Intimate Care Policy

Lydd Primary School including Bluebells Nursery

Policy owner	Head of School
Responsible body	Our Community Multi Academy Trust
Approval body	Lydd Local Monitoring Council, subject to the Trust Scheme of Delegation
Status	Approved: October 16th 2026
Version	2.0
Effective date	October 16th 2026
Next review	October 2027 or earlier following a change in law, statutory guidance or Trust procedure

1 Purpose and scope

Lydd Primary School, including Bluebells Nursery, is committed to enabling every pupil to participate fully in school life. Where a pupil requires intimate care, the school will provide safe, respectful and individualised support that protects dignity, privacy, health and wellbeing while promoting independence.

This policy applies to all employees, agency staff and other authorised adults who may provide intimate care on behalf of the school. It covers planned and occasional care, including toileting, continence care, washing and changing. It should be read alongside the Trust and school policies listed in section 3.

Volunteers and work-experience students will not provide intimate care.

No pupil will be treated less favourably because they require intimate care. The school will make reasonable adjustments where required and will not ordinarily make a pupil's attendance or participation dependent on a parent or carer attending school to provide routine care.

2 Definition

Intimate care is care associated with bodily functions, bodily products or personal hygiene that involves direct or indirect contact with, or exposure of, parts of the body normally considered private. It includes assistance with toileting, continence care, washing, changing clothes and supervision of a pupil undertaking intimate self-care.

Comforting a distressed pupil is not, by itself, intimate care. A clinical or invasive procedure is managed under the school's arrangements for supporting pupils with medical conditions and any Individual Healthcare Plan. Such a procedure may be undertaken only by staff who have received suitable instruction and have been assessed as competent.

3 Legal and statutory framework

This policy has regard to the following legislation, statutory guidance and official advice. The current online version of each source should be used.

- Keeping children safe in education 2026
- Working together to safeguard children 2026
- Early years foundation stage statutory framework for group and school-based providers
- Equality Act 2010 and DfE advice for schools
- Special educational needs and disability code of practice 0 to 25 years
- Supporting pupils at school with medical conditions
- Data protection in schools including the UK GDPR, Data Protection Act 2018 and Data (Use and Access) Act 2025
- Health and safety responsibilities and duties for schools
- Health protection in children and young people's settings, including education
- Healthcare and related wastes how to classify

Relevant primary legislation also includes the Children Acts 1989 and 2004, Children and Families Act 2014, Health and Safety at Work etc. Act 1974, Manual Handling Operations Regulations 1992 and Control of Substances Hazardous to Health Regulations 2002.

Associated Trust and school documents include the Child Protection and Safeguarding Policy; procedures for managing allegations and low-level concerns about adults; SEND Policy; Supporting Pupils with Medical Conditions Policy; Health and Safety Policy; Data Protection Policy; Records Retention Schedule; Staff Code of Conduct; and Educational Visits Policy.

4 Principles

- Every pupil has the right to safety, privacy, dignity and respect.

- Care will be based on the pupil's individual needs, not on assumptions about age, disability, sex or stage of development.
- Staff will explain what they are doing, use language the pupil understands and seek the pupil's cooperation throughout.
- The pupil's views, communication needs and preferences will be considered and recorded where appropriate.
- Staff will promote independence and expose only the part of the body necessary for the care task.
- Care will be provided promptly and sensitively, taking account of comfort, skin integrity, health and wellbeing.
- Privacy will be balanced with safeguarding, support and moving-and-handling needs.

5 Roles and responsibilities

5.1 Trust Board and Local Monitoring Council

The Trust Board retains overall accountability for safeguarding, equality, health and safety and data protection. The Local Monitoring Council provides local oversight and approves or recommends this policy where that function is delegated under the Trust Scheme of Delegation.

5.2 Head of School

- ensure that this policy is implemented consistently and that suitable facilities, staffing and equipment are available;
- ensure that only authorised, appropriately checked, trained and competent staff undertake intimate care;
- ensure that risk assessments, care plans, records and staff training are reviewed;
- ensure that safeguarding concerns, allegations and low-level concerns are managed under Trust procedures; and
- seek advice from the Executive Headteacher, Trust, health professionals or other agencies where required.

5.3 SENCO and designated safeguarding lead

The SENCO coordinates individual planning where a pupil's needs relate to SEND and supports staff and families. The designated safeguarding lead provides safeguarding advice and ensures that concerns are recorded and acted upon. Intimate care needs do not, in themselves, mean that a pupil has SEND.

5.4 Staff providing care

- follow this policy, the pupil's current plan and relevant risk assessments;
- protect the pupil's dignity, privacy and safety and promote independence;
- use required infection-control and moving-and-handling measures;
- record care accurately and report any concern, injury, disclosure, unexpected mark or change in presentation promptly; and
- tell a senior leader if they are not trained, equipped or otherwise able to provide the care safely.

5.5 Parents and carers

Parents and carers should share relevant, up-to-date information; contribute to the care plan; provide agreed supplies; tell the school about changes, allergies, rashes or injuries; and work with the school and relevant professionals to review arrangements.

6 Consent and individual planning

For routine or foreseeable intimate care, the school will agree arrangements with parents or carers using the Individual Intimate Care Plan at Appendix A. The pupil will be involved as far as is appropriate to their age, understanding and communication needs. Health professionals will be involved where necessary.

For occasional toileting accidents, parents or carers may provide written agreement using Appendix B. Where no prior agreement is in place, the school will seek parental permission where practicable. Urgent care will not be delayed where doing so would compromise the pupil's welfare, dignity or health; the parent or carer will be informed afterwards.

A parent or carer's signature records the agreed care arrangements. It is not relied upon as the school's legal basis for processing personal data.

The plan will be reviewed at least annually and whenever needs, staffing, equipment, medication, professional advice or risk changes. It will identify:

- the care required and the pupil's level of independence, communication and preferences;
- where and when care will be provided and the authorised staff and back-up arrangements;
- equipment, products, allergies, skin care, PPE and responsibility for supplies;
- privacy, safeguarding and any requirement for a second adult;
- moving-and-handling or medical requirements and required staff competence;
- arrangements if the pupil is distressed, refuses or a concern is identified;
- recording, parent communication, trips and outings; and
- review dates and triggers.

7 Safe care arrangements

Intimate care will normally be undertaken by one authorised, appropriately trained member of staff. Another member of staff will be aware that the care is taking place and available if assistance is required. Two adults will be present where the care plan or risk assessment identifies this as necessary because of moving and handling, medical, behavioural, communication or safeguarding considerations.

The pupil's preference for a particular adult, including the gender of the adult, will be considered wherever reasonably practicable. Staffing arrangements must not result in avoidable delay or cause a pupil to remain wet, soiled or distressed.

Where possible, planned care will be provided by a small, consistent group of staff, with clear back-up arrangements. Doors will not be locked in a way that prevents assistance in an emergency. Privacy will be protected without placing the pupil or staff member at avoidable risk.

Staff will follow the practical procedure in Appendix D. Each episode of planned or significant intimate care will be recorded using the school's approved system or Appendix C. Routine nursery nappy changes may be recorded on an approved group log where this provides an equivalent secure record.

8 Distress, refusal and unforeseen situations

If a pupil becomes distressed or refuses care, staff will stop where it is safe to do so, reassure the pupil, explain what is needed, offer appropriate choices and consider whether a familiar adult or different communication approach would help. Staff will not use coercion.

If refusal creates a health, welfare or safeguarding risk, staff will seek immediate advice from the Head of School, SENCO or designated safeguarding lead and contact the parent or carer and relevant health professional as appropriate. The response and any decision will be recorded and the care plan reviewed.

If a pupil has diarrhoea, vomiting or another symptom that may indicate infectious illness, staff will provide necessary immediate care and follow the school's illness and infection-control procedures, including parent collection and exclusion advice where applicable.

9 Safeguarding

Intimate care must be carried out in accordance with Keeping Children Safe in Education 2026, the Trust Child Protection and Safeguarding Policy and the Staff Code of Conduct.

- Any unexplained mark, bruise, soreness, injury, disclosure, change in behaviour or other concern must be reported promptly to the designated safeguarding lead or deputy and recorded on the school's safeguarding system.
- Accidental injury or an incident during care must be reported immediately under the school's incident and safeguarding procedures, and parents or carers informed unless safeguarding advice indicates otherwise.
- A concern about an adult must be reported immediately to the Head of School or to the alternative case manager identified in the Trust procedure where the concern involves the Head of School.
- Where the harm threshold may be met, the case manager will follow Keeping Children Safe in Education Part Four and consult the Local Authority Designated Officer. Low-level concerns will be reported, recorded and managed under the Trust's low-level concerns procedure.
- Staff must not question a pupil beyond what is necessary to establish immediate safety. They must listen, reassure, make an accurate record and pass the concern on without delay.

Where a concern is raised about a member of staff, alternative care arrangements will be made for the pupil while the matter is considered. This is a neutral safeguarding measure and does not imply that the concern is substantiated.

10 Staff suitability, training and competence

Staff undertaking intimate care must have completed the safer recruitment and pre-employment checks required for their role by Keeping Children Safe in Education and Trust procedures, including the appropriate level of DBS and Children's Barred List check where the role is eligible.

Training and assessment of competence will be proportionate to the task and may include:

- safeguarding, safer working practice and professional boundaries;
- dignity, privacy, communication, consent and promoting independence;
- the pupil's individual plan and any specialist health advice;
- infection prevention, PPE, cleaning and waste disposal;
- moving and handling, where required;
- clinical or medical procedures, where required;
- responding to distress, refusal, injuries, disclosures and safeguarding concerns; and
- accurate recording and information security.

Reading a care plan is necessary but does not, by itself, constitute training. Staff must not undertake a procedure for which they have not been trained or assessed as competent.

11 Health, safety and infection prevention

- Care will take place in a suitable, hygienic area that allows privacy while balancing safeguarding and support needs.
- Staff will carry out hand hygiene before and after care using liquid soap and warm running water, drying hands with paper towels.
- Disposable gloves and a disposable apron will be worn for continence care and changed between pupils. Additional PPE will be used only where the risk assessment or current public-health guidance requires it.
- Changing mats, surfaces and reusable equipment will be cleaned after each use with an approved product used in accordance with its instructions and the school's COSHH arrangements.
- Creams and other products will be used only as agreed, kept in the original or clearly labelled container, stored safely and never shared between pupils.
- Soiled clothing will be placed in a sealed bag for return to the parent or carer. It will not be rinsed by staff unless an individual plan specifically provides for this and a safe procedure is in place.
- Non-infectious nappies and continence pads will be wrapped and disposed of under the school's approved waste arrangements. Waste will be segregated where required by current Environment Agency guidance. Waste suspected to be infectious will be managed under specialist advice and the approved waste route.

- Any manual handling will follow an individual risk assessment and trained technique. Suitable equipment will be used where required.

12 Records, confidentiality and data protection

Intimate-care plans and records may contain health information and other special-category personal data. They will be processed in accordance with the Trust Data Protection Policy, privacy notices, records-retention schedule and applicable data protection law.

- Records will be accurate, proportionate, securely stored and accessible only to staff who need the information for their role.
- Information will be shared only where lawful and necessary, including where sharing is required to safeguard a pupil.
- Care records will state the date and time, care provided, staff involved, any significant observation or concern, action taken and parent or carer communication where appropriate.
- Records will be retained and securely disposed of in accordance with the Trust records-retention schedule.
- Any loss, unauthorised access or mistaken disclosure will be reported immediately under the Trust's data-breach procedure.

13 Monitoring, complaints and review

The Head of School will monitor implementation, supported by the SENCO, designated safeguarding lead and other leaders as appropriate. Monitoring will include care-plan reviews, training and competence, facilities and equipment, records, incidents, complaints and any pattern of concern.

Concerns or complaints should be raised through the school's usual safeguarding or complaints procedures, according to their nature. Safeguarding concerns must never wait for the complaints process.

This policy will be reviewed annually, and sooner following a change in law, statutory guidance, Trust procedure, provision or identified risk. Approval and oversight will follow the Trust Scheme of Delegation.

Appendix A Individual Intimate Care Plan

Complete with the pupil and parent or carer, involving health professionals where required. Attach relevant risk assessments, healthcare plans or professional instructions. Store securely.

Pupil name	
Date of birth	
Class or year group	
Parent or carer contacts	
Plan start date	
Review date and triggers	
Relevant condition or need	Do not assume that intimate-care needs constitute SEND.
Pupil's communication	How the pupil communicates agreement, distress, refusal, pain and choices.
Pupil's views and preferences	Preferred words, routines, adult or gender preferences, privacy and cultural needs.
Independence and support	What the pupil can do independently and the exact help required.

