



# Leominster Primary School

## Intimate Care Policy

**Staff Responsible:** Head Teachers – Mrs H Rees and Mrs H Lynch

Early Years Coordinator – Mrs Bristow

Safeguarding – Miss L Jones

**Policy Reviewed:** September 2025

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## **Statement of intent**

Leominster Primary School takes the health and wellbeing of its pupils very seriously. As described in the Supporting Pupils with Medical Conditions Policy, the school aims to support pupils with physical disabilities and illnesses to enable them to have a full and rich academic life whilst at school.

The governing board recognises its duties and responsibilities in relation to the Equality Act 2010, which states that any pupil with an impairment affecting their ability to carry out normal day-to-day activities must not be discriminated against.

Pupils will always be treated with care, sensitivity and respect when intimate care is given, and no pupil will be left feeling embarrassed or as if they have created a problem.

## **1. Legal framework**

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Education Act 2011
- Health Act 2009
- Equality Act 2010
- DfE (2022) 'Keeping children safe in education 2025'

This policy operates in conjunction with the following school policies:

- Health and Safety Policy
- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Child Protection and Safeguarding Policy
- Staff Code of Conduct
- Whistleblowing Policy

## **2. Definitions**

For the purpose of this policy, intimate care is defined as any care which may involve the following:

- Washing
- Touching
- Carrying out an invasive procedure
- Changing a child who has soiled themselves
- Providing oral care
- Feeding
- Assisting in toilet issues
- Providing comfort to an upset or distressed pupil

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of, the genitals.

Examples of intimate care include support with dressing and undressing (underwear), changing incontinence pads, nappies or medical bags such as colostomy bags, menstrual hygiene, helping someone use the toilet, or washing intimate parts of the body.

Pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

### **3. Health and safety**

The Health and Safety Policy lays out specific requirements for cleaning and hygiene, including how to deal with spillages, vomit and other bodily fluids.

Any member of staff that is required to assist a pupil with changing a medical bag will be trained to do so and will carry out the procedure in accordance with the Supporting Pupils with Medical Conditions Policy.

Staff will wear disposable aprons and gloves while assisting a pupil in the toilet or while changing a nappy, incontinence pad or medical bag.

Soiled nappies, incontinence pads and medical bags will be securely wrapped and disposed of appropriately.

The changing area or toilet will be left clean. Hot water and soap will be available to wash hands. Paper towels will be available to dry hands.

### **4. Staff and facilities**

Staff members who provide intimate care will be suitably trained, and will be made aware of what is considered good practice.

Suitable equipment and facilities will be provided to assist pupils who need special arrangements following assessment from a physiotherapist or occupational therapist. This may include the following:

- Adjustable bed
- Changing mat
- Non-slip step
- Cupboard
- Adapted toilet seat or commode seat
- Hoist
- Swivel mat
- Disposable gloves/aprons
- Nappies, pads and medical bags
- Tissue rolls (for changing mat/cleansing)

- Supply of hot water
- Soap
- Barrier creams
- Antiseptic cleanser for staff
- Antiseptic cleanser for the changing bed/mat
- Clinical waste bag
- Spillage kit

Mobile pupils will be changed while standing up. Pupils who are not mobile will be changed on a purpose-built changing bed or changing mat on the floor.

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 or menstruation.

## **5. Procedures for intimate care**

Staff who provide intimate care will conduct intimate care procedures in addition to the designated changing times if it is necessary; no child will be left in wet/soiled clothing or nappies.

If the designated member of staff for a child's intimate care is absent, a secondary designated member of staff will change the child, adhering to the arranged times.

Each child using nappies will have their own nappies, wipes and any other individual changing equipment necessary provided by their parent/carer.

Before changing a child's nappy, members of staff will put on disposable gloves and aprons, and the changing area will be cleaned appropriately.

The changing areas are warm and comfortable for the children and are private from others.

Hot water and liquid soap are available for staff to wash their hands before and after changing a nappy; the changing area will also be cleaned appropriately.

The changing area has a hot air dryer and/or paper towels available for members of staff to dry their hands.

Any wet or lightly soiled clothing will be placed in a tied plastic bag and returned to parents at the end of the school day. Heavily soiled clothes may be destroyed.

Any used nappies will be placed in a tied plastic bag and disposed of in the appropriate clinic waste bin.

Any bodily fluids that transfer onto the changing area will be cleaned appropriately.

If a pupil requires cream or other medicine, such as for a nappy rash, this will be provided applied in accordance with the child's Intimate Care Parental Consent Form (Appendix 3).

Older children and those who are more able will be encouraged to use the toilet facilities and will be reminded at regular intervals to go to the toilet.

