



# Intimate Care Policy

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## 1. Rationale

To ensure all children exercise the right to have their personal care needs met in a way which promotes dignity, privacy and respect.

Our intimate care policy has been developed to safeguard children and staff.

## 2. Definitions

Intimate care may be defined as an activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident. Such activities can include:

- Feeding (including tube feeding)
- Oral care
- Washing
- Dressing and undressing
- Toileting
- Applying suncream
- First aid and medical assistance
- Supervision of child involved in intimate self-care
- Manual handling

## 3. Aims

- To safeguard the rights and wellbeing of children and young people with regard to dignity, privacy, choice and safety
- To ensure that children and young people are treated consistently and appropriately

## 4. Objectives

- To provide appropriate facilities and equipment for pupils' care
- To ensure all staff providing intimate care have suitable training, supervision and guidance to ensure good practice
- To ensure that consideration is given to ethnicity, culture, belief and religion relating to intimate care

## 5. Responsibilities

**All staff working with children have an enhanced Criminal Records Bureau check.**

Pupils with disabilities can be extremely vulnerable. All staff involved with their intimate care need to be sensitive to the pupil's needs and also aware that some care tasks or treatments could be open to possible misinterpretation.

If during the intimate care of a pupil the child is accidentally hurt, or misunderstands or misinterprets something, or has a very emotional reaction without apparent cause; report any such incident as soon as possible to another person working with you and a member of the management team.

If a member of staff providing intimate care observes any unusual markings, discolouration or swelling they should report it immediately to the designated member of staff for child protection.

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Staff who are concerned about any behaviours between staff and children should share their concerns with the designated member of staff for child protection. Parents are also encouraged to report any injuries or soreness.

## **6. Procedures/practice curriculum**

Personal, Social and Healthcare education is part of the school curriculum and toilets, bathrooms and bedrooms where students get changed, should be recognised as valid learning environments.

### **Dignity, Respect and Privacy**

Treat every pupil with dignity, respect and ensure privacy appropriate to the pupil's age and situation.

Please be conscious of the language used around personal care. Please use appropriate terms for body parts taking account of pupils' age.

Privacy is an important issue. When intimate care is carried out in a private area such as the disabled toilet, two staff members will be with one pupil. Parental consent is required in these situations. For general care two members of staff are present.

The disabled toilet in school is identified as appropriate for intimate care for pupils on toilet plans.

Pupils must never share a toilet cubicle. Cubicle doors should be closed whenever it is safe to do so, as should the door to the toileting area.

Staff must be aware that they are being monitored when carrying out intimate care of pupils. The physical conditions within the toilet area will make monitoring more discreet, for example, cubicle doors may be shoulder height so that adults can, if necessary, peer over the top whilst maintaining privacy for pupils. Staff should feel less vulnerable knowing that adults could enter the toilet area to observe at any time. Another alternative will be for staff to keep a record of intimate care that has been undertaken. Staff should inform a colleague before and after undertaking intimate care.

It is appropriate that female pupils are changed by female staff and that male staff do not come within close proximity of a female pupil in a state of undress, unless in exceptional circumstances. Should this happen it must be logged and brought to the attention of the headteacher.

### **Hygiene and prevention of cross infection**

All appropriate facilities, equipment, adaptations and guidelines will be provided.

All appropriate items are supplied for personal care (aprons, gloves, liners, bins, wipes as appropriate). It is responsibility of the staff member to use these in order to maintain good hygiene practices and reduce the risk of infection.

### **Involve the pupil as far as possible in their own intimate care**

Try to avoid doing things for the pupil that he/she can do alone and if a pupil is able to help, ensure that they are able to do so. If a pupil is fully dependent on you, talk with them about what you are doing and give them choices where possible.

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## **Be responsive to a pupils' reactions**

Where possible check your practice by asking the pupil, particularly if you have not previously cared for them. If a pupil expresses dislike of a certain person carrying out their intimate care, try and find out why and as far as possible respect their personal preferences.

## **Make sure practice in intimate care is as consistent as possible**

Teachers have responsibility for ensuring that staff have a consistent approach and this is achieved through regular monitoring and evaluation of the intimate care plan. It is important that approaches aren't markedly different between different staff. Where possible there will be one named member of staff who is the lead for each child.

## **Never do something unless you know how to do it**

If you are not certain how to do something, ASK. If handling or lifting is required, staff should receive the appropriate training and a risk assessment will be carried out.

## **Encourage the pupil to have a positive image of their own body**

Confident, assertive pupils who feel their body belongs to them are less vulnerable to sexual abuse. As well as basics like privacy, the approach you take to a child's intimate care can convey lots of messages to them about what their body is worth. Your attitude to the pupils' intimate care is important. Their experience of intimate care should be relaxed and stress free.

## **7. Parental Involvement**

Intimate care arrangements will be discussed with parents/carers and recorded on a child's care plan.

## **8. Review and Evaluation**

This policy will be reviewed and monitored on an-annual basis.

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<b>Monitoring and Review</b>	
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Chair of Governors signature and date	Emma Scourfield