



# **Nexus Education Schools Trust**

## **Intimate Care Policy**

Reviewed: September 2025

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## **1. Aims**

This policy aims to ensure that:

- Intimate care is carried out properly by staff, in line with any agreed plans
- The dignity, rights and wellbeing of every pupil are safeguarded
- Pupils who require intimate care are not discriminated against, in line with the Equality Act 2010
- Parents/carers are assured that staff are knowledgeable about intimate care and that the needs of their child are taken into account
- Staff carrying out intimate care, do so within guidelines (i.e. health and safety, manual handling, safeguarding protocols awareness) that protect themselves and the pupils involved

## **2. Legislation and statutory guidance**

2.1 This policy has due regard to relevant legislation and guidance, including, but not limited to, the following:

- Children and Families Act 2014
- Education Act 2011
- Health Act 2006
- Equality Act 2010
- DfE (2025) 'Keeping children safe in education'
- Safer Recruitment Consortium – 'Guidance for safer working practice for those working with children and young people in education settings' (Feb 2022)

2.2 This policy will be implemented in conjunction with the school's:

- Health and Safety Policy
- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Child Protection and Safeguarding Policy
- Staff Code of Conduct
- Whistleblowing Policy
- Administering Medication Policy

## **3. Definitions**

3.1 Intimate care refers to any care that involves:

- Washing
- Changing a pupil who has wet or soiled themselves
- Providing oral care
- Feeding
- Assisting in toilet issues
- Supporting toilet training
- Providing comfort to an upset or distressed pupil
- Supporting pupils with prescribed medical procedures, as directed by healthcare professionals

3.2 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.

3.3 Examples of intimate care include support with dressing and undressing (underwear), changing incontinence pads, nappies or medical bags such as colostomy bags, menstrual hygiene, helping someone use the toilet, or washing intimate parts of the body.

3.4 Pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

## **4. Health and Safety**

4.1 The Health and Safety Policy lays out specific requirements for cleaning and hygiene, including how to deal with spillages, vomit and other bodily fluids.

4.2 Any member of staff that is required to assist a pupil with changing a medical bag will be trained to do so and will carry out the procedure in accordance with the Supporting Pupils with Medical Conditions Policy.

4.3 Staff will wear disposable aprons and gloves while assisting a pupil in the toilet or designated area or while changing a nappy, incontinence pad or medical bag. Gloves and aprons will be disposed of after supporting each child.

4.4 Soiled nappies, incontinence pads and medical bags will be securely wrapped and disposed of appropriately.

4.5 Where a pupil requires intimate care/toileting, nappies, incontinence pads and medical bags will be disposed of in a clinical bin, as per health and safety guidelines.

4.6 Any soiled clothing will be contained securely, clearly labelled and discreetly returned to parents/carers at the end of the day.

4.7 The changing area / bathroom will be left clean and sanitised between each child.

4.8. Hot water and soap will be available to wash hands.

## **5. Staff and facilities**

5.1 Staff members who provide intimate care are trained to do so and are fully aware of best practice. Suitable equipment and facilities will be provided to support pupils and those who need special arrangements will be assisted with the necessary equipment and advice following an assessment from a physiotherapist or occupational therapist. This may include the following:

- Changing mat/unit
- Adjustable bed
- Non-slip step
- Adapted toilet seat or commode seat
- Hoist
- Swivel mat
- Disposable gloves/aprons
- Nappies, pads and medical bags
- Tissue rolls (for changing mat/cleansing)
- Supply of hot water

- Soap
- Barrier creams
- Antiseptic cleanser for staff
- Antiseptic cleanser for the changing bed/mat
- Clinical waste bag
- Spillage kit

5.2 In specialist schools there may be extended disabled toilet facilities with a wash basin which include changing areas.

5.3 Where appropriate, mobile pupils will be changed while standing up if they are physically able to.

5.4 Pupils who are not mobile will be changed on a purpose-built changing bed or on a changing mat

5.5 Staff will be supported to adapt their practice in relation to the needs of individual pupils, taking into account developmental changes such as the onset of puberty or menstruation.

## **6. Working with Parents/Carers**

### **6.1 Seeking parental permission**

For children who need routine or occasional intimate care (e.g. for toileting or toileting accidents), parents/carers will be asked to sign a consent form.

For children whose needs are more complex or who need particular support outside of what's covered in the permission form (if used), an intimate care plan will be created in discussion with parents/carers (see section below).

Where there isn't an intimate care plan or parental consent for routine care in place, parental permission will be sought before performing any intimate care procedure.

If the school is unable to get in touch with parents/carers and an intimate care procedure urgently needs to be carried out, staff will act under the school's duty of care to safeguard the child's dignity, health, and wellbeing. In these circumstances, the procedure will be carried out to ensure the child is safe, comfortable and protected from harm, and parents/carers will be informed as soon as possible afterwards.

### **6.2 Creating an intimate care plan**

Where an intimate care plan is required, it will be agreed in discussion between the school, parents/carers, the child (where possible) and any relevant health professionals.

The school will work with parents/carers and take their preferences on board to make the process of intimate care as comfortable as possible, dealing with needs sensitively and appropriately.

Subject to their age and understanding, the preferences of the child will also be taken into account. If there is a doubt as to whether the child is able to make an informed choice, their parents/carers will be consulted.

The plan will be reviewed twice a year, even if no changes are necessary, and updated regularly, as well as whenever there are changes to a pupil's needs.

See appendix 1 for a blank template plan to see what this will cover.

### **6.3 Sharing information**

The school will share information with parents/carers as needed to ensure a consistent approach. It will expect parents/carers to also share relevant information regarding any intimate matters as needed.