Children will be reminded and encouraged to wash their hands after using the toilet, following the correct procedures for using soap and drying their hands.

## **6. School responsibilities**

Arrangements will be made with a multi-agency to discuss the personal care needs of any pupil prior to them attending the school (Appendix 2, 3 and 4).

Where possible, pupils who require intimate care will be involved in planning for their own healthcare needs wherever possible, with input from parents welcomed. See appendix 2 and 3.

In liaison with the pupil and parents, an individual intimate care plan will be created to ensure that reasonable adjustments are made for any pupil with a health condition or disability.

Regular consultations will be arranged with all parents and pupils regarding toilet facilities.

The privacy and dignity of any pupil who requires intimate care will be respected at all times.

A qualified member of staff will change the pupil, or assist them in changing themselves if they become wet, or soil themselves. Any pupil with wet or soiled clothing will be assisted in cleaning themselves and will be given spare clothing, nappies, pads, etc., as provided by the parents.

Members of staff will react to accidents in a calm and sympathetic manner. Accurate records of times, staff, and any other details of incidents of intimate care will be kept in a Record of Intimate Care Intervention (Appendix 1), and they will be stored in the pupil's classroom.

Arrangements will be made for how often the pupil should be routinely changed if the pupil is in school for a full day, and the pupil will be changed by a designated member of staff. A minimum number of changes will be agreed.

The family's cultural practices will always be taken into account for cases of intimate care. Where possible, only same-sex intimate care will be carried out.

Parents will be contacted if the pupil refuses to be changed, or becomes distressed during the process.

Excellent standards of hygiene will be maintained at all times when carrying out intimate care.

## **7. Parental responsibilities**

Parents will change their child, or assist them in going to the toilet, at the latest possible time before coming to school.

Parents will provide spare nappies, incontinence pads, medical bags, wet wipes and a change of clothing in case of accidents.

Parents will inform the school should their child have any marks or rashes.

Parents will come to an agreement with staff in determining how often their child will need to be changed, and who will do the changing.

## **8. Parental engagement**

The school will liaise closely with parents to establish individual intimate care programmes (Appendix 2 and 3) for each child which will set out the following:

- What care is required
- Number of staff needed to carry out the care
- Any additional equipment needed
- The child's preferred means of communication, e.g. visual/verbal, and the terminology to be used for parts of the body and bodily functions
- The child's level of ability, i.e. what procedures of intimate care the child can do themselves
- Any adjustments necessary in respect to cultural or religious views
- The procedure for monitoring and reviewing the intimate care plan

The information concerning the child's intimate care plan will be stored confidentially in the child's classroom, and only the parents and the designated member of staff responsible for carrying out the child's intimate care will have access to the information.

The parents of the child are required to sign the Intimate Care Parental Consent Form (Appendix 3) to provide their agreement to the plan. Any changes that may need to be made to a child's intimate care plan will be discussed with the parents to gain consent and will then be recorded in the written intimate care plan.

## **9. Safeguarding**

Staff members working directly with children will receive safeguarding training as part of their mandatory induction, in line with the Child Protection and Safeguarding Policy.

Intimate care is a regulated activity; therefore, only members of staff who have an enhanced DBS certificate with a barred list check are permitted to undertake intimate care duties.

Wherever possible, staff involved in intimate care will not be involved in the delivery of sex education to the pupils in their care as an extra safeguard to both staff and pupils involved.

Individual intimate care plans will be drawn up for pupils as appropriate to suit the circumstances of the pupil.

Each pupil's right to privacy will be respected. Careful consideration will be given to each pupil's situation to determine how many carers will need to be present when the pupil requires intimate care.

If any member of staff has concerns about physical changes to a pupil's presentation, such as marks or bruises, they will report the concerns to the Designated Safeguarding Lead or their deputies immediately.

Special consideration will be taken to ensure that bullying and teasing does not occur.

## **10. Swimming**

Pupils regularly participate in swimming lessons at Halo Leominster Leisure Centre: during these lessons, pupils are entitled to privacy when changing; however, some pupils will need to be supervised during changing.

Parental consent will be obtained before assisting any pupils in changing clothing before and after swimming lessons.

Details of any additional arrangements will be recorded in the pupil's individual intimate care plan.

## **11. Offsite visits**

Before offsite visits, including residential trips, the pupil's individual intimate plan will be amended to include procedures for intimate care whilst off the school premises.

Staff will apply all the procedures described in this policy during residential and off-site visits.

Meetings with pupils away from the school premises, where a chaperone is not present, will not be permitted.

Consent from a parent will be obtained and recorded prior to any offsite visit.

## **12. Toilet training**

Members of staff providing care will inform another member of staff prior to taking a pupil to be changed or to use the toilet.

