



Education Trust

Inspiring the individuals of today, for a better society tomorrow,

“Aspire, Belong, Collaborate”

INTIMATE CARE POLICY

Review Frequency	Annual
Reviewed	September 2025
Next Review	September 2026
Agreed by Trustees	3 rd October 2025

Riviera Education Trust are committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. We recognise that there is a need to treat all children with respect when intimate care is given and that we act in loco parentis.

DEFINITION

Intimate care can be defined as any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some pupils are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing, toileting or dressing. It also includes supervision of pupils involved in intimate self-care.

OUR APPROACH TO BEST PRACTICE

The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity are of paramount importance.

Staff who provide intimate care are trained to do so, following agreed Intimate care plans (see appendix) and are fully aware of best practice. Apparatus will be provided to assist with children who need special arrangements following assessment from physiotherapist / occupational therapist as required.

The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for all children requiring support with their personal care, following the Trust format. These will reflect the individual needs of each child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted. NSPCC advice suggests where possible care should be provided by one person to protect the child's dignity. However, in some cases, two adults may need to be present, for example if they need to operate equipment such as a hoist. (<https://learning.nspcc.org.uk/child-health-development/intimate-care#skip-to-content>).

Where a health care plan or ILP is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g. has had an 'accident' and wet or soiled him/herself). It is recommended practice that information on intimate care should be treated as confidential and communicated sensitively and privately.

Intimate care arrangements will be shared with parents / carers when they are written, and reviewed on a regular basis. The needs and wishes of children and parents will be considered wherever possible within the constraints of staff and equal opportunities legislation.

All staff should be aware of the school's confidentiality procedures. Sensitive information will be shared only with those who need to know.

Health and safety guidelines should be adhered to regarding waste products. If necessary, advice should be taken regarding disposal of large amounts of waste products or any quantity of products that come under the heading of clinical waste.

No member of staff will carry a mobile phone, camera or similar device whilst providing intimate care

In relation to record keeping for children with long-term health conditions, a written record should be kept in a format agreed by parents, staff and health professionals every time a child has an invasive medical procedure, e.g. support with catheter usage.

Accurate records should also be kept when a child requires assistance with intimate care; these can be brief but should, as a minimum, include full date, times and any comments such as changes in the child's behaviour. It should be clear who was present in every case.

CHILD PROTECTION

The school's child protection, safeguarding and health and safety procedures will be adhered to at all times. The Trustees and staff at our schools recognise that pupils with special needs and who are disabled are particularly vulnerable to all types of abuse.

From a child protection perspective, it is acknowledged that intimate care involves risks for children and adults as it may involve staff touching private parts of a pupil's body. Best practice will be promoted and all adults (including those who are involved in intimate care and others in the vicinity) will be encouraged to be vigilant at all times, to seek advice where relevant and take account of safer working practice. Where appropriate, pupils will be taught personal safety skills carefully matched to their level of development and understanding.

CHILDREN WEARING NAPPIES OR PULL-UPS

It is good practice to provide information for parents of the policy and practice in the school, ideally during home visits, welcome meetings and parents evening meetings. This may also include accessing advice and support from the School Nurse Team, Health Visitor or Bladder and Bowel Clinic.

SHOWERS AND CHANGING

Children are entitled to respect and privacy when changing clothes, e.g. for PE or to take a shower after swimming. However, there must be the required level of supervision with regard to health and safety and safeguarding considerations. This means that adults should announce their intention of entering rooms, avoiding remaining in rooms where children are changing unless pupil needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Given the vulnerabilities of the situation, it is strongly recommended that when supervising children in a state of undress, another member of staff is present. However, this may not always be possible and therefore staff need to be vigilant about their own conduct, e.g. adults must not change in the same place as children or shower with children.

PHYSIOTHERAPY

Pupils who require physiotherapy whilst at school should have this carried out by a trained physiotherapist. If it is agreed in the ILP, health care plan or EHCP that a member of the school staff

should undertake part of the physiotherapy regime (such as assisting children with exercises), then the required technique must be demonstrated by the physiotherapist personally, written guidance given and updated regularly. The physiotherapist should observe the member of staff applying the technique. Under no circumstances should school staff devise and carry out their own exercises or physiotherapy programmes.

