

Intimate Care Policy

Date: February 2026

Review Date: February 2028



Larkspur
Community Primary School

Introduction

Staff who work with young children or children/young people* who have special needs will realise that the issue of intimate care is a difficult one and will require staff to be respectful of children's needs.

Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing.

Intimate care may be defined as any 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:

- toileting;
- feeding;
- oral care;
- washing;
- changing clothes;
- first aid and medical assistance; and
- supervision of a child involved in intimate self-care.

Parents have a responsibility to advise the school of any known intimate care needs relating to their child.

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are based. Every child has the right to:-

- be safe;
- personal privacy;
- be valued as an individual;
- be treated with dignity and respect;
- be involved and consulted in their own intimate care to the best of their abilities;
- express their views on their own intimate care and to have such views taken into account; and
- have levels of intimate care that are appropriate and consistent.

School Responsibilities

It is preferable that children are toilet trained before they start at Larkspur Primary School. However, no child will be excluded from participating in school who may, for any reason, not yet be toilet trained and who may still be wearing nappies or equivalent.

To facilitate this:

Work will be carried out with parents towards toilet training, unless there are medical or other developmental reasons why this may not be appropriate at the time.

Toilet training is seen as a self-care skill that children have the opportunity to learn with the full support and non-judgmental concern of adults.

All members of staff working with children are checked and vetted to ensure they are safe to do so. Only those members of staff who are familiar with the intimate care policy and all school safeguarding documentation are involved in the intimate care of children.

Anticipated intimate care arrangements which are required on a regular basis are agreed between the school and parents and, when appropriate and possible, by the child.

In such cases, consent forms are signed and stored in the child's file.

Intimate care arrangements for any pupil who requires this support on a regular basis will be reviewed termly.

Only in an emergency would staff undertake any aspect of intimate care that has not been agreed by the parents. This act of intimate care would be reported to a member of staff and parents at the earliest possible time following the event.

If a staff member has concerns about a colleague's intimate care practice he or she must report this to a Designated Safeguarding Person – Mrs Anglesea, Mr Gray, Miss Conway

Guidelines for Good Practice

All children have the right to be safe and to be treated with dignity and respect.

These guidelines are designed to safeguard children and staff. They apply to every member of staff involved with the intimate care of children.

Young children and children with special educational needs can be especially vulnerable. Staff involved with their intimate care need to be particularly sensitive to their individual needs.

Members of staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation.

1. Involve the child in the intimate care

Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices.

Check your practice by asking the child or parent about any preferences while carrying out the intimate care.

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

Care should not be carried out by a member of staff working alone with a child, they should be within sight or hearing of other staff.

3. Make sure practice in intimate care is consistent.

As a child may have multiple carers a consistent approach to care is essential.

Effective communication between all parties ensures that practice is consistent.

4. Be aware of your own limitations

Only carry out activities you understand and feel competent with. If in doubt, ask. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

5. Promote positive self-esteem and body image.

Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

6. If you have any concerns you must report them.

If you observe any unusual markings, discolouration or swelling report it immediately to the Designated Teacher for Child Protection.

If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the designated teacher. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's personal file.

Working with Children of the Opposite Sex

There is positive value in both male and female staff being involved with children.

The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions:

- when intimate care is being carried out, all children have the right to dignity and privacy, i.e. they should be appropriately covered and wherever possible changed in a private location away from peers.
- if the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance;
 - report any concerns to the Designated Safeguarding Person and make a written record;
 - parents must be informed about any concerns.

Communication with Children

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children

may communicate using different methods – words, signs, symbols, body movements, eye pointing, etc. To ensure effective communication:

- make eye contact at the child's level;
- use simple language and repeat if necessary;
- wait for response;
- continue to explain to the child what is happening even if there is no response;
- treat the child as an individual with dignity and respect.

Procedures for changing a child wearing a nappy:

□ One member of staff (Key Worker when possible) will change the child within sight and/or hearing of another member of staff.

- The child will be changed on the changing table or in the toilet area.
- Staff will use the changing table, aprons, gloves, nappy sacks and baby wipes.
- Nappies will be disposed of in the hygienic nappy disposal bin.
- The nappy change will be recorded and signed by staff involved.

Procedures for changing a child who has wet/ soiled themselves:

- One member of staff will change the child (Key Worker when possible) child within sight and/or hearing of another member of staff.
- The child will be changed in the toilet area or on the changing table.
- Staff will wear gloves.
- Soiled/ wet clothes will be placed inside a bag with the bag handles tied.
- The change will be recorded on the record sheet in the changing room/ toilets and signed by staff involved.

Procedures for prevention of infection:

- Staff will wear disposable gloves, aprons whilst changing.
- These items will be disposed of in the hygienic nappy disposal bin.
- The changing mat and area will be cleaned after use with antibacterial wipes.
- Hot water and hand wash is available to wash hands immediately after a child has been changed.
- Paper towels are available for drying hands.
- Antibacterial hand gel is available in the changing area.

WHOLE SCHOOL

Procedures for when a child has soiled themselves (e.g. due to a particular medical condition/ to severe cases of diarrhoea) and is unable to clean themselves independently:

- Staff to contact parent/ carer immediately to request permission to assist the child to clean themselves.

- If staff are unable to contact the parent/ carer, then two members of staff will support the child to clean themselves and make them as comfortable as possible (according to the above guidelines in this policy).
- Parents of new pupils to the school are required to sign a consent form, giving staff permission to assist their child in the event of the above situation.