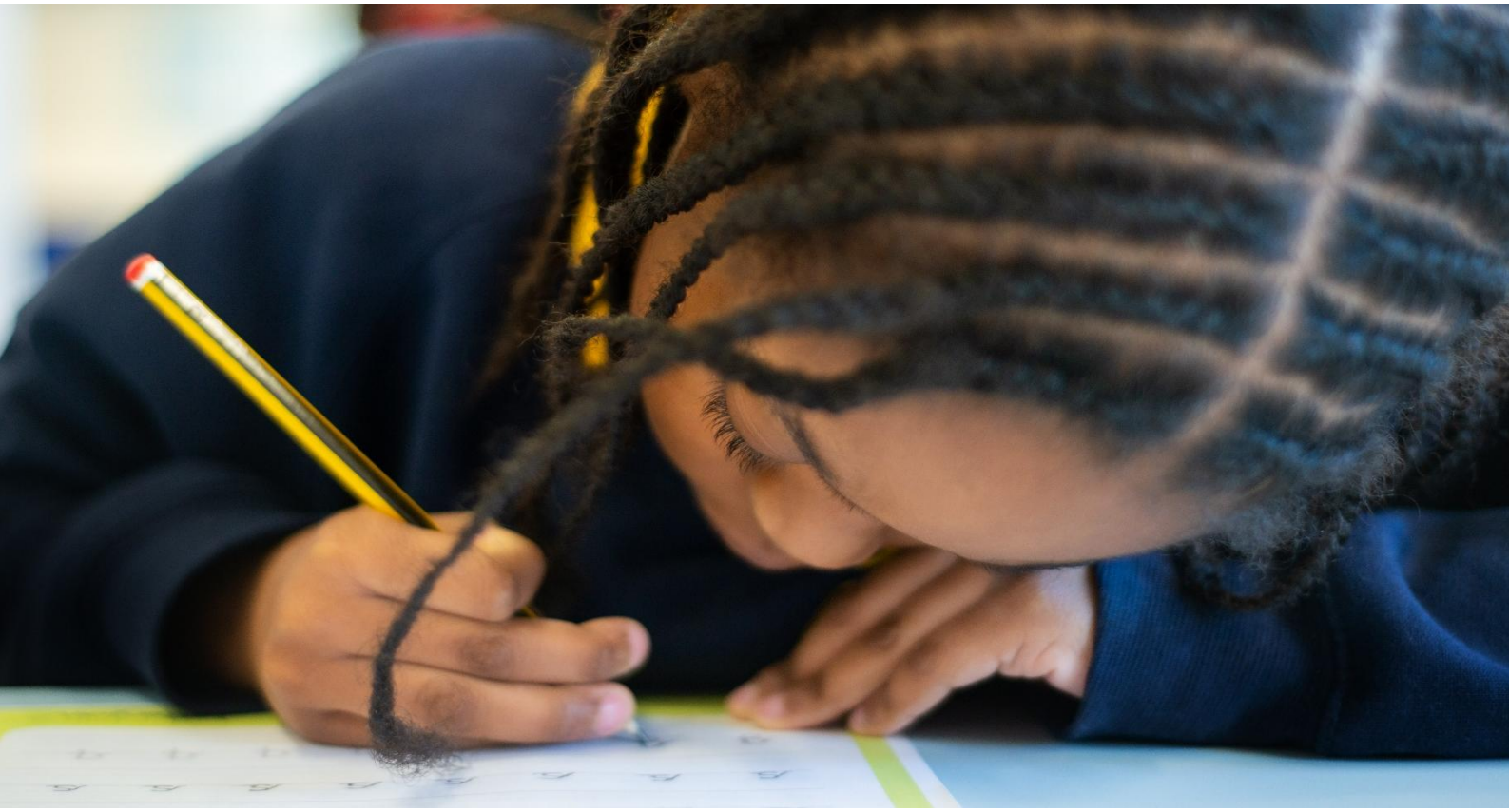
Laycock Primary School



Intimate Care and Toileting Policy

Approved by IEB:	Prudence Barnes-Kemp
Ratified and reviewed on:	March 2026
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1. Introduction

Laycock Primary School is committed to safeguarding and promoting the welfare of children and young people.

We are committed to ensuring that all staff responsible for intimate care of children and young people will undertake their duties in a professional manner at all times.

We are committed to ensuring that children are treated with sensitivity and respect.

2. What is 'intimate care'?

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do.

Intimate care tasks are associated with bodily functions, body products and personal hygiene that demands direct or indirect contact with, or exposure of the genitals. Examples include support with dressing and undressing (underwear), changing incontinence pads and nappies, helping someone use the toilet or washing intimate parts of the body, cleaning a pupil who has soiled him/herself or vomited. It is also associated with other accidents that may require a child to remove their clothes. These include changes required as a result of water play, messy play, sickness and weather. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

3. Role of parents/carers

Parents/carers of children with SEND should give permission for intimate care as children enter Early Years Foundation Stage (EYFS). See Appendix 1.The permission slips are kept on record.

Where a child has continuing incontinence problems (including children beyond EYFS), parents are expected to provide a complete set of spare clothes and 'baby-wipes'. The school also keeps a stock of spare clothes in various sizes.

