



INTIMATE CARE POLICY

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CONTENTS

1	Purpose	3
2	Key Principles	3
3	School Responsibilities	3
4	Intimate Care Procedure	3
5	Parent Consent and Communication.....	5
6	Record Keeping	5
7	Pupil Involvement.....	5
8	Parent/Carer Responsibilities.....	5
9	Monitoring and Review.....	6
10	Related Policies and Guidance	6
11	Policy History	6
	Appendix 1: Template Intimate Care Plan.....	7
	Appendix 2: Template Parent/Carer Consent Form	8
	Appendix 3: Template of Record of Intimate Care.....	9
	Appendix 4: Template Record of Agencies Involved Around the Child/Young Person	10

1 Purpose

- This policy outlines the intimate care procedures we will follow ensuring children who require assistance with personal care are treated with dignity, respect, and in accordance with safeguarding standards.
- Intimate care is any care which involves washing, touching or carrying out an invasive procedure to intimate personal areas. For the purposes of this policy, intimate care can be defined as any care which involves washing or carrying out a procedure to intimate personal areas which most people usually carry out themselves, but some children are unable to do because of their young age, physical difficulties or other special needs.
- To provide clear and safe procedures for staff supporting pupils with intimate care needs and to ensure parents/carers are well informed and involved.
- The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

2 Key Principles

We will:

- Treat all children with dignity, privacy, and respect.
- Promote children's independence and autonomy in personal care, where possible.
- Ensure consistency and partnership with parents/carers.
- Follow safeguarding and child protection policies.

3 School Responsibilities

- Provide clean, safe toileting facilities accessible to all children.
- Ensure all staff involved have Enhanced DBS, and training takes place as a minimum, annually, for safeguarding and training appropriate to intimate care, e.g. consent, independence, reminders of procedures, toilet usage schedules.
- The SENCO will oversee the provision of intimate care, with collaboration and support from the DSL and medical team.
- Maintain accurate records of all care provided.
- 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 school's safeguarding and allegations against staff procedures.
- School will have a backup of supplies to support intimate care procedures where appropriate.

4 Intimate Care Procedure

- Staff inform a colleague before providing care, and they always ensure another member of staff is in the vicinity, visible or audible.
- Wherever possible, two members of staff should be present when providing intimate care to a pupil. In some situations, the presence of two adults may be necessary due

to the pupil's specific needs or contextual circumstances of the pupil. In such cases, the Headteacher should risk assess this to determine the appropriate adult-to-child ratio and ensure that safeguarding measures are proportionate and effective. When a second adult is present, they must have a clearly defined role, such as: assisting with equipment (e.g. operating a hoist), completing documentation or records, providing additional support as required. If staffing levels do not allow for two adults to be present, intimate care should still be provided in a manner that minimises risk. This includes choosing a location that ensures privacy while maintaining safety, timing the care to ensure other staff are nearby and aware, and following all safeguarding protocols and recording the care provided.

- Care is carried out in a private, safe, and respectful manner.
- No mobile/digital devices are permitted during care/in any location where intimate care is provided.
- Communicate with the pupil throughout using appropriate methods.
- Record the date, time, staff involved, procedure carried out, and any variation from the care plan.
- Report any safeguarding concerns immediately to the DSL and SENCo (e.g., unexplained marks, change in behaviour or appearance etc.) following our safeguarding policy processes including if a child is accidentally hurt or where there is an issue when carrying out the procedure.
- At Hill View we use positive approaches to intimate care. These are as follows:
 - Where possible we ensure we get to know the pupil beforehand in other contexts to gain appreciation of their moods and verbal and non-verbal communication; have a knowledge and understanding of any religious and/or cultural sensitivities regarding aspects of intimate care related to the individual pupil and take full account of these.
 - Speaking to the pupil personally using their name so they are aware they are the focus of the activity.
 - Give explanations of what is happening in a straightforward and reassuring way; be aware of others around who may be able to hear what is being said.
 - Enable the pupil to be prepared for and to anticipate events whilst demonstrating respect for their body, for example by giving a strong sensory cue such as the pad to signal intention to change.
 - Where possible we encourage the pupil to wipe their private parts of the body themselves.
 - We undertake intimate care with tact, sensitivity and in an unhurried manner.
 - We ensure the pupil is the focus of attention. Any conversation involves and is appropriate to the pupil.

