Intimate Care Policy

Reviewed by:	Anna Yates
Date reviewed:	1st September 2026
Next review date:	1 September 2027
Version:	2

This policy is based on an original template produced by The National College. Burscough Village Primary School has reviewed, adapted and amended the content to ensure it reflects the school's own context, practice and statutory responsibilities.

1. Statement of intent

Burscough Village Primary School takes the health, safety and wellbeing of every pupil seriously. We will ensure that pupils who require intimate or personal care are supported to participate fully in school life, including the school's Caterpillars and Butterflies nursery provision.

All intimate care will be provided in a child-centred way that protects dignity, privacy, safety and wellbeing. Pupils will be treated with care, sensitivity and respect and will never be made to feel embarrassed or that they have created a problem.

The school will make reasonable adjustments for pupils with disabilities and medical conditions, avoid discrimination and work collaboratively with parents, carers, health professionals and the pupil, where appropriate.

2. Legal framework and related policies

This policy has due regard to relevant legislation and statutory guidance, including:

- Children and Families Act 2014
- Education Act 2011
- Health Act 2006
- Equality Act 2010
- DfE, Keeping Children Safe in Education 2026
- DfE, Statutory framework for the Early Years Foundation Stage 2026
- DfE guidance on supporting pupils at school with medical conditions
- UK GDPR and the Data Protection Act 2018

This policy should be read alongside:

- Child Protection and Safeguarding Policy
- Staff Code of Conduct / Staff Behaviour Policy
- Online Safety Policy
- Mobile Phone and Personal Device Policy
- ICT Acceptable Use Policy
- Supporting Pupils with Medical Conditions Policy
- Administering Medication Policy
- First Aid Policy
- Health and Safety Policy
- Data Protection Policy and Privacy Notices
- Whistleblowing Policy
- SEND Policy
- Complaints Policy

3. Definitions

Intimate care means care associated with bodily functions, body products and personal hygiene that involves direct or indirect contact with, or exposure of, intimate areas. It may include:

- support with toileting, cleaning after an accident, nappy or incontinence-pad changing
- support with dressing or undressing underwear
- menstrual care
- washing intimate parts of the body
- changing medical equipment or bags, where staff are trained and authorised
- other personal care identified in an individual care plan

Comforting a distressed child, ordinary first aid and support with feeding or oral care may involve close personal contact, but will be managed under the relevant school procedures and with regard to the same principles of dignity and safeguarding.

4. Guiding principles

- The child's best interests are the primary consideration.
- Care will be necessary, proportionate and as least intrusive as possible.
- The pupil will be encouraged to do as much for themselves as they can.
- Staff will explain what they are doing in language the pupil understands and will seek the pupil's cooperation and assent.
- A pupil's communication needs, SEND, medical needs, culture and family circumstances will be considered without stereotyping.
- A pupil will never be forced to accept care. If they refuse or become distressed, staff will pause, make the situation safe, seek advice and contact parents where appropriate. Any safeguarding concern will be reported to the DSL immediately.

5. Planning and consent

Before regular intimate care begins, the school will agree an Individual Intimate Care Plan with parents or carers and, where appropriate, the pupil and relevant professionals. The plan will identify:

- the pupil's needs, preferences, communication and level of independence
- the agreed care, frequency, location and equipment
- named or suitably trained staff and contingency arrangements
- privacy arrangements and the number of staff required
- moving and handling, medical or infection-control requirements
- how care will be recorded and how concerns will be escalated
- arrangements for off-site visits, swimming, transitions and review

Parental consent will normally be obtained for planned and ongoing intimate care. Where an unplanned accident occurs, staff will act in the child's best interests, offer appropriate support

and record the intervention. Parents or carers will be informed in line with the pupil's plan and the nature of the incident on the EY App.

6. Staffing and safer working practice

- Only staff who are suitable, appropriately checked, trained, authorised and confident in the agreed procedure will provide intimate care.
- Personal care falling within regulated activity will only be undertaken in accordance with current safer recruitment and barred-list requirements.
- Staff will follow the Staff Code of Conduct and maintain professional boundaries at all times.
- The number of adults present will be based on the pupil's needs, risk assessment and care plan. A routine requirement for two adults will not be imposed if it unnecessarily compromises dignity, but another member of staff must know that care is taking place and assistance must be available.
- Where possible, consistent staff will provide regular care, while contingency arrangements will prevent unsafe delay if a named adult is absent.
- Staff must not make negative comments, facial expressions or jokes about a pupil's care needs.

7. Facilities, privacy and dignity

The school will provide suitable, clean and accessible facilities. There is a changing facility next to the school hall that includes a disabled toilet with a washbasin and changing area, with additional changing areas in Nursery and Reception.

- Doors/curtains will be closed and appropriate privacy maintained during care, while safeguarding arrangements remain effective.
- A privacy curtain or screen will be provided in the nursery changing area where required. Its position and use will be risk assessed so that the child's dignity is protected without creating an unsafe or unobservable arrangement.
- Only essential staff will be present. Other pupils and adults will not be able to view the care being provided.
- Mobile pupils will normally be supported to change while standing. Non-mobile pupils will use suitable purpose-designed equipment following assessment.
- Supplies and equipment will be stored safely and be readily available without leaving a child unattended.

8. Mobile phones, cameras, smart devices and recording

- Personal mobile phones, cameras, smart watches and other devices capable of taking images, recording audio or accessing online services must not be used during intimate care.

- In EYFS areas, personal devices will be switched off or silenced and stored securely in the school's designated lockable storage, away from and inaccessible to children, in line with the school's Mobile Phone and Personal Device Policy.
- No image, video or audio recording of a pupil receiving intimate care will be made on a personal or school device.
- If staff become aware of any recording, image-related or technology-facilitated safeguarding concern, including suspected AI-generated or digitally manipulated content, they must preserve relevant information, avoid forwarding it, and report immediately to the DSL in accordance with the Child Protection and Safeguarding Policy.

9. Health, hygiene, medical conditions and allergies

- Staff will follow infection-control procedures and use disposable gloves and aprons where contact with bodily fluids is possible.
- Changing areas and equipment will be cleaned after use. Hot water, liquid soap and suitable hand-drying facilities will be available.
- Soiled items and clinical waste will be securely bagged and disposed of in the designated lidded bin in accordance with the Health and Safety Policy and local waste arrangements.
- Staff supporting a medical procedure or medical device will be trained and will follow the pupil's Individual Healthcare Plan and the Supporting Pupils with Medical Conditions Policy.
- Relevant medical and allergy information will be current, accessible to staff who need it and handled confidentially. Medication will be stored in the located medication cabinet, and new staff will be told who is authorised to receive and manage it.

10. Safeguarding and reporting concerns

Staff will maintain an attitude that "it could happen here". Intimate care must never reduce professional curiosity or delay safeguarding action.

- Any unexplained mark, injury, soreness, disclosure, change in behaviour, unusual reaction to care or other concern must be reported to the DSL immediately and recorded through the school's safeguarding system.
- Staff must not promise confidentiality, investigate, ask leading questions or photograph marks.
- A concern about the conduct of an adult, including a low-level concern, must be reported under the school's allegations and low-level concerns procedures.
- If a pupil makes a disclosure during care, staff will listen, reassure the pupil that they were right to speak, record the pupil's words accurately and report immediately to the DSL.
- Bullying, teasing, prejudice-based behaviour or sharing of information about another pupil's care needs will be addressed promptly under the Behaviour and Anti-Bullying policies.

11. Recording, confidentiality and information sharing

Every intimate care intervention will be recorded promptly using EY APP. Records will be factual, proportionate and include the date, time, care provided, staff involved, any refusal or distress, observations or concerns, action taken and parent communication where relevant.

Records will not be left in classrooms or publicly accessible areas. They will be stored securely approved school system, with access limited to those who need the information. Safeguarding information will be shared lawfully and promptly when necessary to protect a child.

12. Parents' and carers' responsibilities

- Share relevant medical, toileting, allergy, communication and care information with the school.
- Provide agreed spare clothing and care products, clearly named where appropriate.
- Inform the school of marks, rashes, changes in health or circumstances that may affect care.
- Work with staff to agree and review the Individual Intimate Care Plan and support consistency between home and school.

13. Toilet training and promoting independence

- Parents or carers will be consulted so that approaches are consistent and appropriate.
- Staff will prepare the area before care, use suitable PPE, supervise safely and respond calmly and positively.
- Wet or soiled nappies and clothing will be changed as soon as reasonably possible.
- Pupils will be supported to wash and dry their hands and encouraged to manage clothing, use the toilet and flush independently when able.
- Progress, difficulties, rashes or other concerns will be discussed sensitively with parents and, where necessary, the DSL, SENDCo or health professionals.

14. Swimming and off-site visits

- Pupils are entitled to privacy when changing for swimming. Any additional supervision or support will be agreed with parents and recorded in the care plan.
- Before an off-site visit or residential, the care plan and risk assessment will be reviewed to identify suitable facilities, staffing, equipment, transport, waste disposal and emergency arrangements.
- The same safeguarding, device, recording, privacy, hygiene and record-keeping requirements apply off site.

15. Training and induction

Staff who may provide intimate care will receive role-appropriate induction and refresher training covering the pupil's plan, safeguarding, safer working practice, dignity and communication, infection control, moving and handling where relevant, medical procedures

where relevant, device restrictions, record keeping and reporting concerns. New EYFS staff will be shown the secure device-storage arrangements and medication handover procedures before working independently.

16. Monitoring and review

The Headteacher and Early Years Leader will review this policy at least annually and sooner following a change in statutory guidance, provision, facilities, an incident, a complaint or identified learning. The governing body will approve material changes. Individual care plans will be reviewed at agreed intervals and whenever a pupil's needs or circumstances change.

Appendix 1: Record of Intimate Care Intervention

Pupil's name		**Class / year group**	
Date		**Time**	
Location		**Care plan in place?**	Yes / No
Parent informed?	Yes / No / Not required	**Safeguarding concern?**	Yes / No

Care provided / support offered	
Pupil's response, including assent, refusal or distress	
Observations, marks, comments or concerns	
Action taken / DSL informed	
Parent or carer communication	
Staff member name and signature	
Second staff member / person informed, if applicable	
Date and time record completed	

Appendix 2: Individual Intimate Care Plan

Pupil's name and date of birth	
Class / provision	
Parent / carer contacts	
Relevant medical, SEND, allergy or communication information	
Care required and frequency	
Pupil's preferences and how assent will be sought	
How independence will be promoted	
Named / authorised staff and contingency arrangements	
Location, equipment and privacy arrangements	
Moving and handling / PPE / disposal requirements	
Recording and parent communication arrangements	
Off-site / swimming arrangements	
Plan date and review date	
Signatures: parent/carer, school, pupil where appropriate	

Appendix 3: EYFS Intimate Care Environment Check

Check	Complete	Action required	Lead / date
Caterpillars and Butterflies changing areas are clean, suitable and ready for use.	☐		
A privacy curtain or screen is installed where required and its safe use has been risk assessed.	☐		
Personal phones and smart devices have designated lockable storage inaccessible to children.	☐		
Staff understand that no image, video or audio recording is permitted during intimate care.	☐		
PPE, cleaning materials, spare clothing and lidded waste bins are available.	☐		
Medical and allergy information is current and displayed or accessed confidentially as agreed.	☐		
Medication is correctly stored and staff know the authorised handover procedure.	☐		
New staff have received intimate care, safeguarding and device-storage induction.	☐		

Care records are stored securely, not openly in classrooms.	☐		
Individual plans and risk assessments are current and accessible to relevant staff.	☐		