

Stokesay Primary School



Intimate Care Policy

RATIFICATION: Autumn 25

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REVIEWED BY: Executive Headteacher

APPROVED BY: Local Governing Body

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1. Principles

1.1 Stokesay Primary School is committed to safeguarding and promoting the welfare, dignity and rights of all pupils. Meeting a child's intimate care needs is a safeguarding responsibility and will always be carried out with respect, sensitivity and professional conduct.

1.2 This policy supports the requirements of:

- *Keeping Children Safe in Education (2025)*
- *Working Together to Safeguard Children*
- *Children and Families Act 2014*
- Equality Act 2010
- DfE *Supporting Pupils with Medical Conditions*
- TrustEd Safeguarding and SEND procedures

1.3 Intimate care will never discriminate on the basis of gender, SEND, medical needs, religion, ethnicity or background. Every child has the right to feel safe, respected and valued.

1.4 Staff undertaking intimate care will do so in a professional manner at all times. They are in a position of trust and must uphold Stokesay's safeguarding culture and expectations.

2. Definition

2.1 **Intimate care** includes any support that involves touching or assisting with personal and private bodily functions that most children can manage for themselves, such as:

- Toileting and continence care

Nappy changing and continence care for children who are not yet toilet trained

- Changing soiled clothing
- Washing or cleaning after an accident
- Menstrual care
- Assistance with dressing/undressing
- Support with medical or hygiene routines involving private areas

2.2 It may also include **supervision of children undertaking intimate self-care**.

3. Best Practice at Stokesay

3.1 Staff Training and Professional Conduct

Staff providing intimate care will have appropriate training, including safeguarding.

3.2 Infection Control and PPE

Staff will use PPE such as gloves and aprons where required and follow hygiene protocols.

3.3 Promoting Independence

Children will be encouraged to be as independent as possible. Staff promote confidence and autonomy while ensuring safety and dignity.

3.4 Communication with Children

Staff will communicate clearly with the child throughout, using their preferred method. Where appropriate, staff will **ask permission** before starting intimate care.

3.5 Respecting Privacy

A child's privacy will be respected at all times. Only staff who need to assist will be present.

3.6 Gender Considerations

Where possible, a child will be supported by an adult of the same gender. If this is not possible, safeguarding oversight will ensure the child's comfort and safety.

3.7 Notifying Another Adult

Staff will inform another adult before providing intimate care. Two adults are not required unless written into the child's plan.

3.8 Individual Care Plans

Where intimate care is routine, medical, or ongoing, an Individual Care Plan will be created, agreed with parents/carers, SENCo, and any relevant professionals.

3.9 Informing Parents/Carers

If intimate care is required unexpectedly (e.g., toileting accident), parents/carers will be informed the same day.

3.10 Cultural and Religious Considerations

Staff will adapt practice when necessary to respect family beliefs and cultural requirements.

3.11 Intimate Care for Two-Year-Olds

For children in the two-year-old provision, intimate care will most commonly include nappy changing and support with toileting and hygiene. Care is carried out in line with this policy, with a strong focus on dignity, reassurance and safeguarding.

Staff will explain what they are doing using age-appropriate language, respond to children's cues and ensure that care routines are calm and respectful.

Nappy changing and other intimate care routines are recorded in line with school procedures, and any concerns are reported immediately to the DSL or Deputy DSL.

4. Safeguarding and Child Protection

4.1 Children with SEND or medical needs may be particularly vulnerable. Staff must be alert to any safeguarding concerns.

4.2 Any unexplained marks, injuries or disclosures must be reported **immediately** to the DSL/Deputy DSLs and logged on CPOMS.

4.3 If a child becomes distressed or uncomfortable with a specific member of staff providing intimate care, this will be reviewed and staffing adjusted.

4.4 Allegations against staff will be managed using the school's Allegations and Safeguarding procedures.

4.5 All staff must follow Safer Working Practice expectations.

5. Medical Care and Physiotherapy

5.1 Only trained staff may carry out medical procedures such as catheterisation, stoma care, or administration of rectal medication.

5.2 Physiotherapy may only be delivered by a qualified physiotherapist or staff trained directly by them.

5.3 Staff must not create their own therapy techniques or routines.

6. Massage (for identified SEND needs)

6.1 Massage may be used to support sensory needs where recommended by therapists.

6.2 Staff may carry out massage only on **hands, feet or face** unless specifically trained and authorised otherwise.

7. Record Keeping

7.1 A brief written record will be made after intimate care is provided, using the school's agreed system (e.g., care log, CPOMS)

7.2 For pupils with Care Plans, the record will include:

- Date
- Time
- Staff present
- Nature of support given
- Any observations or concerns

7.3 Records will be stored securely and shared with parents upon request.

8. Monitoring and Review

8.1 This policy will be reviewed annually by the Headteacher/DSL and SENCo.

8.2 The governing board will approve any updates.