Appendix A Individual Intimate Care Plan continued

Care required and frequency	Describe the agreed step-by-step routine and when care is needed.
Location and privacy	Identify the changing or care area and how privacy and emergency access will be managed.
Named authorised staff	Include back-up arrangements.
Second adult decision	State whether a second adult is required and the risk-based reason.
Equipment and supplies	State who provides nappies, pull-ups, clothing, wipes, creams and specialist equipment.
Allergies and skin care	List products to use or avoid and instructions for creams.
PPE, cleaning and waste	Record any arrangements additional to Appendix D.
Moving and handling	Attach risk assessment and identify training or equipment required.
Medical or clinical needs	Cross-reference any Individual Healthcare Plan and professional instructions.

Appendix A Individual Intimate Care Plan continued

If the pupil is distressed or refuses	Agreed reassurance, choices, escalation and contact arrangements.
Safeguarding or health concerns	What staff must observe, record and report.
Recording and parent communication	Specify the record used and when or how parents will be informed.
Trips and extended day	Arrangements for visits, breakfast club, after-school provision and transport.
Staff training and competence	List required training and date competence was confirmed.
Other professional advice	Names, role, contact information and date of advice.

Pupil, where appropriate	Parent or carer	School lead	Staff member or health professional
Name and role: _____	Name and role: _____	Name and role: _____	Name and role: _____
Signed or recorded: _____ Date: _____	Signed or recorded: _____ Date: _____	Signed or recorded: _____ Date: _____	Signed or recorded: _____ Date: _____

Appendix B Parent and Carer Agreement

Use for routine or occasional intimate care where a full plan is not required. This agreement records the care arrangements; it is not the school's legal basis for processing personal data.

Pupil name	
Class	
Parent or carer	
Date	

Parent or carer agreement

☐ I have told the school about relevant needs, allergies, products, rashes, marks or injuries.

☐ I will provide the agreed spare clothing, nappies, pull-ups, wipes, creams or other supplies and keep them replenished.

☐ I understand the school's care, recording and parent-communication arrangements.

☐ I will tell the school promptly if my child's needs or professional advice change.

School agreement

☐ We will respond promptly and sensitively to the pupil's needs, comfort, dignity, health and wellbeing.

☐ We will follow this policy, agreed product instructions and relevant risk assessments.

☐ We will promote independence, respect the pupil's views and stop where safe if the pupil becomes distressed or refuses.

☐ We will record care and report significant distress, injury, marks, rashes or safeguarding concerns appropriately.

☐ We will review arrangements when needs or circumstances change.

Parent or carer signature: _____ Date: _____

School representative: _____ Date: _____

Appendix C Intimate Care Record

Use the school's approved secure system or this form. Record facts concisely. Safeguarding concerns must also be entered on the school safeguarding system and reported without delay.

Date and time	Care provided	Staff member	Second adult if present	Pupil presentation or significant observation	Action or concern reported	Parent or carer informed

Appendix D Practical Care and Infection-Control Procedure

The pupil's individual plan and risk assessment take precedence where they specify additional or different measures based on professional advice.

Step	Action	Required practice
1	Prepare	Confirm the plan and supplies. Make another member of staff aware that care is taking place. Prepare the area and preserve privacy.
2	Communicate	Explain what is going to happen in language the pupil understands. Seek cooperation, offer choices and encourage the pupil to do as much as possible independently.
3	Hand hygiene and PPE	Wash and dry hands. Put on disposable gloves and apron for continence care. Use additional PPE only where indicated by risk assessment or current guidance.
4	Provide care	Expose only the area necessary. Follow the agreed method, product instructions, moving-and-handling assessment and any healthcare plan. Never leave a pupil at risk of falling.
5	Observe and respond	Remain alert to distress, pain, skin changes, marks, injuries or disclosures. Stop where safe if the pupil refuses. Report concerns under sections 8 and 9.
6	Dress and reassure	Support the pupil to dress, check comfort and dignity, and provide reassurance. Return the pupil to learning as promptly as appropriate.
7	Dispose and clean	Seal soiled clothing for return. Wrap and dispose of waste through the approved route. Clean the changing surface and reusable equipment after each use.
8	Finish hand hygiene	Remove PPE safely, dispose of it correctly, then wash and dry hands. Support the pupil to wash and dry their hands as appropriate.
9	Record and report	Complete the care record. Inform the parent or carer where agreed or where there is significant distress, injury, rash, illness or change. Record safeguarding concerns separately and report them immediately.