Tyndale Primary School

Intimate Care Procedure

Tyndale Primary School is part of the Greenshaw Learning Trust.
The Greenshaw Learning Trust is a charitable company limited by guarantee registered in England and Wales, company number 7633694, registered at Greenshaw Learning Trust, ORU Sutton, Throwley Way, Sutton, SM1 4AF.

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Intimate Care Procedure

This procedure describes Tyndale Primary School's procedures for supporting intimate care with specific reference to toileting. This procedure applies to Tyndale Primary School and all governors and staff of the school must abide by this procedure, which has been adopted in accordance with and pursuant to the Student Welfare Policy of the Greenshaw Learning Trust.

It is the responsibility of the Headteacher of the school to ensure that their school and its staff adhere to this procedure. In implementing this procedure school staff must take account of any advice given to them by the GLT CEO and/or Board of Trustees.

This procedure is subject to the GLT Student Welfare Policy and the Scheme of Delegation approved for the school. If there is any ambiguity or conflict then the GLT Student Welfare Policy and the Scheme of Delegation and any specific Scheme or alteration or restriction to the Scheme approved by the Board of Trustees takes precedence. If there is any question or doubt about the interpretation of this, the GLT CEO should be consulted.

Approval and review

- Maintenance of the Procedure is the responsibility of the GLT Directors of Education (model) and the Headteacher (school version)
- The model procedure was approved by the GLT Board of Trustees in December 2024.
- This school procedure was approved by the School Governing Body in January 2026.
- The Model Procedure is due for review by May 2027 and may be updated where necessary by the Education Directors in line with statutory guidance.

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1. Aims

All children at Tyndale Primary School have the right to be safe and be treated with dignity, respect and privacy at all times to enable them to access all aspects of school life.

This procedure sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with the School Safeguarding Policy, the GLT Health and Safety Policy and Procedures, the GLT Special Educational Needs Policy and the school Supporting Pupils with Medical Conditions procedure.

This procedure supports the safeguarding and welfare requirements of Early Years Foundation Stage (EYFS) statutory framework September 2025 and the Equality Act 2010.

At Tyndale Primary School we will ensure that:

- no child's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day-to-day activities;
- no child with a named condition that affects personal development will be discriminated against;
- no child who is delayed in achieving continence will be refused admission;
- no child will be sent home or have to wait for their parents/carers due to incontinence unless an agreement has been made with the parent/carer;
- adjustments will be made for any child who has delayed continence.

2. Definitions: Intimate care and personal care

Intimate care is a term used to describe activities involved in meeting the personal care needs of a child. It includes providing care which requires direct or indirect contact with, or exposure of, private body parts of the body. Intimate care tasks include activities, such as:

- changing nappies, underwear, continence pads or sanitary wear
- helping a child use the toilet
- wiping and care of the genital and anal areas
- dressing or undressing a child
- bathing, showering or washing private and personal body parts
- providing some forms of specialist medical care (such as inserting suppositories or pessaries)

It can also include other forms of physical care, most commonly referred to as personal care.

Personal care is physical care that is non-invasive and includes general hygiene and grooming. It includes tasks, such as:

- washing non-intimate body parts e.g. washing children's hands
- hair care
- changing outer layers of clothing
- applying or administering external or oral medication
- feeding
- prompting children to go to the toilet

3. Staff Carrying out Intimate Care Tasks

Each aspect of intimate care will be carried out by named members of staff who have undergone appropriate vetting*, training and instruction and are aware of best practice guidelines.

*Keeping Children Safe in Education (KCSIE) states that a person will be engaging in regulated activity if they 'engage in intimate or personal care [...] even if this happens only once.' Any person carrying out intimate or personal care must meet the legal suitability requirements and have undergone appropriate vetting checks associated with engaging in regulated activity.

4. Partnership Working With Parents/Carers and Children

The toileting needs of individual children will be discussed at an initial meeting when the child is due to start school. Where appropriate, parents/carers are made aware that staff are on hand to offer advice on how to toilet train or are put into contact with relevant support services if needed. Parents/Carers are also asked to inform the school of any medical condition and/or special educational need which may affect their child's toileting needs or require any other intimate care.

On entry into the school, or when circumstances lead to the introduction of an Intimate Care Plan, each child will be assessed to ascertain their individual needs. This assessment will involve the child's parent/carer, the class teacher, and either the Special Educational Needs Coordinator or a member of the Senior Leadership Team. Careful consideration will be given to each child's situation to determine how many adults will be needed to support, and which adults will be named as support. When possible a small number of familiar adults will share responsibility for supporting Intimate Care.

Parents/carers will be expected to provide some or all of the items which are required to carry out the child's Intimate Care Plan. This may include, for example:

- A change of clothes
- Incontinence pads / nappies
- Wipes
- Cream/Medication required.

