



Intimate Care Policy

This policy is effective for Willowbrook Mead Primary Academy under the control of the Trust and reporting to the Trust Board.

Version:	1.0
Ratified by:	H Sandy-Sharpe
Date ratified:	17/06/2026
Next review:	This policy does not have a fixed review date. It is assessed annually to ensure it remains accurate and up to date. In addition, it is reviewed as needed in response to changes in law, guidance or organisational practice. The version above reflects the most recent assurance check.

Revision History:

Version	Date	Author/s	Summary of Changes:
1.0	June 2026	SPE	New policy

Intimate Care Policy

Contents

1. Introduction.....	2
2. Scope	2
3. Definitions	2
4. Principles	3
5. Safeguarding.....	3
6. Health, Safety and Hygiene	3
7. Links with Parents and Carers	4
9. Offsite visits and swimming lessons	4
Appendix A.....	5
Appendix B.....	6

1. Introduction

- 1.1 This policy sets out Willowbrook Mead Primary Academy’s approach to intimate care.
- 1.2 The policy aims to set out operational guidelines and procedures to ensure the safety and wellbeing of all students and staff involved with intimate care.

2. Scope

- 2.1 This policy applies to all Willowbrook Mead Primary Academy staff and volunteers working with pupils within the school, or on external visits.
- 2.2 This policy should be read alongside school’s Safeguarding (Child Protection), SEND, Health and Safety, and administration of first aid Policies.
- 2.3 This policy has factored in consideration guidance set out in the *Early Years Foundation Stage Statutory Framework*.

3. Definitions

- **Intimate Care:** Any care which involves washing, touching, or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do.

This may typically involve, but not exclusively:

- Supporting a child with toileting accidents.
- Changing nappies or pull-ups.

- Washing and cleaning associated with soiling or wetting.
- Assisting a child with dressing or undressing.
- Providing supervision for children involved in intimate self-care.
- Administering medication or medical procedures where staff are explicitly trained to do so.

4. Principles

4.1 Every child has the right to feel safe, secure, and respected. The 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.

4.2 Staff will:

- Ensure children will be treated with sensitivity and respect. Privacy will be afforded to the child at all times, in line with **section 3.86 in the Early Years Foundation Stage Statutory Framework**.
- Encourage and support children to achieve the highest level of autonomy and independence where possible.
- Ensure intimate care is provided consistently by familiar staff members to provide a predictable and safe environment, with trusted adults.
- Ensure no child will be excluded from participating in school life due to their intimate care needs.
- Ensure records are kept to ensure the wellbeing of the child is a fundamental priority at all times.

5. Safeguarding

5.1 This policy adheres to the school's Safeguarding and Child Protection Policy and the statutory guidance outlined in *Keeping Children Safe in Education*.

5.2 **Staff ratios:** Normal practice is for *one* member of staff to provide intimate care to respect the child's privacy, but the staff member must inform another colleague before proceeding.

5.3 **Communication:** Staff should explain to the child what is happening and seek permission (where possible), adapting the communication to the child's needs and ability.

5.4 **Record Keeping (Intimate Care Log):** Every instance of intimate care must be recorded promptly on the **Intimate Care Log** (see Appendix A). This ensures a transparent, safeguarding-compliant record, that helps monitor the welfare of the child, enabling effective and time sensitive reporting to either families or designated safeguarding leads (DSLs)

6. Health, Safety and Hygiene

6.1 Staff should follow good practice in hygiene when conducting intimate care.

6.2 **Personal Protective Equipment (PPE):** Disposable gloves and aprons must be worn when dealing with blood, bodily fluids, or when changing a child.

6.3 **Disposal:** Soiled nappies, pull-ups, and wipes must be securely double-bagged and placed in the designated clinical waste bin.

6.4 **Cleaning:** Changing mats or areas must be thoroughly cleaned with an antibacterial spray or wipe after every use.