4. Role of Laycock Staff

It is generally expected that most children will be toilet trained and out of nappies before they begin at school or nursery. However it is inevitable that from time-to-time some children will have accidents that need to be attended to, as well as very young children (babies and toddlers) who are not yet toilet trained. In addition to this an increasing number of children and young people with disabilities and medical conditions are being included in mainstream settings. A significant number of these pupils require adult assistance for their personal and intimate care needs.

In order to help the children to become aware of their bodily needs and respond to them in time, those who wish to go to the toilet are always allowed to go, although they are encouraged as they progress through the school to use the toilet during break times. The school undertakes to attempt any support and training programme requested by a child's GP and/or the school doctor or parent.

Where a child has continuing incontinence problems (i.e. past EYFS) parents are expected to continue to provide a complete set of spare clothes and 'baby-wipes'. The school also keeps a limited stock of spare clothes in various sizes.

EYFS staff have access to a bathroom area with a toilet and hand basin with access to warm water. There is also a stock of baby wipes, plastic bags and disposable protective gloves for staff to use, which they must do. If a child soils themselves during school time, a member of the Early Years staff (teacher, Nursery Nurse, EY practitioner, lunchtime supervisor) will help the child:

- To remove their soiled clothes;
- Clean skin (this usually includes bottom, genitalia, legs, feet);
- Dress in the child's own clothes or those provided by the school;
- Double wrap soiled clothes in plastic bags and give to parents to take home.

At all times the member of staff pays attention to the level of distress and comfort of the child. If the child is ill the member of staff telephones the parent/carer.

Our intention is that the child will never be left in soiled clothing, but as soon as the member of staff responsible for him/her is aware of the situation, she/he will clean the child. The member of staff responsible will check the child regularly and to ensure that he/she is clean before leaving to go home. The latter is because the school washing facilities are not accessible to parents.

It is intended that the child will not experience any negative disciplining, but only positive encouragement and praise for his/her endeavours to master this necessary skill. It is always our intention to avoid drawing attention to such events and positively to encourage the child in his/her efforts to gain these skills.

5. Our approach to best practice for intimate care needs over and above accidents

- The management of all children with intimate care needs will be carefully planned.
- Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.
- There is careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.
- Staff will be supported to adapt their practice in relation to the needs of individual children taking 3 into account developmental changes such as the onset of puberty and menstruation.
- Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities.
- Individual care plans will be drawn up for any pupil requiring regular intimate care. See Appendix 2.
- Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible one pupil will be cared for by one adult unless there is a sound reason for having more adults present. In such a case, the reasons will be documented.
- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan.
- The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation.

● Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day.
● This information should be treated as confidential and communicated in person, via telephone or by sealed letter.

6. Child Protection

- Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.
- All members of staff carrying out intimate care procedures are DBS checked. Students should only do so under the supervision of a trained member of staff. It is not appropriate for volunteers to carry out intimate care procedures.
- If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) they will immediately report concerns to the Designated Safeguarding Lead (DSL).
- If a child is hurt accidentally or there is an issue when carrying out the procedure, the staff member will report the incident immediately to the DSL.
- If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.
- Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.
- If a child makes an allegation against a member of staff, the responsibility for intimate care of that child will be given to another member of staff as quickly as possible and the allegation will be investigated according to the school's safeguarding procedures.
- Where the school notices an increasing pattern of soiling instances, it will first hold a meeting with parents/carers and with any other relevant individuals, such as medical professionals involved with the child to discuss why this might be occurring, and how to help the child. If the pattern continues, the school's designated safeguarding lead (DSL) will be notified. If there is other evidence which indicates a safeguarding concern, the DSL may contact the local authority designated officer (LADO), who will consider whether there is a safeguarding issue.
- Cameras and mobile phones are never taken into the bathroom area.
- Where possible, staff should care for a child of the same gender.

7. Disabilities

The Governing Body recognises its duties and responsibilities in relation to the Disability Discrimination Act which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

Appendix 1 – Consent Proforma

If a child with SEND needs wets or soils themselves whilst they are in school, it is important that measures are taken to have them changed and if necessary, cleaned as quickly as possible. Our staff are experienced at carrying out this task if you wish them to do so or, if preferred, the school can contact you or your emergency contact who will be asked to attend without delay.

Laycock Primary School has an Intimate Care Policy which is available to view on our website or a copy can be obtained from the school office. Please fill out the permission slip below stating your preference.
Yours sincerely
Fred Hall Head of School

Permission form for Intimate Care

Name of Child..... **Class**.....

Please tick as appropriate:
□ I give consent for my child to be changed and cleaned if they wet/soil themselves whilst in the care of Laycock Primary School.

□ I do not give consent for my child to be changed and cleaned if they wet or soil themselves.

The school will contact me or my emergency contact and I will organise for my child to be cleaned and changed.

I understand that in the event that I or my emergency contact cannot be contacted, the staff will act appropriately and may need to come into some level of physical contact in order to aid my child.

Signature of Parent/Carer..... **Date**.....

Appendix 2-Intimate Care Plan Template

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often care will be given	
What training staff will be given	
Where care will take place	
What resources and equipment will be used, and who will provide them	
How procedures will differ if taking place on a trip or outing	
Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan	
Name of parent or carer	
Relationship to child	
Signature of parent or carer	
Date	
CHILD	
How many members of staff would you like to help?	
Do you mind having a chat when you are being changed or washed?	
Signature of child	
Date	