



ST MARY'S
CATHOLIC PRIMARY
SCHOOL

Intimate Care Policy

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Post Holder Responsible for Review:	EYFS Lead

Commitment to Equality:

We are committed to providing a positive working environment which is free from prejudice and unlawful discrimination and any form of harassment, bullying or victimisation. We have developed a number of key policies to ensure that the principles of Catholic Social Teaching in relation to human dignity and dignity in work become embedded into every aspect of school life and these policies are reviewed regularly in this regard.

This Intimate Care Policy has been approved and adopted by St Mary's Catholic Primary School on 21.5.2026 and will be reviewed in May 2027.

Signed by the Chair of the Local Governing Body for St Mary's Catholic Primary School:

Mr A. Guinan

Signed by the Principal for St Mary's Catholic Primary School:

Mrs I. Borriello

I. Borriello

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Statement of Intent

At St Mary's School, we are committed to ensuring that every child is treated with dignity, compassion, and respect. Guided by our mission to "Learn from Jesus, Love like Jesus and Trust in Jesus," we recognise the inherent worth of every individual as a child of God.

Rooted in the Catholic Social Teaching principles of The Dignity of the Human Person, Rights and Responsibilities, and Option for the Poor and Vulnerable, we are committed to providing intimate care in a way that safeguards children's wellbeing, promotes their independence, and protects their privacy and dignity at all times.

We recognise that some children require support with intimate care due to their age, developmental stage, medical needs, disability, or special educational needs and disabilities (SEND). The school is committed to ensuring that intimate care is provided in a safe, inclusive, respectful, and child-centred manner at all times.

Safeguarding is embedded throughout all intimate care practices and procedures.

The school will ensure that intimate care:

- Maintains the dignity, privacy, and respect of every child
- Is responsive to individual needs and preferences
- Promotes safety, comfort, wellbeing, and independence
- Safeguards children from harm, intrusion, and abuse
- Supports children's voice, choice, and consent
- Protects the rights and welfare of all involved

1. Core Principles

1.1 Child-centred practice

All intimate care will be carried out with sensitivity, respect, and professionalism. Children will be reassured, listened to, and treated in a way that protects their dignity, privacy, and emotional wellbeing.

1.2 Safeguarding

Safeguarding underpins all intimate care arrangements. All adults providing intimate care must follow the school's safeguarding procedures and safer working practices at all times.

1.3 Equality and inclusion

In line with the Equality Act 2010, no child will be excluded, disadvantaged, humiliated, or denied access to education because they require intimate care support.

1.4 Promoting independence

In line with our commitment to human dignity and flourishing, staff will encourage children to take increasing responsibility for their own personal care wherever appropriate for their age, stage of development, and individual needs.

2. Legal and Statutory Framework

This policy has due regard to the following legislation and statutory guidance:

Children Act 1989
Children Act 2004
Education Act 2002, including Section 175
Equality Act 2010
Childcare Act 2006
Safeguarding Vulnerable Groups Act 2006
Health and Safety at Work etc. Act 1974
Management of Health and Safety at Work Regulations 1999
Control of Substances Hazardous to Health (COSHH) Regulations 2002
UK GDPR and Data Protection Act 2018
Keeping Children Safe in Education (KCSIE) 2025
Working Together to Safeguard Children 2026
SEND Code of Practice: 0–25 years
Supporting Pupils at School with Medical Conditions
EYFS Statutory Framework (where applicable)
UKHSA infection prevention and control guidance

3. Definition of Intimate Care

3.1 Definition

For the purposes of this policy, intimate care refers to any hands-on support for personal hygiene or physical care needs. This may include direct physical assistance, supervision, prompting, or observation where appropriate.

3.2 Intimate care may include:

- Toileting support
- Nappy changing
- Cleaning a child after toileting accidents
- Support with continence care
- Dressing and undressing
- Support with menstrual care
- Washing intimate areas
- Application of prescribed medical creams or treatments
- Physical assistance related to personal hygiene

3.3 Intimate care may also include:

Prompting or encouraging toilet use
Feeding support
Hair care
Changing outer clothing
Support with handwashing and hygiene routines

4. Roles and Responsibilities

4.1 The Principal

The Principal is responsible for ensuring that:

- Appropriate policies and procedures are in place
- Staff receive appropriate training and guidance
- Safeguarding procedures are rigorously followed
- Intimate care arrangements are planned appropriately
- Concerns or complaints are managed appropriately
- Suitable staffing and facilities are available

4.2 Staff Responsibilities

Staff providing intimate care must:

- Carry out intimate care respectfully and sensitively
- Follow this policy and safeguarding procedures
- Promote children's dignity and independence
- Explain procedures to the child in an age-appropriate way
- Record intimate care where required
- Report safeguarding concerns immediately
- Maintain professional boundaries at all times
- Use appropriate PPE and hygiene procedures

4.3 Parents and Carers

Reflecting the importance of family and community, the school will work in partnership with parents/carers to ensure children's needs are met appropriately and sensitively.

Parents/carers are responsible for:

- Sharing relevant medical or developmental information
- Providing required supplies where appropriate
- Contributing to and reviewing intimate care plans
- Providing consent for planned intimate care arrangements

5. Intimate Care Plans

5.1 Individual intimate care plans

Where ongoing intimate care is required, the school will work in partnership with parents/carers and, where appropriate, the child, to develop an individual intimate care plan.