Any concerns about the regime or any failure in equipment should be reported to the physiotherapist.

FIRST AID

Staff who administer first aid should ensure that a pupil's dignity is always considered and where contact of a more intimate nature is required (e.g. examining an injury under clothing, assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken. For further information, see the Supporting Pupils at School with Medical Conditions policy (<https://www.rivieratrust.co.uk/policies/>).

MEDICAL PROCEDURES

Pupils who are disabled might require assistance with invasive or non-invasive medical procedures such as the administration of rectal medication, managing catheters or colostomy bags. These procedures will be discussed with parents/carers, documented in the health care plan, EHCP or ILP and will only be carried out by staff who have been trained to do so.

It is particularly important that these staff should follow appropriate infection control guidelines and ensure that any medical items are disposed of correctly.

Any members of staff who administer first aid should be appropriately trained in accordance with statutory guidance. If an examination of a child is required in an emergency aid situation it is advisable to have another adult present, with due regard to the child's privacy and dignity.

MASSAGE

Massage is now commonly used in schools, particularly with pupils who have complex needs and/or medical needs in order to develop sensory awareness, tolerance to touch and as a means of relaxation. It is recommended that massage undertaken by school staff should be confined to parts of the body such as the hands, feet and face in order to safeguard the interest of both adults and pupils.

Any adult undertaking massage for pupils must be suitably qualified and/or demonstrate an appropriate level of competence.

SAFEGUARDING

The schools Safeguarding Procedures and South West Multi-Agency Safeguarding procedures will be adhered to (<https://www.rivieratrust.co.uk/policies/>).

GUIDANCE FOR STAFF

The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of safeguarding issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents / carers to provide continuity of care to children / young people wherever possible.

CHANGING FACILITIES

Pupils with changing needs will be changed in school in appropriate facilities close to the classroom. Appropriate equipment is provided in school, ie changing beds, hoists and waste disposal. The dignity and privacy of the pupils is of paramount concern. Pupils who are able to stand when being supported in their personal care, should always be encouraged to do so. The use of changing beds should be restricted only to those pupils who need them.

Some pupils will need additional support if they are particularly soiled. This might mean that they will need help to use a shower. In these circumstances, staff will need to be especially sensitive to the needs of the pupil, but will need to ensure that they are properly cleaned and comfortable. In these circumstances, best practice would be for two people to support the pupil.

HEALTH AND SAFETY

The school is rightly concerned about health and safety issues when staff are changing children. Manual Handling training is undertaken and advice can be sought from occupational therapy or physiotherapists regarding use of slings, hoists and equipment.

Staff should always wear gloves and a disposable apron if necessary when dealing with a child who is soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag which can be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste. All changing beds should be cleaned after each use with anti-bacterial sprays and disposable wipes.

Staff should be aware of the Trust's Health and Safety Policy and Safeguarding (www.rivieratrust.co.uk/policies).



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Intimate Care Plan

Name:	
Frequency of Changing:	
Equipment/Resources needed:	
Medical/Physio issues to consider:	
How are they changed:	
How are they supported:	
How is independence encouraged:	

Written July 2022	Reviewed	Amended Y or N
Autumn 2 2022		
Spring 1 2023		
Spring 2 2023		
Summer 1 2023		
Summer 2 2023		
Parent Signature		

DETAILS OF AMENDMENTS

September 2018

- Updated to include Shiphay Learning Academy.

April 2019

- Updated specific guidance on nappies and toileting.

July 2019

- Updated to make reference to Keeping Children Safe in Education 2019.

March 2021

Reviewed and updated to make reference to Keeping Children Safe in Education 2020.

January 2022

- Reviewed and updated referencing Team Teach training.

March 2023

- New Policy

March 2024

- Reviewed without change.

September 2025

- 'Our Approach' updated following NSPCC guidance