Communication between staff, parents/carers and the child is paramount; where appropriate, the procedure should be clearly explained to the child and they will be fully aware of the tasks that the adult is responsible for and the tasks which they are required to complete independently.

A child's dignity will be respected at all times. In the event of a situation where the child requires to be washed more thoroughly than the school is able to provide, parents/carers will be called. However, parents will not be routinely called to take care of the child's intimate care needs. Where necessary, intimate care plans will be reviewed and additional advice will be requested from health professionals.

5. Providing Intimate Care

Tyndale Primary School is committed to respecting and promoting the independence and privacy of every child. Any intimate care that is required will be carried out sensitively and with professionalism. There shall be a high awareness of child protection issues and any concerns will be discussed immediately with a Designated Safeguarding Lead. There will also be a high awareness of the whistleblowing procedure, including for low-level concerns, and any concerns about any member of staff carrying out intimate or personal care will be reported immediately in line with the procedures for reporting concerns, including low-level concerns, about a staff member, supply

teacher, volunteer or contractor set out in the safeguarding policy which can be found on the school website.

When dealing with a child who requires intimate or personal care, staff will carry out such duties with the utmost respect. Children will be actively encouraged and supported in attaining the highest level of independence. Staff will be supported to adapt their practice in relation to the needs of individual children taking into account the child's age and stage of development and any additional medical and/or special educational needs.

In line with this, each child will have an Intimate Care Plan which is completed on our medical system - Medical Tracker, promoting independence and dignity at all times. Where appropriate targets may be set which will be discussed with the child and parent/carers. Staff members will support the child's progress in meeting these targets. Where appropriate, any targets made will be reviewed each term with the aim of removing the Intimate Care Plan and the child achieving independence in their intimate care.

Appropriate accessible toileting facilities will be identified for children who need support with intimate care. The school will provide equipment to ensure the child can access such facilities without the need for manual handling (lifting).

During the school day, children who have an Intimate Care Plan will be supported as frequently as is needed. When a member of staff is made aware that a child needs additional support, this will be done as soon as is reasonably practical. Any time intimate care is given, this will be recorded on Medical Tracker. Intimate care records should be retained until the pupil's 25th birthday, or transferred to the new school for primary pupils.

Members of staff who carry out the Intimate Care Plan of any child will need to adhere to the following:

- Class teachers (or members of staff assuming class teacher responsibility for a class e.g. when there are cover requirements) will need to be informed before any child is taken to provide intimate care. Children will only be removed from lessons or breaktimes with their peers in accordance with the times set out on the intimate care plan.
- Gloves will be worn before the start of any procedure and remain on until the end of the procedure, aprons to be worn when appropriate.
- Where possible, two members of staff will be responsible for the changing of an individual child. Individual circumstances will be discussed and agreed with parents/carers and will form part of the Intimate Care Plan.
- Soiled incontinence pads/nappies, wipes and all other waste will be placed in a bag, the bag will be tied and placed in the sanitation disposal bin provided (in line with the Environmental Protection Act, 1990).
- Gloves and aprons if used will be removed and placed in the sanitation disposal bin
- Staff and children will wash their hands following any Intimate Care support.
- Record all Intimate Care support on Medical Tracker.

Throughout the process, staff will communicate with the child in order to place the child at ease. If applicable and where appropriate, the adult will support the child in working towards any targets that have been outlined in the child's Intimate Care Plan.

6. Safeguarding

Members of staff will have regard to the School Safeguarding Policy at all times.

Staff should not carry out any 'extra' care or provide care in a different way to that set out in the plan without prior written agreement from parents/carers. In exceptional circumstances, where staff had to make the decision in the best interests of the child to provide care in a different way to that set out in the intimate care plan, a member of the Senior Leadership Team will be informed as soon as possible and certainly before the end of the school day, the difference in the care provided will be recorded and parents/carers will be called so that they are informed by the end of the school day.

If a member of staff is concerned about any physical or emotional changes in a child such as marks, bruises, soreness, distress etc. they will inform the Designated Safeguarding Lead (DSL) immediately. The School Safeguarding Policy will be followed.

If an allegation is made against a member of staff or if a low-level concern is raised about a member of staff, the procedure set out in the School Safeguarding Policy will be followed.

7. Bodily Fluids

Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely. When dealing with body fluids, staff will wear protective clothing (disposable plastic gloves and aprons) and will wash their hands thoroughly afterwards. Soiled children's clothing will be bagged to go home - staff will not rinse it. Children will be kept away from the affected area until the incident has been completely dealt with.

All staff maintain high standards of personal hygiene, and will take all practical steps to prevent and control the spread of infection.