



Intimate Care and Toileting Policy



Presented to Governors: Spring 2026

Review date: Spring 2027

Introduction

Children and young people at school often require support in personal care. Children in the early years of school, and those with physical disabilities, and learning difficulties may require assistance in managing their personal needs. Other pupils, because of accident or illness, may also at some time require such assistance. Many pupils have support staff to assist them in all aspects of school life including personal care, while others may rely on the help and goodwill of staff and peers. This policy sets out St Brendan's catholic Primary School's approach to providing intimate and personal care that is safe, dignified, child-centred and compliant with statutory safeguarding duties.

Legislative Compliance

- **Keeping Children Safe in Education (KCSIE)** – statutory guidance on safeguarding, safer recruitment, managing allegations and staff conduct. [[gov.uk](https://www.gov.uk)]
- **EYFS Statutory Framework** (where applicable, including Reception) – hygiene, facilities, staffing and safety standards. [[gov.uk](https://www.gov.uk)]
- **Equality Act 2010** – duty to make reasonable adjustments and avoid discrimination for pupils with disabilities, including continence and personal care needs. [[traded.enf...eld.gov.uk](https://www.traded.enf...eld.gov.uk)]
- **SEND Code of Practice / Children and Families Act context** – expectations around meeting needs via SEN Support/EHC plans (sector summaries). [[edapt.org.uk](https://www.edapt.org.uk)]
- **Sector safeguarding/best-practice guidance** (e.g., NSPCC Learning) – safe, respectful, child-centred intimate care

Definition of intimate care

Intimate care is any assistance that involves touching a child while carrying out a procedure that most children are able to do for themselves, but some are unable to manage without help. Intimate care tasks are associated with bodily functions, body products and personal hygiene that demand direct or indirect contact with, or exposure of the genitals. Examples include changing incontinence pads and nappies, helping someone use the toilet or washing intimate parts of the body. This may involve help with eating, drinking, dressing, and matters of personal hygiene such as washing and toileting. In some instances, more specialised intimate assistance may be needed for children with physical or medical difficulties.

Aims

The aim of this document is to:

- Safeguard the dignity, rights, and well-being of children;
- Provide guidance and support to staff; and
- Reassure parents that their children are cared for and protected.

The school is committed to ensuring that all staff undertake their responsibilities in such a way that the rights, dignity and welfare of the children is protected.

The school is committed to ensuring that staff undertaking these responsibilities are supported by policy, training and monitoring.

All school staff receive child protection training, undertake to help children do as much as possible for themselves and develop each child's ability to achieve independence. Staff receive appropriate specialised training and are provided with facilities and equipment to ensure safety, privacy and dignity if required.

An intimate care plan is drawn up for each child requiring such assistance, and is carefully planned and agreed in consultation with parents and child (Appendix 1). Provision is monitored and regularly reviewed to ensure that policy and procedure is adhered to, and that children and staff remain comfortable with the school's arrangements.

The Governing Body recognises its duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against. We recognise that there is a need for children and young people to be treated with respect when intimate care is given.

The child

- The child has the right to assistance that respects his/her dignity, and to feel safe when being moved or handled.
- The child has the right to feel comfortable with the adults assisting him/her, and to make it known if this level of comfort is disturbed.
- The child should be encouraged to engage in the care procedure, to know what is happening, and give permission at each stage.
- The child should be encouraged to work towards independence, and helped to do so as much as possible for him/herself.

The parents

- Parents have the right to information regarding school policy and procedures designed to meet the needs of their child. The school should work closely with parents to ensure that all aspects of the care procedure are shared and understood.
- Parents have a responsibility to ensure that all relevant information is provided to help the school assist their child in an appropriate way. Parents should meet the adult/s who will provide intimate care to the child, and be informed of the school's arrangements in the event of this person/s being absent.
- Parents should consider alternative arrangements to allow the child to participate in school activities (PE, examinations, performances, swimming, sports day, etc.), and activities outside school (field trips, educational visits, transport, etc.).
- The school should gain written permission from parents for the care to be provided (Appendix 2).

Confidentiality and Data Protection

- Information regarding agreed procedures must be treated confidentially and recorded/held only in the child's school file. Information should not be disclosed or discussed with any adults other than those with responsibility for the child's personal care, and should not be referred to in the presence of other children.
- Care should be provided at agreed times, at the child's request or in response to an agreed signal. Staff should make themselves familiar with the child's manner of communication, whether verbal, sign or picture, or eye contact.
- Appropriate terminology for parts of the body and bodily functions should be clarified between the child, parents, and his/her assistant/s
- We would ensure all data procedures are followed in line with our data protection expectations and guidelines.

Our intention is that the child will never be left in soiled clothing, and as soon as the member of staff responsible for him/her is aware of the situation, she/he will assist with the cleaning the child to the best of their ability. There may be occasions where the parent may be asked to take the child home in order to shower/bathe.

It is intended that the child will not experience any negative disciplining, but only positive encouragement and praise for his/her endeavours to master this necessary skill. It is always our intention to avoid drawing attention to such events and positively to encourage the child in his/her efforts to gain these skills.

Records of all intimate care will be kept. For regular care, Appendix 3 and for one-off incidents, Appendix 4. All one-off incidents should be reported discreetly to parents. Any changes to regular care should also be reported discreetly to parents.

