



# INTIMATE AND PERSONAL CARE POLICY

**Academic years 2026-28**

|                              |                                                                             |
|------------------------------|-----------------------------------------------------------------------------|
| <b>School</b>                | Inkberrow Primary School                                                    |
| <b>Trust</b>                 | Quest Learning Trust                                                        |
| <b>Headteacher and DSL</b>   | Mr. Glenn Duggan-Seville                                                    |
| <b>SENCO</b>                 | Mr. Ryan Coy (Inclusion Lead)<br>Mr. Adam Lisseman-Burke (Assistant SENDCO) |
| <b>Approval body</b>         | Academy Standards Committee (ASC)                                           |
| <b>Date approved</b>         | September 2026                                                              |
| <b>Effective from</b>        | September 2026                                                              |
| <b>Next scheduled review</b> | September 2028                                                              |
| <b>Version Control</b>       | 2                                                                           |
| <b>Scope</b>                 | Reception to Year 6. The school does not operate a nursery.                 |

*Earlier review will take place if law or statutory guidance changes, or if practice, provision, an incident or learning from a complaint indicates that revision is needed.*

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**Parent-friendly summary:** The school will provide necessary intimate or personal care promptly, safely and respectfully while a pupil is in its care. A toileting or continence need will not by itself prevent admission, attendance, participation in a trip or access to education. Parents will be partners in planning, but will not normally be required to attend school to provide routine care.

## 1. Purpose, scope and status

Inkberrow Primary School is committed to safeguarding pupils and protecting their dignity, privacy, health, comfort and right to education. This policy explains how intimate and personal care will be planned and provided, who is responsible, how decisions will be recorded, and how concerns will be managed.

It applies from Reception to Year 6. Inkberrow Primary School does not operate a nursery. The Early Years Foundation Stage (EYFS) requirements therefore apply at this school to children in Reception. The policy applies to employees, agency staff, volunteers, students and contractors when acting on behalf of the school, and to school-led activities on and off site.

The policy should be read with the school's Child Protection and Safeguarding Policy, Staff Code of Conduct, Supporting Pupils with Medical Conditions Policy, SEND Policy and Information Report, Accessibility Plan, Health and Safety Policy, Educational Visits Policy, Attendance Policy, Complaints Policy and data-protection arrangements.

This document reflects requirements and guidance in force in England on 7 September 2026. It does not replace individual clinical advice, an Education, Health and Care (EHC) plan or an individual healthcare plan.

## 2. Definitions

| Term                                 | Meaning in this policy                                                                                                                                                                                                           |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Intimate care</b>                 | Care involving washing or touching intimate areas, changing continence products or clothing after soiling, support with menstruation, or assistance with toileting that is more than verbal prompting.                           |
| <b>Personal care</b>                 | Support with washing, dressing, appearance, eating or drinking, mobility or hygiene that may not involve intimate areas.                                                                                                         |
| <b>Clinical or medical procedure</b> | A procedure undertaken on health grounds, such as catheter, stoma or gastrostomy care, which requires an individual healthcare plan, appropriate training and, where applicable, delegation by a registered health professional. |
| <b>Planned care</b>                  | Regular or predictable support recorded in an agreed care plan and, where relevant, an individual healthcare plan or EHC plan.                                                                                                   |
| <b>Unplanned care</b>                | Prompt support following an unexpected toileting accident, illness, spill, menstruation need or similar event.                                                                                                                   |

## 3. Legal and statutory framework

The Trust, Achievement and Standards Committee (ASC) and school will comply with applicable duties and have regard to current statutory guidance. The principal framework includes:

| Requirement                                        | Relevance                                                                                                                                    |
|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Children Acts 1989 and 2004</b>                 | The welfare and safeguarding of children, including co-operation and action where a child may be at risk.                                    |
| <b>Education Act 1996</b>                          | Access to suitable education and the legal framework for special educational needs.                                                          |
| <b>Children and Families Act 2014</b>              | SEND duties and, under section 100, arrangements to support pupils with medical conditions.                                                  |
| <b>Equality Act 2010</b>                           | No unlawful discrimination; anticipatory and individual reasonable adjustments; accessibility planning; and the Public Sector Equality Duty. |
| <b>Human Rights Act 1998</b>                       | Respect for dignity, bodily integrity and private life, balanced with safeguarding and welfare duties.                                       |
| <b>Health and Safety at Work etc. Act 1974</b>     | Safe systems of work for pupils, staff and others affected by school activities.                                                             |
| <b>Manual Handling Operations Regulations 1992</b> | Avoiding hazardous handling where reasonably practicable and assessing/reducing risk where handling is necessary.                            |

| Requirement                                                    | Relevance                                                                                                    |
|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <b>COSHH Regulations 2002 and PPE at Work Regulations 2022</b> | Assessment and control of exposure to hazardous substances and suitable protective equipment where required. |
| <b>UK GDPR and Data Protection Act 2018</b>                    | Lawful, fair, proportionate and secure handling of health, SEND and safeguarding information.                |

The school also follows the EYFS statutory framework for Reception; Keeping Children Safe in Education 2026; the SEND Code of Practice: 0 to 25 years; Supporting Pupils at School with Medical Conditions; and current UK Health Security Agency infection-prevention guidance for education settings.

**Equality and attendance:** A pupil must not be excluded from normal attendance or an activity merely because they are not toilet trained, use continence products, need assistance or require a reasonable adjustment. Any decision to send a pupil home must be based on illness, injury, an emergency or a genuine inability to provide safe care at that time—not on convenience, staffing preference or a blanket rule.

#### 4. Rights, dignity and participation

- Care will be necessary, proportionate, as private as possible and the least intrusive support that safely meets the pupil's needs.
- Staff will use the pupil's preferred communication, explain each step, seek agreement or assent and encourage independence without withholding help.
- A pupil will never be blamed, shamed, punished, teased or discussed where others can hear. Staff will use respectful language and preserve modesty.
- The pupil's views, communication, culture, religion and reasonable sex or gender preferences will inform planning. A preferred member of staff cannot always be guaranteed where delay would compromise safety or welfare.
- Staff will not force care. If a pupil resists or becomes distressed, they will pause where safe, reassure, offer choices and seek senior or parental advice. Immediate protective action is limited to what is necessary to prevent serious harm or respond to an emergency.
- No photographs, video or audio recordings will be made during care. Personal phones and devices must never be used in the care area.

#### 5. When the school is responsible

Responsibility follows supervision and handover. The table below clarifies the usual position; written individual or provider arrangements may add detail but must not remove the school's statutory safeguarding, equality or medical-support duties.

| Context                                          | Responsibility                                                                                                                                                       |
|--------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Normal school day</b>                         | The school is responsible once the pupil has been accepted into staff supervision and until the pupil is handed to an authorised adult or agreed transport provider. |
| <b>School-run breakfast or after-school club</b> | The school is responsible while the pupil is in the club's supervision. The care plan and necessary trained staffing must cover the extended day.                    |

| Context                                                     | Responsibility                                                                                                                                                                                                                                  |
|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>School-led trip, sport, Forest School or residential</b> | The school remains responsible. Planning must address staffing, privacy, accessible facilities, supplies, travel, overnight care and emergencies so the pupil can participate wherever reasonably possible.                                     |
| <b>Activity commissioned or arranged by the school</b>      | The provider may deliver immediate care under written arrangements. The school must assure itself that arrangements are safe and lawful, share necessary information securely, clarify who does what, and monitor safeguarding and suitability. |
| <b>Independent club or organisation hiring the premises</b> | The independent provider is ordinarily responsible during its session under its own policies. The school will clarify handover and premises arrangements and share information only with a lawful basis and where necessary.                    |
| <b>Home-to-school journey</b>                               | Parents/carers or the local authority transport provider are ordinarily responsible until handover to school and after handover back. The school will co-operate on an agreed journey care or emergency plan where needed.                      |
| <b>Emergency</b>                                            | The school will act within staff competence, give first aid or emergency support, call 999 where necessary and contact parents promptly. Urgent care will not be delayed solely because a parent cannot be reached.                             |

## 6. Planning for regular or complex care

A written Intimate and Personal Care Plan will be agreed where care is regular, predictable, complex, involves manual handling or equipment, or presents a safeguarding or health risk. It may form part of an individual healthcare plan, SEND support plan or EHC-plan provision. The Headteacher will ensure that temporary arrangements are safe while information or specialist advice is obtained.

Planning will involve the pupil, parents/carers, SENCO or appropriate leader, staff who provide care and health professionals where clinical advice is required. A diagnosis is not required before reasonable support is put in place.

- the pupil's communication, preferences, strengths, independence and signs of distress;
- the exact tasks and the level of help required, including how assent and refusal will be managed;
- named or designated trained staff and whether a second adult must be present or nearby;
- privacy, location, equipment, continence products, clothing, disposal and cleaning;
- manual-handling and individual risk assessment where lifting, transfers or mobility support may be required;
- skin integrity, pain, constipation, infection or other health signs and when clinical advice is needed;
- arrangements for lessons, extended day, trips, residentials, evacuation and unexpected staff absence;
- recording, parental communication, emergency action and review dates.

Plans will be available to staff who need them and reviewed at least annually, and sooner after an incident, change in need, new clinical advice, pupil or parent request, transition or concern about effectiveness. Parents must tell the school promptly about relevant changes. Lack of a returned signature will not prevent the school taking proportionate action to meet a known need or safeguard a child.

## 7. Safe working and staffing

Care will be provided by suitable staff who understand this policy, safeguarding expectations, the pupil's plan and safe hygiene practice. Enhanced DBS and safer-recruitment requirements apply in accordance with the role and current law. Volunteers and students will not provide intimate care unless this is expressly authorised, necessary, risk assessed and supervised under agreed arrangements.

### 7.1 One adult or two?

There is no blanket requirement for two adults to be present. Routine care may normally be provided by one trained member of staff, with another adult aware and available nearby. This supports privacy and avoids unnecessary exposure. Two staff will be used where the individual plan or risk assessment requires it - for example because of a transfer or manual-handling need, a complex clinical task, known distress or unpredictable movement, a safeguarding concern, or a specific professional recommendation. Staffing decisions must protect both the pupil and staff without compromising dignity.

- The care area must offer privacy but must not be locked in a way that prevents assistance or emergency access.
- Another adult should know that care is taking place and how help can be summoned. Staff must not leave a pupil unattended on a changing surface.
- Only the minimum clothing necessary will be removed. The pupil will be covered and encouraged to do as much as they can for themselves.
- Where lifting or transfer is required, only trained staff will use the assessed technique and equipment. Staff must not improvise unsafe handling.
- If the usual staff member is absent, the Headteacher will arrange a suitable trained replacement or a safe interim plan. Routine care must not depend on a parent attending during the school day.

## 8. Toileting, continence and menstruation

### 8.1 Reception

Children enter Reception with different developmental, health and continence needs. The school will work with families before entry and during transition, encourage independence and provide reasonable assistance. Being in nappies or continence products, or not yet being reliably toilet trained, is not by itself a reason to delay admission, restrict hours or send a child home.

### 8.2 Accidents and soiling

For an unexpected accident, staff will respond promptly, offer privacy, use the child's spare clothing and provide the minimum assistance needed. If supplies are unavailable, the school will use suitable emergency stock where held and ask parents to replenish items. A parent will be informed on the same day in a proportionate and discreet way.

Heavy soiling does not automatically require collection. Staff will provide safe care where they can do so within facilities, training and the pupil's plan. A senior leader may ask a parent to collect only where the pupil is ill or injured, needs medical assessment, or safe and dignified care is genuinely not possible at that time despite reasonable steps. The reason and decision will be recorded, and recurring difficulties will trigger a plan review rather than repeated informal exclusion.

### 8.3 Menstruation

Pupils who menstruate will have discreet access to products, toilets, spare clothing and appropriate help without stigma. Individual support will be planned where disability, communication, sensory or medical needs affect menstrual care. Staff will record and escalate unexplained bleeding, significant pain or a safeguarding concern in the usual way.

## 9. Medical and clinical procedures

Where intimate care is also a medical procedure, the school's Supporting Pupils with Medical Conditions Policy applies. An individual healthcare plan will set out the procedure, consent, training, competence, equipment, infection-control measures, emergency action, records and clinical contacts.

- Catheter, stoma, gastrostomy or other specialist care will be undertaken only by staff trained and assessed as competent for that pupil and procedure.
- Clinical tasks will be delegated only where appropriate by a registered health professional, with written instructions and ongoing support as required.
- Staff will act only within their training and competence. If a safe procedure cannot be completed, they will keep the pupil safe, seek senior and clinical advice, contact parents and call emergency services where indicated.
- Medication, including any rescue or rectal medication, will be managed under the medical-conditions and medicines arrangements, not improvised under this policy.

## 10. Infection prevention, equipment and waste

- Staff and pupils will wash and dry hands at appropriate points. Gloves and a disposable apron will be used when contact with body fluids is anticipated; PPE does not replace hand hygiene.
- Changing surfaces and contaminated areas will be cleaned with approved products in line with product instructions and the school's infection-control arrangements. Cleaning chemicals will be stored and used safely.
- Soiled clothing will not normally be rinsed by staff. It will be sealed in a labelled bag for collection, unless a pupil's clinical plan requires another arrangement.
- Continence products and other waste will be disposed of in the designated waste system. Sharps or clinical waste will follow the relevant specialist procedure.
- Parents/carers will normally provide correctly sized continence products, wipes where individually required, spare clothing and prescribed equipment. The school will maintain proportionate emergency supplies and will not leave a pupil in discomfort because an item is missing.
- Blood or body-fluid exposure, injury, damaged equipment or a suspected infection-control incident will be reported immediately and managed under health and safety procedures.

## 11. Records, confidentiality and communication

Regular intimate care and any significant or unusual event will be recorded promptly using the care record or the approved school system. Routine verbal prompting or fully independent toilet use does not require an intimate-care record unless the plan states otherwise.

- Record facts: date, time, care given, staff involved, pupil response, concerns, action taken and how/when the parent was informed. Avoid judgemental language.
- Record and report any injury, pain, unexplained mark, bleeding, significant change in continence, repeated distress or disclosure. Use a body map only under the school's safeguarding/first-aid procedure; never take a photograph on a personal device.
- Health, SEND and safeguarding information will be accessed only by those who need it, stored securely, shared lawfully and retained under the Trust's records-retention schedule.
- Parents will receive useful same-day information about significant accidents, concerns or changes. The school may agree a proportionate communication method for frequent routine care so the pupil's privacy is respected.
- Safeguarding information may be shared without consent where necessary and lawful to protect a child. The DSL will guide such decisions.

## 12. Safeguarding and concerns about practice

Intimate care places pupils and staff in a position of particular trust. All staff must follow Keeping Children Safe in Education 2026, the school's safeguarding policy and staff code of conduct.

| Situation                                   | Required action                                                                                                                                                                                                             |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Concern about a pupil</b>                | Listen, do not promise confidentiality or investigate, record the pupil's words and facts, and report immediately to the DSL or deputy DSL. If a child is in immediate danger, call 999 and follow safeguarding procedures. |
| <b>Disclosure during care</b>               | Keep the pupil safe, remain calm, preserve evidence where relevant, make an accurate record and refer to the DSL without delay.                                                                                             |
| <b>Concern or allegation about an adult</b> | Report immediately through the school's allegations or low-level-concerns procedure. Concerns about the Headteacher must be reported to the Chair of the ASC/Trust route. Do not investigate personally.                    |
| <b>Unsafe or poor practice</b>              | Stop the activity if safe to do so, protect the pupil, summon help, report to a senior leader and record the facts. Whistleblowing routes remain available.                                                                 |

A pupil's disability, communication difference or intimate-care need must never be used to explain away a sign of abuse. Equally, an accidental or clinically explained mark must be recorded accurately so that decisions are evidence based.

## 13. Trips, residentials, clubs and external providers

Intimate-care needs will be considered at the earliest stage of planning. The pupil and parents will be involved discreetly. The school will make reasonable adjustments and will not remove a pupil from an activity merely because care requires planning.

- The trip risk assessment will cover accessible toilets/changing, travel times, privacy, disposal, spare supplies, medication, staff competence, emergency action and contingency arrangements.
- For residentials, the plan will address overnight care, sleeping arrangements, personal boundaries, washing, menstruation, storage and disposal, emergency contact and staff rest/cover.
- Provider checks will confirm responsibilities, suitable facilities, safeguarding arrangements and staff competence before the activity. Necessary information will be shared securely and no more widely than needed.
- If an external provider cannot meet a need, the school will explore reasonable alternatives or adjustments and document its decision. Cost or inconvenience alone will not determine exclusion from the activity.

## 14. Roles and responsibilities

| Who                                 | Responsibility                                                                                                                                                                                                                      |
|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Quest Learning Trust and ASC</b> | Approve and oversee the policy; assure legal compliance, suitable facilities, staffing, training and resources; scrutinise themes, incidents and complaints without receiving unnecessary personal data.                            |
| <b>Headteacher</b>                  | Has overall operational responsibility; ensures plans, staffing, training, facilities, risk assessments and provider arrangements are adequate; makes and records exceptional decisions about collection or temporary arrangements. |
| <b>Designated Safeguarding Lead</b> | Advises on safeguarding, information sharing, disclosures, allegations and low-level concerns; ensures safeguarding records and referrals follow current procedures.                                                                |
| <b>SENCO</b>                        | Co-ordinates links with SEND provision, EHC plans, reasonable adjustments and transition; supports pupil-centred planning and liaison with professionals.                                                                           |
| <b>Class teacher/key adult</b>      | Knows the relevant plan, promotes independence, identifies changes and ensures learning and participation are not unnecessarily interrupted.                                                                                        |
| <b>Staff providing care</b>         | Follow the plan and safe-working arrangements; protect dignity; work within competence; record care; report changes, incidents and concerns immediately.                                                                            |
| <b>Parents/carers</b>               | Share accurate information and changes, participate in planning, provide agreed personal supplies and emergency contacts, and raise concerns promptly. They are not expected to provide routine care during the school day.         |
| <b>Pupil</b>                        | Is involved at a level appropriate to age, understanding and communication; expresses preferences and concerns; develops independence where possible. Responsibility for safe provision remains with adults.                        |

## 15. Complaints, monitoring and review

Parents should raise day-to-day concerns with the class teacher or Headteacher. A formal complaint may be made under the school's Complaints Policy. Safeguarding concerns must be reported immediately and will not wait for the complaints process. Information about disability discrimination claims and SEND disagreement routes is available through the school's SEND Information Report and Worcestershire SEND Local Offer.

The Headteacher will monitor implementation, training, plans, accidents, recurring collection decisions, safeguarding themes, participation and complaints. Information reported to the Trust or ASC will be anonymised unless individual detail is lawfully required. Learning will be used to improve facilities, training and practice.

The next scheduled review is September 2028. The policy will be reviewed earlier if legislation or statutory guidance changes, responsibilities or provision change, or monitoring, an incident, complaint or safeguarding learning indicates that amendment is needed. The version and review date published on the school website must match the approved policy.

**Official guidance used**

- [Keeping Children Safe in Education 2026](#)
- [Supporting pupils with medical conditions at school](#)
- [SEND Code of Practice: 0 to 25 years](#)
- [EYFS statutory framework](#)
- [Equality Act 2010 guidance](#)
- [Data protection in schools](#)

## Appendix 1: Intimate and personal care plan

**Use:** Complete for regular, predictable, complex or risk-assessed care. Attach an individual healthcare plan, manual-handling assessment or professional protocol where applicable. Give the pupil a genuine voice and record how their communication and assent will be recognised.

| Field                                           | Agreed arrangement |
|-------------------------------------------------|--------------------|
| Pupil / class / date of birth                   |                    |
| Plan owner and named staff                      |                    |
| Parent/carers contacts                          |                    |
| Relevant diagnosis, SEND or health information  |                    |
| Pupil's communication, views and preferences    |                    |
| Tasks and level of assistance                   |                    |
| Independence goals and prompting                |                    |
| Privacy, location and how help is summoned      |                    |
| One/two staff decision and reasons              |                    |
| Equipment, supplies, PPE, cleaning and disposal |                    |
| Manual handling / transfer arrangements         |                    |
| Signs of distress, refusal and agreed response  |                    |
| Skin, pain, infection or clinical concerns      |                    |
| Emergency and absence contingency               |                    |
| Trips, clubs, residentials and transport        |                    |
| Recording and parent communication              |                    |
| Training/competence required and confirmed      |                    |
| Linked plans and professional advice            |                    |

| Field                                | Agreed arrangement |
|--------------------------------------|--------------------|
| Date agreed / next review            |                    |
| Pupil involvement recorded           |                    |
| Parent/carers contribution/signature |                    |
| School approval/signature            |                    |

## Appendix 2: Care record

Complete promptly for planned intimate care and any significant or unusual unplanned care. Use the approved secure school system where an electronic record is required.

| Record                                            | Details |
|---------------------------------------------------|---------|
| Pupil / class                                     |         |
| Date and time                                     |         |
| Location                                          |         |
| Reason / care provided                            |         |
| Level of assistance                               |         |
| Staff member                                      |         |
| Second adult, if required by plan/risk assessment |         |
| Pupil response / assent / distress                |         |
| Skin, injury, bleeding or health concern          |         |
| Clothing/products/equipment used                  |         |
| Action or escalation                              |         |
| Parent/carer informed: who, when and how          |         |
| Record completed by                               |         |

**Safeguarding:** A care record does not replace a safeguarding, accident, first-aid, medication or body-map record where one is required. Report concerns immediately through the correct procedure.