



Intimate Care Policy

Reviewed on	Sept 25	Review frequency	annually
Next review due	Sept 26	Template Yes / No	yes
Owner	Claire Harvey	Approved by	Executive



1. History of Policy Changes

Date	Page	Change	Origin of Change

2. Contents

1.	History of Policy Changes.....	2
2.	Contents.....	2
3.	Introduction	3
4.	Scope (delete if not relevant to template policy)	3
5.	Definitions (delete as appropriate).....	Error! Bookmark not defined.
6.	Aims.....	4
7.	Legislation and Statutory guidance.....	4
8.	Role of Parents/Carers	5
9.	Role of Staff.....	5
10.	How staff will be trained	5
11.	Sharing information	6
12.	Creating an Intimate Care Plan	6
13.	Intimate Care Procedures	6
14.	Concerns about safeguarding	7
15.	Physiotherapy	7
16.	Monitoring & Review	7
17.	Further information	Error! Bookmark not defined.
18.	Link to other HET policies (in alphabetical order).....	7
19.	Appendices.....	8



3. Introduction

“Hamwic Education Trust (HET) believe that all pupils should receive a high quality, enriching, learning experience in a safe and inclusive environment, which promotes excellence through a broad curriculum that prepares them for their future and opens doors to a diverse array of opportunities as well as that all pupils and adults within HET flourish as individuals and together.” This policy sets out 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
 - Children 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 child involved
- Intimate care refers to any care that involves toileting, washing or changing a child.

4. Scope (delete if not relevant to template policy)

“This policy is for all employees working within a HET school or establishment (which for ease of reference are referred to throughout this document as ‘schools’) or the HET Managed Service (MS) Team.

It does not apply to agency workers, consultants, self-employed contractors, volunteers or work experience students.”

5. Aims

At times there may be some children across the school who require assistance with intimate care tasks, especially toileting. Other children may also experience difficulties with toileting for a variety of reasons. All the children/young people we work with have the right to be safe, to be treated with courtesy, dignity, and respect. Intimate care can be defined as any care which involves washing, touching 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. Examples include care associated with continence as well as more ordinary tasks such as help with washing, toileting or dressing.

The purpose of this policy is to set out a clear framework within which all children and young people within the school receive the intimate and personal care they require in order to participate fully in life at school. The school is committed to ensuring that all staff responsible for the intimate care of pupils will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust.

The child’s welfare is of paramount importance and their experience of intimate and personal care should be a positive one. It is essential that every child is treated as an individual and that care is given gently and sensitively; no child should be attended to in a way that causes distress or pain.

6. Legislation and Statutory guidance

The Governors of Townhill Infant will act in accordance with Section 175 of the Education Act 2002 and Keeping Children Safe in Education (September 2025) to safeguard and promote the welfare of pupils at this school. This school takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a child’s intimate care needs is one aspect of safeguarding.

The Governing Body recognises its duties and responsibilities in relation to the following legislation;

- Equality Act (2010)
- The Children Act (1989)
- The Childcare Act (2006)
- UN Convention on the Rights of the Child (1989)
- Health and Safety at Work etc. Act (1974)

September 2025 [EYFS statutory framework for group and school-based providers](#) states under “Toilets and intimate hygiene” section 3.86 that providers must ensure:

- There is an adequate number of toilets and hand basins available - there should usually be separate toilet facilities for adults.
- There are suitable hygienic changing facilities for changing any children who are in nappies.
- Children’s privacy is considered and balanced with safeguarding and support needs when changing nappies and toileting.
- There is an adequate supply of clean bedding, towels, spare clothes, and any other necessary items.



7. Role of Parents/Carers

For children entering Townhill Infant and Nursery, their intimate care needs—including toileting support—will be discussed during the school registration process. These discussions will be guided by each child’s age, stage of development, and individual requirements.

The school is committed to supporting children as they progress toward independence in managing their own personal care. Staff will work in partnership with parents and carers to ensure that appropriate strategies and routines are in place to encourage self-care skills in a safe, respectful, and developmentally appropriate manner.

For children starting in Reception, we understand that toilet training can vary based on individual circumstances. If a child is not toilet trained due to a medical condition, we kindly ask parents/carers to provide medical evidence. This helps us to understand the child’s needs and ensure we can offer the most appropriate support.

If there is no identified medical need, or if a child experiences repeated toileting accidents at school, we will work closely with parents/carers to support the child in becoming dry. This may include signposting to external support services, such as the Health Visiting Team, and implementing agreed strategies both at home and in school.

For children who need occasional intimate care (e.g. toileting accidents), school staff will inform parents/carers at the earliest opportunity and will provide appropriate support to maintain dignity and comfort for the child. For children who need routine intimate care, whose needs are more complex or need particular support, an intimate care plan will be created in discussion with parents.

Where children with complex and/or long-term health conditions have a health care plan in place, the plan should, where relevant, take into account the principles and best practice guidance in this intimate care policy. Where procedures require specialist training, staff undertaking intimate medical care will be given this.

