

Intimate Care Policy (School Toilet Policy)

Penyrenghlyn Community Primary School

Inspiring Ambition



Intimate Care Policy/School Toilet Policy

Date Ratified by Policy Committee: 03/02/26

Date Ratified by Full GB: 24/02/26

Date Implemented: January 2026

Review Date: When required

	Print Name	Signed	Date
Headteacher	Mrs Michelle Hutchings		
Chair of Governors	Mrs Tammy Llewellyn		

Penyreglyn Community Primary School is committed to ensuring that all staff responsible for the intimate care of children and young people will undertake their duties in a professional manner at all times.

We recognise that there is a need to treat all children and young people with respect when intimate care is given. No child or young person should be attended to in a way that causes distress, embarrassment, discomfort, or pain.

The child or young person's welfare and dignity is of paramount importance and every child and young person's privacy will be respected.

Rationale

Our intimate care policy has been developed to safeguard children, young people and staff when there is a need for intimate care. The principles and procedures apply to everyone involved in the intimate care of children and young people.

School staff are working within local authority insurance cover; provided that the Intimate Care Policy in conjunction with the pupil's Health Care Plan/Intimate Care Plan are agreed and recorded by the parent/carers, education, and health (where required).

Intimate care can 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:

- feeding
- oral care
- washing
- changing clothes
- toileting
- first aid and medical assistance, in conjunction with the relevant Health Care Plan
- supervision of a child involved in intimate self-care

Parent/carers have a responsibility to advise the school of any known intimate care needs relating to their child.

Principles of Good Practice in Intimate Care

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

All pupils have an educational entitlement:-

- every child or young person has the right to be safe
- every child or young person has the right to personal privacy
- every child or young person has the right to be valued as an individual
- every child or young person has the right to be treated with dignity and respect
- all children and young people have the right to be involved and consulted in their own intimate care to the best of their abilities
- all children and young people have the right to express their views on their own intimate care and to have such views considered

- every child and young person has the right to have levels of intimate care that are appropriate and consistent.

School Responsibilities

All staff working with children and young people will be subject to the usual safer recruitment procedures. This includes students on work placement and volunteers. Vetting includes DBS checks at an enhanced level and two written references.

Only those members of staff who are familiar with the intimate care policy and other pastoral care policies of the school are to be involved in the intimate care of children and young people. Where anticipated; intimate care arrangements are agreed between the school and parent/carers and if appropriate, by the child or young person. Intimate care agreements are signed by the parent/carer and stored in the pupil's file.

Intimate care arrangements should be reviewed on at least a six-monthly basis. The views of all relevant parties should be sought and considered to inform future arrangements.

If a staff member has concerns about a colleague's intimate care practice, he or she must report this to the designated teacher for child protection.

- Allow the-pupil to care for him/herself as far as possible, to encourage independence and to encourage him/her to carry out aspects of intimate care as part of his/her personal and social development. Targets may be set in developing these life skills.
- The child or young person will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child or young person to do as much for him or herself as he or she can. This may mean, for example, giving the child or young person responsibility for washing or wiping themselves appropriately.
- Provide facilities appropriate to the child or young person's age and individual needs.
- Consideration should be given to ethnicity, culture, beliefs and religion, and any special requirements relating to intimate care should be identified and documented.
- Show awareness of and be responsive to the pupil's reactions, their verbal and non-verbal communication and any agreed signals.
- Each child or young person's right to privacy will be respected. Careful consideration will be given to each child or young person's situation to determine how many carers might need to be present. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present, (e.g.) when physical disability necessitates more than one member of staff to provide care, or when there is a need to safeguard staff. If this is the case, the reasons should be clearly documented. To discourage over familiar relationships, best practice would recommend a rota of staff that are able to undertake this task with the child/young person. This will depend on staff ratios in individual schools.
- There is positive value in both male and female staff being involved in the care of children. However, consideration should be given to the appropriateness of the gender of the member of staff to undertake the intimate care tasks

Individual Health Care Plan

Some pupils will require an Individual Healthcare Plan (IHP). These are written by the school in conjunction with healthcare professionals. They may involve:

- Supported Eating e.g., gastrostomy (peg feeding) and Nasal gastric tube (NG Tube)
- Administering emergency medication
- Physiotherapy / Occupational Therapy Programme
- Massage/Intensive interaction
- Applying topical medicines (e.g., eczema creams)

Letter of Permission

Permission must be sought from the parent/carer before any form of Intimate Care can be undertaken. All those staff working with the child or young person should know that permission has been given before undertaking any Intimate Care. (Appendix: A)

The Protection of Children

The All Wales Child Protection Procedures 2008 and the school / setting Child Protection Policy will be adhered to.

If a member of staff has any concerns about physical changes in a child or young person's presentation, e.g. marks, bruises, soreness etc; s/he will immediately report concerns to the appropriate manager/ designated person for child protection.

Safeguarding Officer (name): Mrs Hutchings

If a pupil becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be considered, and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child or young person's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child or young person makes an allegation against a member of staff, The All Wales Child Protection Procedures 2008 will be followed alongside the schools / settings Child Protection Policy.

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Appendix A

Partnership Agreement and Consent for Intimate Care for a Child/Young Person

Child's Name:

Child's Date of Birth:

Child's School Year:

Child's Class Teacher & Support Staff:

The purpose of this agreement is to ensure that both parents/carers and professionals are in agreement with the intimate care to be provided and that staff have received appropriate training. Teaching of certain care procedures may be carried out by the parent/carer or by the professional experienced in that procedure.