Plans may include:

- The child's specific care needs
- Level of support required
- Equipment required
- Staffing arrangements
- Communication methods and preferred terminology
- Cultural or religious considerations
- Medical information
- Arrangements for promoting independence
- Recording and communication procedures
- Review arrangements

5.2 Storage of information

Intimate care plans and records will be stored securely and confidentially in accordance with data protection requirements.

5.3 Review arrangements

Intimate care plans will be reviewed regularly and updated whenever needs change.

6. Consent and Communication

6.1 Planned intimate care

Parental consent will be obtained for planned intimate care arrangements through the school's intimate care consent procedures.

6.2 Emergency or unexpected intimate care

In exceptional or urgent circumstances, staff may provide intimate care in the child's best interests to maintain hygiene, dignity, health, safety, or wellbeing.

Parents/carers will be informed as soon as reasonably practicable.

6.3 Child voice and consent

Children will be spoken to respectfully and involved in decisions about their care wherever possible. Staff will explain what they are doing and seek the child's cooperation and agreement in an age-appropriate manner.

A child's distress, discomfort, or refusal will always be taken seriously.

7. Procedures for Providing Intimate Care

Staff must:

- Inform another member of staff before providing intimate care where possible
- Use designated facilities or appropriate private spaces
- Maintain privacy without creating secrecy or isolation
- Encourage children to complete tasks independently where appropriate
- Wear gloves and disposable aprons where required
- Wash hands thoroughly before and after procedures
- Dispose of waste safely and hygienically
- Use language that is calm, respectful, and age-appropriate
- Reassure children throughout procedures

Staff must not:

- Use personal devices during intimate care
- Take photographs or recordings
- Engage in unnecessary conversation or physical contact
- Leave children distressed or humiliated
- Force a child to complete a procedure

The school recognises that routine intimate care does not automatically require two members of staff. Risk assessments and individual care plans will determine whether additional adults are necessary.

8. Safeguarding

8.1 Safer recruitment and training

All staff providing intimate care will:

- Have appropriate safeguarding checks, including enhanced DBS clearance
- Receive safeguarding training
- Receive guidance on professional boundaries and safer working practice

8.2 Reporting concerns

Any concerns arising during intimate care must be reported immediately to a Designated Safeguarding Lead (DSL).

This includes:

- Unexplained marks or bruising
- Soreness or injury
- Changes in behaviour
- Distress or fear
- Disclosures made by a child
- Concerns about staff conduct

8.3 Allegations against staff

Concerns or allegations regarding staff will be managed in line with:

- The Child Protection and Safeguarding Policy
- The Staff Code of Conduct
- The Low-Level Concerns Policy
- The Allegations Against Staff procedures

Where appropriate, the Local Authority Designated Officer (LADO) will be consulted.

9. Health, Safety and Infection Control

The school will follow appropriate infection prevention and control procedures, including:

- Use of PPE where appropriate

- Safe disposal of waste
- Cleaning of surfaces and equipment
- Appropriate hand hygiene
- Safe storage of intimate care supplies

Parents/carers may be asked to provide:

- Spare clothing
- Nappies or pull-ups
- Wipes
- Creams where medically required
- Nappy sacks or disposal bags

10. Record Keeping

10.1 Recording Intimate Care

A written intimate care record should normally be completed when:

- a child has an ongoing intimate care plan
- intimate care is outside of the child's usual routine
- there are safeguarding concerns
- injuries, marks, soreness, or behavioural changes are observed
- intimate creams or medical treatments are administered
- a child becomes distressed or refuses care
- parents/carers specifically request communication regarding intimate care
- an accident or unusual incident occurs

Routine intimate care that forms part of an agreed daily procedure may be recorded in line with the child's individual care plan and school procedures.

10.2 Record Content

Where appropriate, intimate care records will include:

- Date and time
- Name of child
- Staff member involved
- Reason for care
- Care provided
- Any concerns noted
- Communication with parents/carers
- Actions taken or safeguarding referrals made

Records will be stored securely and confidentially.

11. Toilet Training and Independence

The school recognises that continence develops at different rates for different children.

Staff will support children sensitively and positively by:

- Encouraging independence
- Establishing routines
- Using positive praise and reassurance
- Managing accidents discreetly
- Working in partnership with families
- Avoiding punishment, shame, or embarrassment

Children will never be forced to use the toilet.

12. Monitoring and Review

This policy will be reviewed annually or sooner if required due to changes in legislation, safeguarding guidance, or school procedures.

All staff are expected to read, understand, and follow this policy as part of induction and ongoing safeguarding practice.

Appendix 1 – Individual Intimate Care Plan

Child's Name

Date of Birth

Class

Plan Start Date

Review Date

1. Nature of Intimate Care Required

Please outline the child's specific intimate care needs:

2. Child's Level of Independence

Please indicate what the child can do independently and where support is required:

3. Agreed Care Procedures

Please outline the agreed procedures for supporting the child:

4. Communication and Preferred Language

Preferred terminology, communication methods, reassurance strategies, or sensory considerations:

5. Medical Information

Relevant medical needs, allergies, continence issues, moving/handling considerations, or healthcare arrangements:

6. Cultural or Religious Considerations

7. Safeguarding and Dignity Considerations

8. Recording and Communication Arrangements

How will intimate care be recorded and communicated with parents/carers?

9. Equipment and Resources Required

- Nappies/pull-ups
- Wipes
- Spare clothing
- Gloves/aprons

Creams/medication

Other

10. Review Arrangements

Termly Annually Earlier if needs change

Parent/Carer Consent

Name

Signature

Date

School Agreement

Name

Role

Signature

Date