# INTIMATE CARE POLICY

**Updated: September 2026**
**Signed: SJ**
**Review Date: September 2027**

**Introduction**

This intimate care policy should be read in conjunction with the school's policies as below:

- safeguarding policy and child protection procedures
- staff code of conduct and guidance on safer working practice
- 'whistle-blowing' policy
- health and safety policy and procedures
- Special Educational Needs policy

The Governing Body is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust.

We recognise that there is a need to treat all children, whatever their age, gender, disability, religion, ethnicity or sexual orientation with respect and dignity when intimate care is given. The child's welfare is of paramount importance and his/her 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.

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning up a child after they have soiled themselves), to intimate personal areas.

Staff will work in close partnership with parents/carers and other professionals to share appropriate information and provide continuity of care. Where children with complex and/or long term health conditions have an individual healthcare plan in place, the plan should, where relevant, take into account the principles and best practice guidance in this intimate care policy. Members of staff must be given the choice as to whether they are prepared to provide intimate care to children.

All staff undertaking intimate care must be given appropriate training. This Intimate Care Policy has been developed to safeguard children and staff. It applies to everyone involved in the intimate care of children.

In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure.

The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.

London Colney Primary School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. London Colney Primary School recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

**Our approach to best practice**

The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist/ occupational therapist as required.

Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.

The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present.

Apart for specific SEN cases, wherever possible the same child will not be cared for by the same adult on a regular basis; ideally there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, whilst at the same time guarding against the care being carried out by a succession of completely different carers.

In a predominantly female staff at London Colney Primary School, it will be common practice for staff to provide care intimately for an individual of the same sex. It is common practice for female staff to support boys, as no male staff are available.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan, if appropriate. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

**The Protection of Children**

Child Protection and safeguarding procedures will be adhered to. All children will be taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/ designated person for child protection. If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed (see Inter - Agency Child Protection Procedures for details)

**Health and Safety**

Health and Safety advice for schools can be found in the Health and Safety Handbook, available to schools through the Education, Arts and Libraries (EAL) website.

Staff should always wear gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste. The bin should be emptied on a weekly basis and it can be collected as part of the usual refuse collection service as this waste is not classed as clinical waste. Staff should be aware of the school's Health and Safety policy.

**Special Needs**

Children who require regular assistance with intimate care have written Individual Education Plans (IEP), healthcare plans or intimate care plans agreed by staff, parents/carers and any other professionals actively involved, such as school nurses or physiotherapists. Ideally the plan should be agreed at a meeting at which all key staff, parents/carers and the child should also be present wherever possible/appropriate. Any historical concerns (such as past abuse) should be taken into account. The plan should be reviewed as necessary, but at least annually, and at any time of change of circumstances,
e.g. for residential trips or staff changes (where the staff member concerned is providing intimate care). They should also take into account procedures for educational visits/day trips.

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered with regard to individual teaching and care plans for each child. As with all arrangements for intimate care needs, agreements between the child those with parental responsibility and the organisation should be easily understood and recorded. Regardless of age and ability, the views and/or emotional responses of children with special needs should be actively sought (with advocacy arrangements made for those who can't) in regular reviews of these arrangements.

**Children wearing nappies**

If there are children wearing nappies it is good practice to provide information for parents of this policy and practice in the school. The information includes a simple agreement form for parents to sign- outlining who will be responsible, within the school, for changing the child and when and where this will be carried out. This agreement allows the school and the parent to be aware of all the issues surrounding this task right from the outset. A note book would used on a daily basis to record who changes a child, how often this task is carried out and the time they left/returned to the classroom following this task. Examples of such good practice provide reassurance for parents that systems are in place and that school have implemented procedures for staff to follow. The dignity and privacy of the child is of paramount concern. The use of an easy access toilet is acceptable, providing that the child can access the facilities easily and without discomfort. The supporting adult should be able to care for the child without excess lifting. A screened area is also acceptable providing there are changing mats and bins. The parent of the child should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Schools are responsible for providing gloves, a bin and liners to dispose of any waste.

**Physical Contact**

There are occasions when it is entirely appropriate for staff to have physical contact with children, however, it is crucial that this is appropriate to staffs professional role and in relation to the child's individual needs. It is not possible to be specific about the appropriateness of each physical contact, since an action that is appropriate with one child, in one set of circumstances, may be inappropriate in another, or with a different child.

Any physical contact should be in response to the child's needs at the time, of limited duration and appropriate to their age, stage of development gender, ethnicity and background. Adults should therefore, use their professional judgement at all times.

Physical contact should never be secretive, or for the gratification of the adult, or represent a misuse of authority. If a member of staff believes that an action by them or a colleague could be misinterpreted, or if an action is observed which is possibly abusive the incident and circumstances should be immediately reported to the manager and recorded. Where appropriate, the manager should consult with the Local Authority Designated Officer (the LADO).

A general culture of ‘safe touch' should be adopted, where appropriate, to the individual requirements of each child. Physical contact should take place only when it is necessary in relation to a particular activity. It should take place in a safe and open environment i.e. one easily observed by others and last for the minimum time necessary. Contact should be relevant to their age / understanding and adults should remain sensitive to any discomfort expressed verbally or non-verbally by the child.

