



Intimate Care Policy



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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 any care that involves toileting, washing, changing, touching or carrying out an invasive procedure to children's intimate personal areas.

Principles

Waterton Academy Trust believe 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 always maintained. Should your child require regular intimate care assistance the needs will be discussed and documented with the relevant professionals, including the SENCO and/or school Nurse and the child's parents.

Definition

Intimate care is one of the following:

- Supporting a pupil with dressing/undressing
- Providing comfort or support for a distressed or sick pupil
- Assisting a pupil requiring medical care, who is not able to carry this out unaided.
- Cleaning a pupil who has soiled/wet him/herself, has vomited or feels unwell.

Legislation and statutory guidance

This policy complies with statutory safeguarding guidance and statutory guidance around children's rights..

- The Children Act 1989
- Equality Act 2010
- Children and Families Act 2014
- The United Nations convention on the Rights of the Child 1992
- The Human Rights Act 1998
- This policy complies with the most recent statutory safeguarding guidance, including Keeping Children Safe in Education (2025) and Working Together to Safeguard Children (2023). It should be read alongside the Trust's Safeguarding and Child Protection Policy.
- It also complies with our funding agreement and articles of association.

Role of parents/carers

Seeking parental permission

- For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents) and for children whose needs are more complex or who need particular support outside of what's covered in the permission form (if used), an intimate care plan will be created in discussion with parents/carers (see section below).
- Where there isn't an intimate care plan in place, parental permission will be sought before performing any intimate care procedure.
- If the school is unable to get in touch with parents/carers and an intimate care procedure urgently needs to be carried out, the procedure will be carried out to ensure the child is comfortable, and the school will inform parents/carers afterwards.

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 preferences of the child will also be taken into account. If there's doubt whether the child is able to make an informed choice, their parents/carers will be consulted.
- Where intimate care is linked to a medical condition or disability, the intimate care plan must be developed alongside the child's Individual Healthcare Plan (IHP) or Education, Health and Care Plan (EHCP), ensuring consistency across documentation.
- The plan will be reviewed twice a year, 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.

Sharing information

The school will share information with parents/carers as needed to ensure a consistent approach. It will expect parents/carers to also share relevant information regarding any intimate matters as needed.

Role of staff

Which staff will be responsible

- Any roles who may carry out intimate care will have this set out in their job description. No other staff members can be required to provide intimate care.
- All staff at the school who carry out intimate care will have been subject to an enhanced Disclosure and Barring Service (DBS) with a barred list check before appointment, as well as other checks on their employment history.

How staff will be trained

Staff will receive:

- Training in the specific types of intimate care they undertake
- Regular safeguarding training

- If necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as possible

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.

Staff undertaking intimate care will be supported through regular supervision and given access to wellbeing support if required. The Headteacher is responsible for ensuring that staff feel confident, supported, and safe in carrying out their duties.

Intimate care procedures

How procedures will happen

- Staff should follow the Guidance for Safer Working Practice for Adults who Work with Children and Young People (2022) to ensure professional boundaries are maintained. Lone working should be avoided where possible.
- All intimate care activities require two persons for the greater comfort/safety of the child. This should be decided in consultation with the child and family
- If in exceptional circumstances intimate care has to be carried out by one staff member, this must be risk assessed, recorded, and agreed by the Headteacher.
- All children have the right to be safe and to be treated with dignity and respect. These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.
- Involve the child in their intimate care. Encourage a child's independence as far as possible in their intimate care. Where the child is fully dependent, talk with them about what is going to be done and give them choice where possible.
- All children will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each individual child to do as much for his/herself as possible.
- Check your practice by asking the child / parent any likes/dislikes while carrying out intimate care and obtain consent.
- Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.
- Make sure practice in intimate care is consistent. As a child can have multiple carers a consistent approach to care is essential. Effective communication between parents / carers / agencies ensures practice is consistent.
- Promote positive self-esteem and body image. Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be relaxed, enjoyable and fun.
- 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.

- Where intimate care may be required on school trips or residential visits, arrangements must be risk assessed and agreed in advance with parents/carers. Plans must ensure privacy, dignity, and safeguarding are upheld in different environments.

Concerns about safeguarding

- If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the trusts' safeguarding procedures.
- If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to their line manager.
- If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the trust's safeguarding procedures.
- All intimate care delivered must be recorded on the Trust's designated system (e.g. CPOMS or school record sheet), including the date, time, staff present, and type of care provided. This record should be available to parents/carers on request.


Monitoring arrangements

This policy will be reviewed annually by the Head of SEND and Inclusion, in consultation with the Executive Leadership Team.

Links with other policies

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEND
- Supporting pupils with medical conditions

| Document Detail | | | |
|-----------------------------|------------|---|------------------|
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| 1 | 01/01/2024 | L Thresh | New Policy |

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|---|------------|--------------|--|
| 2 | 01/09/2025 | M Bretherton | <ul style="list-style-type: none"> • Updated statutory guidance references to KCSIE 2025 and Working Together 2023. • Added reference to Safer Working Practice guidance (2022). • Required all intimate care to be recorded on Trust safeguarding systems. • Linked intimate care plans to IHPs and EHCPs. • Clarified expectations on two-adult presence, with risk assessment if only one adult. • Added staff supervision and wellbeing section. • Strengthened procedures for trips and off-site visits. |
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Appendices



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 | |

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

Appendix 2: Template PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE

| 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 soiled clothing, washing and toileting) | <input type="checkbox"/> |
| 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) | <input type="checkbox"/> |
| I understand the procedures that will be carried out and will contact the school immediately if I have any concerns | <input type="checkbox"/> |
| <p>I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident). Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed).</p> <p>I understand that if the school cannot reach me or my emergency contact, if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.</p> | <input type="checkbox"/> |
| Parent/carer signature: | |
| Name of parent/carer: | |
| Relationship to child: | |
| Date: | |