When the parent/carer and/or professionals are agreed that the procedure has been learned or where routine intimate care is to be provided, the details will be recorded fully below and all parties must sign this record and be provided a copy; an additional copy is to be retained on the child's file in school and where appropriate a copy is to be provided for the child's medical record.

Reasons why intimate care will be provided:

Who will provide this care (please details of names and designation of those staff who will be providing care):

Detail of care to be provided:

Parent/ carer Agreement:

I/ We give permission for the school to provide intimate care to child's name.

I/ We agree to this plan and consent to procedures identified.

I/ We will inform the school of any changes that may affect my/ our child's intimate care (e.g. if medication has changed or my/ our child has an infection).

I/ We will contact the school immediately if there are any concerns.

Name of Parent/ Carer(s):

Relationship to child:

Signature of Parent/ Carer(s):

Date:

Schools Agreement:

We agree to inform parents/ carer(s) of any concerns we have with regard to intimate care of their child.

We agree to inform parents/ carers of any changes in staff, procedure or any changes to this plan or our school intimate care policy.

We agree to treat all children with dignity and respect by providing appropriate support with intimate care professionally and with sensitivity.

Name of Headteacher:

Signature Headteacher:

Date:

A review of this agreement will be made on:

Outcome of review: (please detail any changes to the plan moving forward and produce a new Individual Intimate Care Plan as required):

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Ysgol Gynradd Gymuned
PENYRENGLYN
Community Primary School

Appendix B

Intimate Care Environmental School Based Plan

Name of Pupil:		Date of Birth:	
Name of Parent/Carer:		Name of Key Staff:	
Name of School:		Year Group:	

Pupil Information	Yes ✓ No X	Notes
Level of understanding: <ul style="list-style-type: none"> • age appropriate • relevant ALN 		
Communication: <ul style="list-style-type: none"> • use of particular words to describe body parts • use of alternative forms of communication 		
Ability of pupil to assist - partial/full		
Relevant medical diagnosis/information: epilepsy, head control, skin condition, fragility, pain, other		
Behaviour considerations		
Weight (if known) / Stature		
Environmental Considerations	Yes ✓ No X	Notes

<ul style="list-style-type: none"> • Is there a dedicated changing area? • Is the area sufficiently heated? • Is there appropriate equipment eg mat, table, bin, gloves etc available? • Is a step required/available to access table? • Are spare nappies/clothing available? • Any other considerations? 		
Staff Considerations	Yes √ No X	Notes
<ul style="list-style-type: none"> • How many members of staff are required? • Is moving and handling training required? • Are there considerations such as pregnancy, back pain, other? • Is any other training/information required? 		
Safeguarding Considerations	Yes √ No X	Notes
<ul style="list-style-type: none"> • Refer to Safeguarding Policy • If there are concerns liaise with the child protection officer based at the school 		

Appendix C

Individual Intimate Care Management Plan

Name of Pupil:		Date of Birth:	
Name of Parent/Carer:		Name of Key Staff:	
Name of School:		Year Group:	

Identified toileting/changing area	
Method of changing (e.g. standing or lying down)	<i>*If a pupil can weight bare it is health and RCT recommendation that the pupil be changed standing up</i>
Resources provided by the parent/carers <ul style="list-style-type: none"> • Nappies (including spares) • Pull ups • Pads • Wipes • Spare clothing • Cream (if required) 	
Resources provided by the school: e.g. antibacterial spray, disposable hygiene roll, bio-hazard bin liners, step, paper towel, hand wash, gloves, masks, aprons.	
Communication - can the pupil communicate that they need support with intimate care? How? What signs do staff need to look out for? How will staff communicate with the pupil that it is time to go to the toilet/changing room? Any code words to use/words to avoid?	

<p>Level of assistance needed:</p> <p>e.g. undressing, dressing, hand washing, washing, wiping, drying, application of cream, talking/signing to child/young person.</p>	
<p>Storage of soiled clothing</p>	
<p>Frequency/toileting pattern</p> <p>How often?</p> <p>e.g. how often in the morning/afternoon/timed intervals/agree the limited amount of times to support with intimate care per day.</p>	
<p>Method of recording/monitoring Personal Care</p>	
<p>Encouragement/Reassurance: e.g. how will staff positively encourage/reassure pupils whilst meeting their intimate care needs/ any rewards used?</p> <p>What the member of staff will do if the child or young person is unduly distressed?</p>	
<p>Procedures for recording/ reporting concerns</p>	
<p>Disposal arrangements</p>	
<p>Considerations for off-site visits</p>	
<p>Any other comments/ important information: e.g. medical information, pupils own views/preferences/specific names for body parts. (It is recommended that, where possible, proper names are used for body parts) Sensory information</p>	

Title of Policy: Intimate Care*I confirm that I have read and understood this policy.*

Name of staff member:	Job Role:	Date:	Signature:
Michelle Hutchings	Headteacher		
Kylie Thomas	FEO		
Susan Green	HLTA - PPA Teacher		
Sarah Ball	Teacher		
Lisa Lewis	HLTA – Nursery Manager		
Lisa Davis	Teacher		
Joanne Hanly	Teacher		
Louise Guy	Teacher		
Melissa Preece	Teacher, ALNCO & RSE Lead		
Owen Wrangham	Teacher & Deputy Headteacher		
Anwen Webber	Teacher		
Brooke Walters	LSA		
Alix Tasker	LSA		
Shelley Eskins	LSA		
Harriet Jenkins	LSA/Supply LSA		
Amanda Kinsey	LSA		
Jenna Gregson	LSA		
Vicki Hopkins	LSA		
Louise Richards	LSA		
Ashley Jones	SNSA		
Taylor Cross	LSA		