Writing an intimate care plan

- The plan should have the child's safety, privacy, and dignity as paramount (Appendix 1).
- The plan should include:
 - Clear information regarding the assistance to be provided and how they prefer to be helped.
 - The named person/s with responsibility to assist the child; there must be two people present during care, the plan will include additional adults in case of staff absence, however this is deemed as best practice and may not always be possible and is not a legal requirement.
 - Alternative arrangements must be in place in the absence of one or both of the named staff. However, the school should be aware that the introduction of other staff to the care context without prior arrangement can increase the vulnerability of the child and adults.
 - The timetable, if possible, when assistance will be provided;
 - Arrangements for school events and activities;
 - The maintenance of a record of assistance (Appendix 3).
 - Two persons are required to assist if a hoist is being used. In this case the second person should be identified and made known to the child and parents.
 - The plan should specify the assistance to be provided as clearly as possible e.g. undressing/cleaning the child, changing a nappy, holding child in position, etc.
 - The assistant/s should talk to the child throughout the procedure e.g. "I am going to help you undress", "I am using a wipe to clean your bottom".
 - The assistance should be rehearsed in the bathroom with the parent/s present to ensure clarity. Following this there should be no change to what has been agreed.
 - The plan should be signed by all contributors and reviewed on a regular basis.

Training and resources

- Guidance/advice may often be provided by the child's parent, and/or the child him/herself.
- All staff providing personal care must have received child protection training. Specialised training may be required if the child uses a wheelchair, hoist, colostomy bag or requires an invasive procedure such as rectally administered medication. This training may be arranged through the Children and Young Peoples Services Directorate of the LEA, and the Health Trust School Health Teams.
- It is recommended that the school's arrangements in the absence of named assistants should involve only members of staff who have undergone appointment procedure including background scrutiny. KCSIE requires safer recruitment for anyone undertaking regulated activity, including intimate care.

Casual substitute staff should not provide intimate care in the school setting.

- The school must provide appropriate accommodation that ensures privacy for the child, and is sufficiently spacious to accommodate any other equipment the child may need, such as a changing bench or hoist. The provision of appropriate accommodation and equipment should be arranged in conjunction with the Children and Young Peoples Services Directorate of the LEA.
- The school should provide resources to ensure that procedures are carried out hygienically. This may include disposable aprons, gloves, wipes and medicated hand washing products.
- Continence Products - it is the responsibilities of parents / carers to provide suitable continence products for use by their child whilst at school. School does not have supplies of continence products. When further products are required, parents will be informed. If a child is sent to school without continence products we will be unable to keep them at school and parents/ carers will be requested to collect them.
- Additional requirements may include labelled bins for the disposal of soiled waste; items such as needles, catheters, etc., and arrangements for the collection of such waste. This can be arranged through the Operations and Estates Directorate of the LEA and the Council.

Vulnerability to abuse

- Children should be encouraged to recognise and challenge inappropriate assistance, and behaviour that erodes their dignity and self-worth.
- However, the following factors may increase a child's vulnerability:
 - o Experience of multiple carers.
 - o The inability to distinguish between assistance and abuse; and
 - o The inability to communicate.
- While adults are protected by their adherence to procedure, the following factors may increase their vulnerability:
 - o The possibility of accidents.
 - o The possibility of misunderstanding or misinterpretation; and
 - o The possibility of the child becoming aroused.
- The school should ensure that the programme of assistance is monitored and both child and adult given the opportunity to report any concerns that they may have. The school's Designated Safeguarding teacher may be the most appropriate person to undertake this responsibility.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times. If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Safeguarding teacher.

If a child makes an allegation about a member of staff this will be investigated in accordance with the set procedures in the Northamptonshire Safeguarding Children Board procedures manual. [Welcome to the Northamptonshire Safeguarding Children...](#)

Physiotherapy

Pupils who require support with a physiotherapy programme at school will either have it carried out by a physiotherapist, their assistant or a member of school staff; in this last case the programme must be demonstrated by the physiotherapist and written guidance given and updated regularly. The physiotherapist will observe the member of staff carrying out the programme during the year. This is part of a pupil's care plan.

Medical Procedures

Pupils who need assistance with invasive or non-invasive medical procedures will have them written up in their care plan as agreed with parents/carers. Only staff trained to carry out these procedures will do so.

Massage

This is a worthwhile part of the curriculum and in order to: safeguard the interest of both pupils and staff and respect older students' sexual maturity, staff must review the use of massage with each pupil regularly. Massage would be offered on a pupil's: hands, feet, arms and face. Massage is always an aspect of a session that includes a number of pupils and staff working in the same space.

Monitoring

The monitoring of this policy and its application, to be reviewed annually will be undertaken by:

Head/SENCO and Governors

All staff in their daily practice

Appendix 1, 2, 3 and 4 below:

St. Brendan's Catholic Primary School
Intimate Care/Toileting Management Plan



<u>Pupil Name:</u>	<u>DOB:</u>
<u>Staff Involved:</u>	<u>Refer to Moving and Handling Plan, if applicable:</u>
<u>I need help with:</u>	
<u>You will need the following equipment:</u>	
<u>The most suitable toilets for me are:</u>	
<u>You can help me by:</u>	<u>Frequency of Support:</u>
<u>I can be more independent by:</u>	

Parent/Carer:

Child (if appropriate):

Staff Members:

Head/SENCO:

Date:

Review Date:

St. Brendan's Catholic Primary School

Permission for Intimate Care/Toileting



Pupil Name:

DOB:

Address:

Parent/Carer:

I/we give permission for the assistance detailed in the Care plan to be provided to my/our child and will advise the school of any changes that may affect this provision. I/we will provide the correct resources needed:

Signed:

Date:

(Where appropriate) I, the child, give permission for the assistance detailed in my plan to be provided to me:

Signed:

Date:

