

THE WINDMILLS JUNIOR SCHOOL

Intimate Care Policy

Created April 2026 - review April 2029

At Windmills Junior School the health, safety and wellbeing of every child is our top priority. We expect all staff, governors and volunteers to share this commitment to safeguarding our pupils. Meeting a child's intimate care needs is an important aspect of safeguarding.

We are an inclusive setting and recognise that children develop at different rates and may have differing needs during their time with us. In line with our duties under the Equality Act 2010, we ensure that no child is discriminated against and that reasonable adjustments are made to meet individual needs.

Principles of Intimate Care

The following principles underpin this policy:

- Every child has the right to be safe.
- Every child has the right to personal privacy.
- Every child has the right to be valued as an individual.
- Every child has the right to be treated with dignity and respect.
- Every child has the right to be involved in decisions about their intimate care, in a way that is appropriate to their age and understanding.
- Every child has the right to express their views and have them considered.
- Every child has the right to consistent and sensitive care.
- Parents/carers will be consulted in the planning of intimate care and kept informed of any changes.

Definition of Intimate Care

Intimate care refers to any activity that involves washing, touching, or carrying out procedures to intimate personal areas which most people are able to do independently, but which some children are unable to manage due to their age, physical needs, or additional needs.

Intimate care is provided to meet a child's personal care needs and support their wellbeing. Parents/carers have a responsibility to inform the school of their child's needs, and staff will work in partnership with children and families.

Intimate care may include:

- Feeding
- Oral care
- Washing
- Dressing and undressing
- Toileting
- Supporting a child during illness (e.g. vomiting)
- Medical treatments such as enemas, suppositories or enteral feeds
- Catheter or stoma care
- Supervision of a child undertaking intimate self-care

School Responsibilities

The school will:

- Provide access to clean, private, safe, and well-equipped toilet facilities.
- Work with pupils and parents/carers to promote bladder and bowel health and maximum possible independence.
- Ensure that children who are not fully continent have an individual Intimate Care Plan (ICP).

Each care plan will:

- Be written in consultation with parents/carers and, where appropriate, the child
- Involve relevant healthcare professionals (e.g. school nurse) if required
- Be reviewed at least annually, or sooner if needs change

Only school employees who have completed appropriate safeguarding checks will provide intimate care. Sufficient staff will be identified to ensure continuity of care.

Only in an emergency will intimate care be provided without prior agreement. Any such incident will be reported to parents/carers and documented appropriately.

Staff Responsibilities

Staff providing intimate care will act professionally at all times and treat pupils with dignity and respect.

Staff must be particularly sensitive when supporting children with disabilities or additional needs, who may be more vulnerable.

This policy applies to all staff involved in intimate care and is designed to safeguard both children and adults.

Implementation of Intimate Care

- All intimate care arrangements will be carefully planned.
- The child's welfare and dignity will always be paramount.
- Staff will receive appropriate training, including safeguarding, health and safety, and any specialist training required (e.g. manual handling, PEG feeding, stoma care).

Children will be supported to achieve the highest level of independence possible. Staff will encourage pupils to do as much for themselves as they can, with appropriate support and communication aids where needed.

Privacy will be respected at all times. The number of staff required during intimate care will be determined by the child's care plan and reviewed regularly.

Where possible, pupils may express a preference for carers. Best practice is to have two members of staff present during intimate care, particularly where a higher level of support is required (e.g. nappy changing). Arrangements will be discussed with parents/carers at the start of each academic year and reviewed as needed.

Communication with Pupils

Staff must be aware of each child's preferred method of communication, which may include words, signs, symbols, or body language.

To support effective communication, staff will:

- Establish how the child communicates (recorded in the care plan)
- Make eye contact at the child's level
- Use clear, simple language
- Allow time for responses
- Explain what is happening throughout care
- Treat each child with dignity and respect

Protection and Safeguarding

All child protection procedures will be followed at all times. Any concerns must be reported immediately to the Designated Safeguarding Lead (DSL) or Deputy DSL.

Children will be taught personal safety skills appropriate to their age and understanding.

Any concerns about physical changes (e.g. marks, bruising, soreness) must be reported to the DSL.

If a child becomes distressed about being supported by a particular staff member, this will be investigated promptly, recorded, and discussed with parents/carers. Staffing arrangements will be adjusted as necessary.

Any allegations against staff will be managed in line with safeguarding and whistleblowing procedures.

Provision and Resources

Parents/carers will be asked to provide any equipment needed, including:

- Disposable gloves
- Nappy bags
- Wipes

Spare clothing is available for occasional accidents. Parents of children with an intimate care plan are asked to provide spare clothing for their child.

Health and Safety

Staff will always wear gloves when dealing with bodily fluids. Waste will be disposed of safely in designated bins. Soiled clothing will be sent home in a sealed bag where appropriate.

First Aid and Intimate Care

Named first aiders will administer first aid. Where intimate contact is required, another adult will be nearby or informed. The child's dignity will always be maintained.

Medical Procedures

Any invasive or non-invasive medical procedures will:

- Be agreed with parents/carers

- Be documented in the child's care plan
- Only be carried out by trained and competent staff

Staff must not undertake procedures they do not feel confident or trained to carry out and must inform their line manager if this is the case.

Record Keeping

Parents/carers must inform the school of:

- Medical conditions
- Intimate care needs
- Toileting support requirements

Care plans are completed collaboratively and updated as needed. Records are kept for all intimate care and medical support. Parents/ carers are notified of any changing incidents in school, or support relating to intimate care needs given.

Other related policies

Safeguarding and child protection

Health and safety

First aid in school (incorporating infection control guidance)

Medicines and children with medical conditions



THE WINDMILLS JUNIOR SCHOOL

Dale Avenue, Hassocks, West Sussex. BN6 8LS

Tel: 01273 842421

Headteacher: Mr Sam Page

Date _____

Name of Child _____

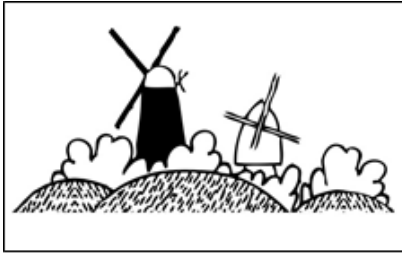
Class _____

Dear Parent/Carer,

Your child had a toileting accident at school today. Could we please ask you to wash and return any clothes or shoes that belong to the school as soon as possible.

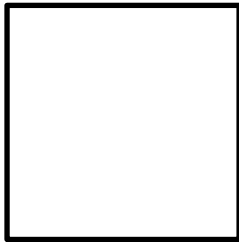
Thank you,

Sam Page



THE WINDMILLS JUNIOR SCHOOL
 Dale Avenue, Hassocks, West Sussex. BN6 8LS

Tel: 01273 842421



The Windmills Junior School Intimate Care Plan

Name of Child: Class:	Date of Birth:
Date of implementation:	Teacher: Parent/Carer: External Agency:
Clinic/Hospital Contact:	
Condition:	
Child Choice/opinions:	
Daily Care Requirements: (Toilet diary/support for child's social 7 emotional needs/ Childs independence etc)	
Facilities/ Equipment needed:	
Additional Information: (For school trips etc)	
Number of staff required to carry out care:	
Main intimate care giver and supporting staff members:	

Training/ instructions needed:	
Care plan review date:	
Record keeping responsibility:	

Parent/Carer signature: _____

Date: _____

Main intimate care giver: _____

Date: _____

SENCo signature: _____

Date: _____

If the named child has a medical needs and medication that relates to the Intimate Care Plan, an Individual Healthcare plan should also be completed.

Will an Individual Healthcare plan be completed? Yes / No

Does a permission to give medicine forms need to be completed? Yes / No