



DOGSTHORPE INFANT SCHOOL

Intimate Care Policy

Ratified by: Local Governing Board

Date: 27th January 2026

Minute: 10

Review Date: Every 2 years

Welcome to our school family where children are...



inspired to dream and develop the building blocks to be independent, confident and inquisitive life-long learners.



nurtured, valued and individual differences are respected in an exciting, learning community where everyone belongs.



little stars who deserve to shine.

Policy Overview.

What is the policy for?

The Policy sets out the Governing Body's policy and procedures for the intimate care of pupils at Dogsthorpe Infant School

Who has devised and contributed to this policy?

The policy is based on the model policy used by the HAT Primary Schools.

How will this policy be communicated?

The policy is available on the school website, My Concern and a hard copy is available from the school office.

How will this policy be monitored?

The policy will be monitored by the SLT (including the SENDCO) & LGB.

Which other policies are linked to this policy?

All Safeguarding policies particularly.

- Supporting Pupils with medical conditions
- Guidance for Safer Working Practice for those working with children and young people in education settings
- KCSiE

This policy meets the requirements of the 'Early years foundation stage statutory framework' (2025)

Rationale

At Dogsthorpe Infant School, it is our intention to develop independence in each and every child, however there will be occasions when help is required. Our Intimate Care policy has been developed to safeguard children and staff.

The principles and procedures apply to everyone involved in the intimate care of children. Children are generally more vulnerable than adults, and staff involved with any aspect of pastoral care need to be sensitive and attentive to their individual needs. Intimate care may be defined as any activity that is required to meet the personal needs of an individual child on a regular basis or during a one-off incident.

Such activities can include:

- toileting;
- feeding;
- oral care;
- washing;
- changing clothes;
- first aid and medical assistance;
- supervision of a child involved in intimate self-care.

Parents/carers have a responsibility to advise the school of any known intimate care needs relating to their child. It is also the responsibility of the parents/carers to provide nappies and wipes for their child.

Principles of Intimate Care

The following are the fundamental principles of intimate care upon which our policy guidelines are based.

Every child has the right to:

- be safe;
- personal privacy;
- be valued as an individual;
- be treated with dignity and respect;
- be involved and consulted in their own intimate care to the best of their abilities;
- express their views on their own intimate care and to have such views taken into account;
- have levels of intimate care that are appropriate and consistent.

School Responsibilities

All members of staff working with children are DBS checked to ensure they are safe to do so. Only those members of staff who are familiar with the intimate care policy and all school safeguarding documentation are involved in the intimate care of children.

Anticipated intimate care arrangements, which are required on a regular basis, are agreed between the school and parents and, when appropriate and possible, by the child. Intimate care arrangements for any pupil who requires this support will be documented in an intimate care plan (Appendix A), which will be agreed between the school, the parents and the child (where possible). This will be reviewed on an annual basis or sooner if the child's needs change. A written log will also be kept of any intimate care procedures. It will be the school's aim to facilitate intimate care with an agreed team of staff providing such care for each named child, with a reserve team also available in case of staff absence or any other unforeseen circumstances. Both teams of staff should be known to the child.

Only in an emergency would staff undertake any aspect of intimate care that has not been agreed by the parents. This act of intimate care would be reported to a member of staff and parents at the earliest possible time following the event.

If a staff member has concerns about a colleague's intimate care practice, he or she must report this to the Headteacher, in line with our Whistleblowing Policy. Should any concern involve the Headteacher, the matter must be reported to the Executive headteacher or Chair of Trustees.

Guidelines for Good Practice

All children have the right to be safe and to be treated with dignity and respect. Young children and children with special educational needs can be especially vulnerable. Staff involved with a child's intimate care need to be particularly sensitive to their individual needs. Members of staff also need to be aware that some adults may use intimate care, as an opportunity to abuse children. It is important to bear in mind that some forms of assistance can be open to misinterpretation.

1. Involve the child in the intimate care taking place. Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and, where possible, give choices. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.
2. Intimate care should be carried out in such a way that the child's dignity is respected. The intimate care procedure itself will be carried out by one member of staff unless there is a sound reason for more adults being present. For safeguarding reasons, another member of staff should be in the vicinity but should only assist if necessary, in order to further protect the child's dignity.
3. Make sure practice in intimate care is consistent. As a child may have multiple carers a consistent approach to care is essential. Effective communication between all parties ensures that practice is consistent.
4. Be aware of your own limitations. Only carry out activities you understand and feel competent with. Some procedures ie insertion of a catheter must only be carried out by members of staff who have been formally trained and assessed.
5. Promote positive self-esteem and body image. Confident, self-assured children who feel their bodies belong to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.
6. If you have any concerns you must report them. If you observe any unusual markings, discolouration or swelling report it immediately to the Designated Safeguarding Leads. If a child is accidentally hurt during intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident to the Designated Safeguarding Leads immediately. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be kept using My Concern.
7. If a child communicates that they are unwilling to be changed either verbally or with behaviour such as turning, hitting or kicking, then staff should stop. If possible replace clothing to protect modesty. Seek advice from a member of the Safeguarding Team or SLT if unable to complete a change.

Working with Children of the Opposite Sex

There is positive value in both male and female staff being involved with children. Ideally, every child should have the choice for intimate care. The intimate care of boys and girls can be carried out by a member of staff of the opposite sex with the following provisions.

- When intimate care is being carried out, all children have the right to dignity and privacy, i.e. they should be appropriately covered, the door closed or screens/curtains put in place.
- If the child appears distressed or uncomfortable when personal tasks are being carried out, the care should stop immediately. Try to ascertain why the child is distressed and provide reassurance. Seek advice from a member of the Safeguarding Team or SLT if unable to proceed.
- Where possible intimate care will be provided by staff members of the same sex of the child. This is to protect the dignity of the child. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence, for example female staff supporting boys when there are no male staff.
- Report any concerns to the Designated Safeguarding Leads and record using My Concern.
- Parents must be informed about any concerns, in line with our Safeguarding Policy.

Communication with Children

It is the responsibility of all staff caring for a child to ensure that they are aware of the child's method and level of communication. Depending on their maturity and levels of stress children may communicate using different methods - words, signs, symbols, body movements, eye pointing, etc.

To ensure effective communication;

- make eye contact at the child's level;
- use simple language and repeat if necessary;
- wait for response;
- continue to explain to the child what is happening even if there is no response;
- treat the child as an individual with dignity and respect.

Monitoring and review

It is the responsibility of all members of staff to follow the principles stated in this policy. The Headteacher, in conjunction with the Senior Leadership Team and Local Governing Body, will monitor the effectiveness of this policy.

This policy will be reviewed every two years.

Appendix A
Intimate Care Plan

Child/Young Person:				School/Setting:	Dogsthorpe Infants		
DOB:		Gender	Male/Female	Date:			
Sanitary Item	Nappy	Pull-up	Pad	Position Preference	Laying	Standing	Sitting on toilet

Description of Intimate Care Needs
Task: If practical, it may be possible to identify one part of the intimate care procedure which gives the child/young person an opportunity to have a little more independence. If so the plan can then assist in the development of this part of the whole task.
Action Plan - Describe the steps needed to achieve this task

The following people will be assisting in the above activities:

Additional people who may be involved to cover when the named people are absent: Any other school Adult.

I am in agreement with the above procedures being undertaken: (Please sign as appropriate)

Parent/Carer

SENCO.....

Class teacher:

Teaching Assistant(s)

.....

Date Date for review