## **7. School/Nursery responsibilities**

7.1 The privacy and dignity of any pupil who requires intimate care will be respected at all times.

7.2 A trained member of staff will change the pupil or assist them in changing themselves if they become wet, or soil themselves.

7.3 Where possible, a known member of staff to the child will support with intimate care.

7.4 Staff will react to accidents in a calm and sympathetic manner.

7.5 Some pupils may have the independence and physical skills to manage their personal hygiene more independently and therefore members of staff may support by:

- Supervising the pupil as they remove wet/soiled clothing.
- Assist the pupil in putting wet/soiled clothing into a plastic bag.
- Provide wet wipes to the pupil to allow them to clean themselves. If they need staff support to be clean, the member of staff will talk through sensitively with the child that they are going to help them get clean and talk through as they clean their body parts.
- Supervise/help the pupil in putting on clean pull up/clothing as provided for by parents/carers.

7.6 Pupils who require intimate care will be involved in planning for their own healthcare needs wherever possible.

7.7 In liaison with the pupil and parents, an individual intimate care plan will be created to ensure that reasonable adjustments are made for any pupil who requires personal care.

7.8 Accurate records of times, staff, and any other details of incidents of intimate care will be logged using the schools/nursery system, and they will be stored in accordance with the Trust GDPR Policy.

7.9 Arrangements will be made for how often the pupil should be routinely changed according to the duration they are in nursery/school.

7.10 Where appropriate for a child, arrangements will be made with a multi-agency to discuss the personal care needs of any pupil prior to them attending the school.

7.11 The family's cultural practices will always be taken into account for cases of intimate care.

7.12 Parents will be contacted if the pupil refuses to be changed, or becomes distressed during the process.

7.13 Excellent standards of hygiene will be maintained at all times when carrying out intimate care.

7.14 Staff will receive training in the specific types of intimate care they undertake.

7.15 Staff will be familiar with the control measures set out in risk assessments carried out by the school and hygiene and health and safety procedures.

7.16 Staff will also be encouraged to seek further advice as needed from their line manager.

## **8. Parental responsibilities**

8.1 Parents/carers will change their child, or assist them in going to the toilet, at the latest possible time before coming to school.

8.2 Parents/carers will provide spare nappies, incontinence pads, medical bags, wet wipes and a change of clothing in case of accidents.

8.3 A copy of this policy will be made available to all parents/carers to ensure they are aware of the procedures surrounding intimate care. Parents/carers will be asked to provide consent where routine or specific care arrangements are required, and individual care plans will be agreed where appropriate.

8.4 Parents will inform the school should their child have any marks/rashes prior to coming to nursery/school.

## **9. Safeguarding**

9.1 Intimate care is a regulated activity; therefore, only members of staff who have an enhanced DBS certificate with a barred list check are permitted to undertake intimate care duties.

9.2 All staff share a responsibility, under Keeping Children Safe in Education 2025, to act in the best interests of children and to ensure their welfare and dignity. Any member of staff may be required to carry out intimate care when it is necessary to safeguard a pupil.

9.3 Staff involved in intimate care for pupils will have regular safeguarding training and if necessary, manual handling training that enables them to remain safe and for the pupil to have as much participation as possible.

9.4 If a member of staff carrying out intimate care has concerns about physical changes in a child's appearance (e.g. marks, bruises, soreness), they will report this using the school's safeguarding procedures.

9.5 If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to the Designated Safeguarding Lead.

9.6 Any allegation made by a child against a member of staff will be managed in line with the NEST Child Protection and Safeguarding Policy. To safeguard both the pupil and the staff member, alternative arrangements for intimate care will be made without delay while the matter is investigated.

9.7 Safeguarding training will be given to all staff around spotting the signs of abuse and recognising changes in behaviour that may raise concerns.

9.8 Individual intimate care plans will be drawn up for pupils as appropriate to suit the circumstances of the pupil.

9.9 Each pupil's right to privacy and dignity will be respected. Careful consideration will be given to each pupil's situation to determine if they require more than one staff member to support with their intimate care.

9.10 If the needs of the child require more than one person to support with their intimate care, this will be specifically mentioned in the individual's Intimate Care Plan (e.g. medical reasons/health and safety). Staff must ensure that another appropriate member of staff is in the vicinity (e.g. in the classroom, corridor or playground) is aware of the task being undertaken.

9.11 Where staffing levels allow, the school will endeavour to provide intimate care from a member of staff of the same sex as the pupil. However, this cannot always be guaranteed, and pupils may be supported by staff of either sex. In all cases, the dignity, privacy, and wellbeing of the pupil will be the priority.

## **10. Offsite visits**

10.1 Before offsite visits, including residential trips, the pupil's individual intimate plan will be amended to include procedures for intimate care whilst off the school premises.

10.2 Staff will apply all the procedures described in this policy during residential and off-site visits.

10.3 Consent from a parent will be obtained and recorded prior to any offsite visit.

## **11. Links with other policies**

This policy links to the following policies and procedures:

- Accessibility plan
- Child protection and safeguarding
- Health and safety
- SEND
- Supporting pupils with medical conditions

## Appendix 1: template intimate care plan

| PARENTS/CARERS  |  |
|---|--|
| Name of child   |  |
| Type of intimate care needed  |  |
| How often care will be given  |  |
| What training staff will be given   |  |
| Where care will take place  |  |
| What resources and equipment will be used, and who will provide them  |  |
| How procedures will differ if taking place on a trip or outing  |  |
| Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan |  |
| Name of parent or carer   |  |
| Relationship to child   |  |
| Signature of parent or carer  |  |
| Date  |  |
| CHILD- IF APPROPRIATE   |  |
| Do you mind having a chat when you are being changed or washed?   |  |
| Signature of child  |  |
| Date  |  |