Where potties are used, they will be emptied immediately and cleaned with an anti-bacterial spray/wipes. The potty or toilet is checked to assess whether it is clean before use and toilet paper is well stocked.

Gloves and aprons will be worn before each change and the area should be prepared to ensure it is clean and suitable for use. Gloves must be worn at all times when changing nappies, and during any instances where the member of staff could come into contact with bodily fluids.

All pupils will be accompanied to the toilet and will be appropriately supervised and supported during the toilet training stage. Staff will be sensitive and sympathetic when changing pupils and will not make negative facial expressions or negative comments. Pupils' efforts will be reinforced by praise where appropriate.

Staff are required to ensure that soiled/wet nappies are changed as soon as possible. Where pupils are left in soiled nappies and/or clothes, this will be dealt with in line with the school's Disciplinary Policy and Procedure.

Pupils will be encouraged to wash their hands with soap and warm water, with assistance provided where necessary.

If a pupil has a toileting accident, they will be offered assistance to change or be changed by a member of staff regardless of their age.

To build independence, pupils will be encouraged to replace their own clothes and flush the toilet, if they are capable of doing so.

Parents are consulted on the approach to toilet training their pupil to ensure there is consistency with the approach at home. Pupils' progress is discussed at handover with parents. If any pupil is struggling with toilet training techniques or has any issues, e.g. a rash, this will be discussed with the designated safeguarding lead or their deputies and the pupil's parents.

### **13. Monitoring and review**

This policy is reviewed every two years by the Headteachers and the Safeguarding Manager.



## Appendix 2: Toilet Management Plan

Pupil's name:	Class/year group:
Name of personal assistant:	
Date:	Review date:
<b>Area of need</b>	
<b>Equipment required</b>	
<b>Locations of suitable toilet facilities</b>	
<b>Support required</b>	<b>Frequency of support</b>

### Working towards independence

Pupil will try to	Personal assistant will	Parents will	Target achieved date

Signed \_\_\_\_\_ Parent

Signed \_\_\_\_\_ Personal assistant

Signed \_\_\_\_\_ Second member of staff

Signed \_\_\_\_\_ Pupil (where appropriate)

## Appendix 3: Intimate Care Parental Consent Form

This form is to be completed by the EYFS Co-ordinator, Class Teacher and signed by parents.

<b>Name of child</b>		<b>Date of birth</b>	
<b>Name of class teacher</b>		<b>Class</b>	
<b>Care requirements, including frequency:</b>			

The table below outlines the member of staff responsible for carrying out your child's intimate care programme, as well as the member of staff responsible in their absence:

<b>Name of staff member (s)</b>	
<b>Name of staff member (s) (in the above staff member's absence)</b>	
<b>Where will the intimate care be carried out?</b>	
<i>For example: toilet cubical, map on the floor</i>	
<b>How will the intimate care be carried out?</b>	
<i>For example: standing up, lying down</i>	
<b>What equipment/resources will be required?</b>	
<i>For example: nappies, wipes, pull ups, pants, nappy/barrier cream, potty</i>	
<b>What infection control procedures are in place?</b>	
<b>What disposal procedures are in place?</b>	

*For example: all nappies will be put in a nappy sack and disposed of in the clinical waste bin.  
 For example: lightly soiled/wet clothes will be put in a nappy bag and sent home, heavily soiled clothes will be put in a nappy sack and disposed of in clinical waste bin.*

**What actions will be taken if any concerns arise?**

*For example: reassure a distressed child, communicate with parents and speak to Designated Safeguarding Lead.*

**What do parents need to provide?**

*For example: nappies, nappy sacks, underwear, change of clothes, nappy/barrier cream*

**What are the reporting procedures for parents?**

*For example: each change will be reported in the classroom record of intimate care intervention folder and verbally communicated to parents.*

**Any other important information?**

*For example: medical conditions*

**The plan has been discussed with me and I agree to change my child at the last possible moment before he/she comes to school, provide the resources indicated above and encourage my child's participation procedures at home as appropriate and where possible:**

<b>Signature of parent</b>		<b>Date</b>	
<b>Signature of EYFS Co-ordinator</b>		<b>Date</b>	
<b>Signature of Class Teacher</b>		<b>Date</b>	

## Appendix 4: Parental Permission for Intimate Care

**Mrs Helen Lynch**

**Mrs Helen Rees**

(Headteachers)

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## Parental Permission for Intimate Care

Should it be necessary, I give permission for staff to attend to the personal care needs of

my/our child, \_\_\_\_\_.

I understand that staff will endeavour to encourage my child to be independent.

I understand that I will be informed discreetly should the occasion arise.

<b>Signature of parent</b>		<b>Date</b>	
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