Appropriate physical contact could be children in Key Stage 1, if distressed, may need to be comforted on a staff members lap in an open environment or picked up. If a child does have to be touched, ‘safe touch’ can include pats on the back, and an arm around the shoulder, hand held. Safe touches can also include touches that might hurt, such as applying first aid but this is to keep healthy.

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact.

Staff should be aware that even well intentioned physical contact might be misconstrued directly by the child, an observer or by anyone the action is described to. Staff must therefore always be prepared to justify actions and accept that all physical contact be open to scrutiny.

Physical contact which is repeated with an individual child or young person is likely to raise questions unless the justification for this is formally agreed by the child, the organisation and those with parental responsibility.

Children with special needs may require more physical contact to assist their everyday learning. The general culture of ‘limited touch’ will be adapted where appropriate to the individual requirements of each child. The arrangements must be understood and agreed by all concerned, justified in terms of the child’s needs, consistently applied and open to scrutiny. Wherever possible, consultation with colleagues should take place where any deviation from the arrangements is anticipated. Any deviation and the justification for it should be documented and reported.

Extra caution may be required where a child has suffered previous abuse or neglect. In the child’s view, physical contact might be associated with such experiences and lead to staff vulnerable to allegations of abuse. Additionally, many such children are extremely needy and seek out inappropriate physical contact. In such circumstances staff should deter the child without causing them a negative experience. Ensuring that a witness is present will help to protect staff from such allegations.

**Restraint**

There may be occasions where it is necessary for staff to restrain children physically to prevent them from inflicting damage on either themselves, others or property.

In such cases only the minimum force necessary should be used for the minimum length of time required for the child to regain self- control.

In all cases of restraint the incident must be documented and reported. Staff must be fully aware of the school’s Physical Intervention/Positive Handling Policy, which

should comply with LEA policy.

Under no circumstances would it be permissible to use physical force as a form of punishment, to modify behaviour, or to make a child comply with an instruction. Physical force of this nature can, and is likely to, constitute a criminal offence.

**Children in distress**

There may be occasions when a distressed child needs comfort and reassurance that may include physical touch such as a caring parent would give. Staff must remain self-aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation.

Judgement will need to take account of the circumstances of a child's distress, their age, the extent and cause of the distress. Unless the child needs an immediate response, staff should consider whether they are the most appropriate person to respond. It may be more suitable to involve the child's relative or school's counsellor.

Particular care must be taken in instances which involve the same child over a period of time.

Where a member of staff has a particular concern about the need to provide this type of care and reassurance they should seek further advice, from their line manager or other appropriate person.

**First Aid and intimate care**

Staff who administer first aid should ensure, wherever possible, that another adult or other children are present, however this may not always be possible. Where this is the case, staff should apply first aid in an open environment. Staff should protect the child's dignity, must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Regular requirements of an intimate nature should be planned for. Agreements between the school/organisation, those with parental responsibility and the child concerned should be documented and easily understood. The necessity for such requirements should be reviewed regularly. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed.

**Physical Education and other skills coaching**

Some staff are likely to come into physical contact with children from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment.

Staff should be aware of the limits within which such contact should properly take place and of the possibility of misinterpretation.

Where it is anticipated that a child might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable child in the demonstration.

**Showers/changing clothes**

Young people are entitled to respect and privacy when changing clothes or taking a shower. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying or teasing does not occur. This means that adults should announce their intention of entering changing rooms, avoid remaining in changing rooms unless child needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore staff need to be vigilant about their own conduct, e.g. adults must not change in the same place as children or shower with children.

**Out of school trips, clubs etc.**

Employees should take particular care when supervising children in the less formal atmosphere of a residential setting or after-school activity. Although more informal relationships in such circumstances tend to be usual, the standard of behaviour expected of staff will be no different from the behaviour expected within school. Staff involved in such activities should also be familiar with their school's policy and all LEA Guidance regarding out of school activities.

To ensure children' safety, increased vigilance may be required when monitoring their behaviour on field trips, holidays etc. It is important to exercise caution so that a child is not compromised and the member of staff does not attract allegations of overly intrusive or abusive behaviour.

Meetings with children away from the school premises where a chaperone will not be present, are not permitted unless specific approval is obtained from the head teacher or other senior colleague with delegated authority. Staff should not place themselves in a position where they are in a vehicle, house or other venue alone with a child. Staff member self-declare business interests annually.

If staff come into contact with children whilst off duty, they must behave as though in their professional role and not give conflicting messages regarding their own conduct.

**Photography, videos and similar creative arts**

Staff should be aware of the potential for such mediums of teaching to be used for the wrong purposes. Additionally, children who have been previously abused in this way may feel threatened by the legitimate use of photography, filming etc. The potential for founded and unfounded allegations of abuse requires that careful consideration be given to the organisation of these activities.

London Colney Primary School has clear policies and protocols for the taking and using of images and of photographic equipment. These should require the justification and purpose of the activity; its content; avoidance of one to one sessions; appropriate privacy when the changing of clothes is required; and, arrangements for access to the material and its storage.

Consent to participating in these activities should be sought from the child and those with parental responsibility at the beginning of courses, but staff should remain sensitive to those children who appear particularly uncomfortable with the activity.

All material produced should be viewed for acceptability by another member of staff. Its circulation should be in accordance with the LEA's/schools 'Use of Images' policy, and relevant arrangements with parents