and carry out their own exercises or physiotherapy programmes.

Any concerns about the physiotherapy programme or any failure in equipment, should be reported to the physiotherapist.

### **Medical Procedures**

Pupils who are disabled might require assistance with invasive or non-invasive medical procedures such as the administration of rectal medication, managing catheters or colostomy bags. These procedures will be discussed with parents/carers, documented in the health care plan or IEP and will only be carried out by staff who have been trained to do so.

It is particularly important that these staff should follow appropriate infection control guidelines and ensure that any medical items are disposed of correctly.

Any members of staff who administer first aid should be appropriately trained in accordance with LA guidance. If an examination of a child is required in an

emergency aid situation it is advisable to have another adult present, with due regard to the child's privacy and dignity.

### **Massage**

Massage is now commonly used with pupils who have complex needs and/or medical needs in order to develop sensory awareness, tolerance to touch and as a means of relaxation.

It is recommended that massage undertaken by school staff should be confined to parts of the body such as the back, hands, feet and face in order to safeguard the interest of both adults and pupils.

Care plans should include specific information for those supporting children with bespoke medical needs.

### **Parents' and Carers' Responsibilities**

Carrington Primary recognises that parents/carers are key partners in the provision of intimate care. Effective care is dependent on strong communication, shared responsibility, mutual respect, and a commitment to safeguarding and dignity."

Information Sharing - Parents/carers must inform the school of their child's intimate care needs and provide accurate, up-to-date information, including medical, developmental, cultural and emotional factors.

Consent and Documentation - Parents/carers must complete and sign all required paperwork including Parental Consent Forms, Personal Intimate Care Plans, Medical Care Plans, and SEND documentation where applicable.

Provision of Personal Care Supplies - Parents/carers are responsible for providing nappies, pull-ups, wipes, creams (with consent), spare clothes, sanitary products, continence products and any prescribed personal care items. All items must be clearly labelled and replenished regularly.

Partnership Working - Parents/carers are expected to work collaboratively with staff, attend meetings, support care plans and engage with professionals.

Promoting Independence - Parents/carers should support self-care skills at home and reinforce routines used in school.

Safeguarding and Cooperation -Parents/carers must engage with safeguarding processes and cooperate with school procedures.

Communication - Parents/carers must maintain regular communication and inform school of any changes in circumstances.

### **Complaints**

If a parent is worried and wishes to discuss any concerns relating to their child, the first point of contact should be the child's class teacher. Most concerns can usually be addressed by a meeting between the class teacher and parents to discuss any issues and identify actions to address them.

However, if there are on-going concerns, specifically relating to a child's intimate care, a meeting should be requested with the school's SENDCo via the school office. The SENDCo will then usually arrange a meeting with parents, the class teacher, the child, and other support staff or other professionals if appropriate. We endeavour to communicate with parents 'face-to-face' to address concerns, however if this is not suitable telephone conversations with the Class Teacher or or SENDCo can be arranged.

If there are any complaints relating to the intimate care of pupils, these will be dealt with in the first instance by the Headteacher. This is unless they relate to safeguarding concerns in which case the procedures detailed above will be followed. The chair of governors may be involved if necessary. In case of an unresolved complaint the LA may be involved. Please see the complaints policy on the school website or request a copy from the office for specific details.

## Appendix 1



**CARRINGTON PRIMARY AND NURSERY SCHOOL**  
**INTIMATE CARE PERMISSION FORM**



If your child wets or soils themselves whilst they are at school, it is important that measures are taken to have them changed and if necessary cleaned as quickly as possible. Our staff are experienced at carrying out this task but if necessary, the school can contact you or your emergency contact who will be asked to attend without delay.

The school has an Intimate Care and Toileting Policy which will be shared in a meeting to agree an intimate care personal plan. It is also available to view on our website or a copy can be obtained from the school office.

**Please fill out the permission slip below stating your preference.**

**Name of child:** \_\_\_\_\_ **D.O.B** \_\_\_\_\_

**Class** \_\_\_\_\_

**Please tick as appropriate**

I have read the Intimate Care and Toileting Policy and Procedures and give consent for my child to be changed and cleaned if they wet/soil themselves whilst at school.

I agree to provide all appropriate materials such as nappies, wipes, nappy cream, nappy sacks, spare clothes, as agreed with school.

I understand that there will only be one member of staff involved in any intimate care unless there are particular reasons that require a second member such as significant child disability requiring 2 staff to assist.

I do not give consent for my child to be changed and cleaned if they wet or soil themselves. The school will contact me or my emergency contact and I will organise for my child to be cleaned and changed. I understand that in the event that I or my emergency contact cannot be contacted, the staff will act appropriately and may need to come into some level of physical contact in order to aid my child.

<b>Signature of Parent/Carer:</b>	
<b>Print name:</b>	
<b>Date:</b>	

**Appendix 2**



<b>Child's name</b>	<b>Class</b>	<b>D.O.B</b>
<b>Date of plan:</b>	<b>Date of review:</b>	

<b>Area of Need</b>
<b>Equipment required</b>
<b>Location of suitable toilet facilities</b>
<b>Support required/frequency of support</b>

**Working towards independence**

School will	Parent/carer will	Child will try to	Target achieved

**Signed**

**Parent** .....

**Staff members** .....

**SENDCo** .....

**Appendix 3**