Hygiene

- All staff must follow infection control guidelines and be up to date with these guidelines.
- Staff have access to protective disposable gloves and a disposable apron and will take the necessary care when dealing with spillage of blood or other bodily fluids and disposing of dressings and equipment.

- Staff must wash their hands before and after carrying out intimate care

5 Parent Consent and Communication

- Consent is obtained at enrolment (if we are made aware that a pupil requires occasional intimate care) or after the first occurrence.
- For complex needs, a personalised care plan is created with parental input and parental consent.
- In emergencies where consent is unavailable or contact with parents/carers has been unsuccessful, staff may act in loco parentis. The school will inform parents afterwards. This act of care would be reported to a senior member of school staff and the reasons for the care undertaken would be documented by the staff member who delivered the care.
- Parents/carers must ensure that they provide all relevant information to school, as soon as possible, so that the needs of their child can be met. This includes the nature of their child's needs, details of any healthcare professionals involved including specialist nurses, as well as any changes in their medication, care or condition.
- Parents/carers must ensure that they work towards their child achieving the maximum possible level of independence at home. Parents/carers should work with school to develop and agree a care plan.
- Parents/carers must make sure that the school always has required equipment available for their child's intimate care or toileting needs e.g. providing nappies.
- Parents/carers must ensure that schools always have their emergency contact details.

6 Record Keeping

- All incidents of intimate care (including in bound books, individual structured logbooks and/or class structured logbooks) will be recorded and stored securely. Records will include the date and time of the care, who was present, the care carried out and any care given that has differed from the care plan, together with the reason for this.
- The Headteacher and DSL will monitor logs half-termly for trends and/or safeguarding issues.
- If there are safeguarding concerns, these will be reported and recorded in accordance with our safeguarding policy and on our Child Protection Online Monitoring System (CPOMS), our safeguarding recording system.

7 Pupil Involvement

We will:

- Encourage children to participate in their own care where possible.
- Support children's understanding of personal safety and consent.

8 Parent/Carer Responsibilities

Parents/carers should:

- Provide accurate and up-to-date care information.
- Supply any required resources (e.g., nappies).
- Collaborate with the school to promote independence.

9 Monitoring and Review

- This policy will be reviewed every 3 years by the Trust.
- Intimate Care Plans are reviewed twice a year or as needs change.

10 Related Policies and Guidance

- Safeguarding and Child Protection Policy
- Supporting Pupils with Medical Conditions
- SEND Policy
- Health and Safety Policy
- Equality Act 2010
- Keeping Children Safe in Education (KCSIE)
- Working Together to Safeguard Children
- Reach South Academy Trust's Policies can be viewed [here](#).

11 Policy History

Date	Summary of change	Contact
September 2025	New Policy	Sharna Denver (Head of Safeguarding)

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 staff members who will be responsible for carrying out your child's intimate care plan, as well as the member of staff responsible in their absence	
Name of parent or carer	
Relationship to child	
Signature of parent or carer	
Date	
CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	
Signature of child	
Date	

This plan will be reviewed twice a year.

Next review date:

To be reviewed by:

Appendix 2: Template Parent/Carer Consent Form

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carers	
Address	
I give permission for the school to provide appropriate intimate care to my child (e.g. changing 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 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). 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.	☐
Parent/carers signature	
Name of parent/carers	
Relationship to child	
Date	

Appendix 3: Template of Record of Intimate Care

Record of Intimate Care Intervention

Child's Name:

DOB:

[illegible]

Appendix 4: Template Record of Agencies Involved Around the Child/Young Person

Child's Name:

DOB:

Name/Role	Contact – email/telephone
Parent/Carer	
GP	
School Nurse/Health Visitor	
Community Paediatric Nurse	
Continence Clinic/Advisor	
Physiotherapist	
Occupational Therapist	
Hospital Consultant	
Educational Psychologist	