6.5 **Handwashing:** Staff must wash their hands thoroughly with soap and warm water before and after the procedure, even if gloves were worn. Staff should also encourage children to follow similar routines to build good hygiene learning.

7. Links with Parents and Carers

7.1 The school will build strong links with families and carers to ensure a consistent and transparent approach to intimate care.

7.2 **Supplies:** Parents/carers are responsible for providing an adequate supply of clean clothes, nappies, wipes, and any specific barrier creams required.

7.3 **Communication:** Parents/carers will be informed the same day if their child has required intimate care due to an accident or if there are any health concerns they should be aware of.

8 Intimate Care Plans (ICPs)

8.1 Children who require regular, ongoing intimate care, an Intimate Care Plan (ICP) will be put in place and agreed with parents/carers (*see appendix B*).

8.2 The ICP will be created collaboratively with the parents/carers, the Special Educational Needs Coordinator (SENCO), and, where appropriate, the child and relevant health professionals.

8.3 ICPs must include the minimum of:

- What care is required
- How often care is required
- Designated person/s who will be administering care
- Where care will take place
- Any provisions required
- Strategies to support the child in communicating their need
- Strategies to support the child's development (if appropriate) leading to more independence where possible.

9. Offsite visits and swimming lessons

9.1 The school will ensure that intimate care needs are fully considered during the risk assessment process for educational visits, residential trips, and swimming lessons. Temporary adaptations to the ICP will be agreed upon with parents/carers prior to the activity.

[Pupil name] care plan

It is advised that a care plan is completed for all learners who have continence difficulties that affect their school day. As the care plan is a working document designed to assist school in their care for a learner, this should include all the information they require. It should be completed by school with the parents/carers and involve the child as far as their age and development allows. If school have any concerns, if the child's condition or treatment is complex, or if there are any disagreements, schools may consult the school nurse, or the relevant healthcare professional.

CARE PLAN

Name of School: Willowbrook Mead Primary Academy

Child's/young person's details

Child's name	
Date of Birth	
Year group	
Home address	
School name	Willowbrook Mead Primary Academy
School address	10 Roborough Grn, Leicester LE5 2NA

Date of plan:

Planned review date:

(The plan should be reviewed at least annually or more frequently if the child's situation changes)

Name of person(s) completing plan and their role:

Named key adult/s who will deliver intimate care:

Family contact information

Name	
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Relationship to child		
Telephone number	Home: Work: Mobile:	
Email		
Address if different to child		
Name		
Relationship to child		
Telephone number	Home: Work: Mobile:	
Email		
Address if different to child		
Siblings' names		

Health contacts

Specialist nurse	
Consultant	
General Practitioner	
Health Visitor/School nurse	

Education contacts

Class teacher	
Special Needs coordinator (if relevant)	
Other support staff in school	

Description of child

Give brief details of child's interests, behaviour and relevant conditions, e.g. speech and language, mobility.

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Description of continence difficulty

Goals for continence management

Describe how the child's bladder and bowel health is going to be promoted and maintained and how potential and independence are going to be appropriately promoted. You may include goals for parents, child and /or school staff depending on individual needs.

Medication

Details of medication. If any medication needs to be taken in school refer to the school's medical policy and follow school procedures.

Management and description of routine

e.g. details of drinking, toileting and changing routines, aides used and any reward schemes

Details of help required for personal care, who will provide this, where and how

Arrangements for sporting activities, school visits/trips etc

Details of staff training needed/undertaken

Include who has been trained, the training given, by whom with dates and signatures of trainer and staff member

Use and disposal of continence products and aids

Include arrangement for soiled clothes and underwear, provision or new/spare equipment eg catheters).

Emergency situations

Describe what would constitute an emergency for the child and what action should be taken. Schools should always act in line with their safeguarding, medical and first aid policies.

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Name of parent/carer

Signature of parent/carer **Date**

Name of school representative

Role/job title of school representative

Signature of school representative **Date**

Name of child/young person

Signature of child/young person **Date**