If a pupil without an intimate care plan (or another support plan) has an “accident” whilst at school (e.g. wetting or soiling themselves) and they need help with intimate care, the parents/carers will be contacted and the support needed discussed. Parents of children without intimate care plans record their consent to help children change on BromCom. If consent is not on BromCom parents should be contacted before support is given to the child. (Consent is recorded under annual permissions on the child’s profile page).

8. Role of Staff

A post holder who is expected to carry out intimate care will normally have this set out in their job description. Where this doesn’t feature in a job description, it can be agreed upon through negotiation. Only paid employees can carry out intimate care, the exception to this being where the parent supports school staff with intimate care. Ordinarily, employees that carry out intimate care must 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.

9. How staff will be trained

Staff will receive:

- Training in the specific types of intimate care they undertake (induction and training)
- Regular safeguarding training
- If necessary, manual handling training that enables them to remain safe and for the child 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.

10. 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.

If there is a safeguarding concern that arises as a result of intimate care, the school's safeguarding policy and procedures will be followed.

11. 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. If needed, we will agree appropriate terminology for private parts of the body and functions and note this in the plan. The religious views, beliefs and cultural values of children and their families will be taken into account.

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.

The plan will be reviewed as necessary whenever there are changes to a child's needs, but at least annually. In some cases, the support for their intimate care needs will be written into their Education, Health and Care (EHC) plan or their SEN support plan (or equivalent document) rather than an intimate care plan or individual healthcare plan.

12. Intimate Care Procedures

Nappy changes should not be routine for pupils who are in the setting for 3 hours or less and should be based on the needs and comfort of the child.

School staff will inform another member of staff when they are going to assist a pupil with intimate care. Staff should follow intimate care plans, and two members of staff should always be present when carrying out intimate care. In exceptional circumstances, it may not be possible for two people to be present, and we will inform parents if this has been the case.

Intimate care procedures for children in nursery / preschool will be carried out in Nursery / preschool changing area / the disabled toilet or if inaccessible another toilet with a closed door. For children in Reception and above it will be carried out in the toilet. If on a trip or visit, care will be carried out in a toilet or an appropriate space. When carrying out procedures, the school will provide staff with protective disposable gloves, disposable apron, cleaning supplies, changing mats and correct bins for disposal. Staff should be fully aware of best practice regarding infection control. The school has 3 nappy bins that are collected weekly for waste to be correctly disposed of.

Staff will always explain or seek the permission of the child before starting an intimate care procedure, according to the child's age and level of understanding. Children will be supported to do as much as they can for their own intimate care needs, taking into account their age and ability.



For children needing routine intimate care, the school expects parents to provide nappies, wipes, cream and nappy bags. Any soiled clothing will be contained securely, clearly labelled, and discreetly returned to parents at the end of the day.

Accurate records will also be kept when a child receives intimate care. These will be brief but will include date, time and any comments, such as changes in the child's behaviour. It will be clear who was present in every case.

Not all equipment above will necessarily be used on every occasion but will rather be in line with the agreed care plan. Parents/carers, for example, may provide their own choice of cleaning products for staff to use.

Where a child is in nappies, parents/carers will be responsible for ensuring the school has a supply of nappies, wipes and nappy bags. Parents of children who regularly soil themselves will be required to provide a change of clothes. For children needing routine intimate care, the school expects parents/carers to provide, when necessary, a good stock (at least a week's worth in advance – daily in nursery) of necessary resources, such as nappies, underwear and/or a spare set of clothing.

13. 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 school's 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 the DSL / Headteacher / SLT.

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 procedures.

If a member of staff has concerns about an adult carrying out intimate care, these should be escalated to the headteacher / DSL (or equivalent) as soon as they arise

14. Physiotherapy

School staff may be asked to undertake a physiotherapy regime (such as assisting children with exercises). School staff must only do this once the technique has been demonstrated by a physiotherapist and written guidance has been provided. The physiotherapist will observe the member of staff undertaking the exercises. These will be recorded in the pupil's support plan and reviewed regularly. Any concerns about the regime or any failure in equipment will be reported to the physiotherapist. School staff will not devise and carry out their own exercises or physiotherapy programs.

15. Monitoring & Review

This policy will be reviewed by the DSL and Headteacher annually. At every review the policy will be ratified by the governors.

16. Link to other HET policies (in alphabetical order)

This policy links with the following policies and procedures:

- Behaviour management
- Health and Safety
- Managing Concerns and allegations against employees



- Managing Medical conditions in school
- Moving and handling
- Physical intervention
- Safeguarding & child protection
- Staff code of conduct and guidance on safer working practice / staff handbook
- Statement of procedures for dealing with allegations of abuse against staff

17. Appendices

Insert school logo	Intimate Care Plan	
Child name and year group		
Type of intimate care needed How often will care be needed Details of assistance needed Where care will take place		
What training staff will be given		
Additional information about this plan		
What resources and equipment will be used, and who will provide them		
Staff who are able to carry out care needed. Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan		
How procedures will differ if taking place on a trip or outing		
Liaison with parents/methods of communication		
Working towards independence	School will	
	Parent/carer will	
	Child will	
Staff signature and date		
Parent signature and date		