

# **Intimate and Personal Care Policy**

## **Best Practice Guidelines**

**May 2022**

### **Introduction**

This Intimate and Personal Care Policy has been developed by the Principal, Teachers, Special Needs Assistants (SNA), Nurses and Housekeeping staff of the school. It was discussed with the multi-disciplinary team working with the school and was ratified by the Board of Management. It will ensure that the needs and rights of students and staff are maintained and that the highest standards of best practice are ensured at all times in the area of intimate and personal care assistance. The level of assistance required will reflect the needs of each individual student at any given time.

The Board of Management of St. Michael's House SNS is committed to taking every precaution necessary to protect students and staff from any form of abuse and harm. This policy is in accordance with the ethos and value of our school and is in accordance with Child Safeguarding Procedures and DES Guidelines.

This document should be read in conjunction with the following documents:

- Our Child Protection Policy
- Our Code of Behaviour
- Children First Guidelines
- DES Guidelines-Child Protection
- Mobile Phone Policy

### **Rational**

This policy has been developed bearing in mind that all physical contact between staff and students:

- should be aimed at meeting the needs of the students
- should respect the dignity of each student
- should be consistent with the professional integrity of staff members.

### **Relationships to Characteristic Spirit of the School**

Our Intimate Care Policy and all procedures/guidelines relating to it reinforce the sentiments of our Mission Statement:

In our school, each person is cherished as an individual. Each student's abilities, needs and potential are recognised and nurtured. The teachers, staff and multidisciplinary clinical teams provide a challenging, sensitive and caring environment, which fosters personal, social and academic development, independence and achievement.

They are conscious of the increased vulnerability of our students due to their additional needs. This may be due to:

- Limited communication skills
- Limited sense of danger
- Need for intimate care such as washing and toileting
- Reliance on adults for many of their needs
- Limited understanding of sexuality or sexual behaviour
- Limited understanding of keeping themselves private in social settings.
- Close working with students, such as hand over hand, physical prompting, hand holding etc.
- Medical related procedures (e.g. tracheotomy, PEG feeding, etc).
- Support prior to, during and following swimming/other sporting activities etc.

### **Aims**

The aims of this policy are to ensure that:

- The dignity and welfare of students and staff is respected and maintained
- The rights of students and staff are protected
- Best practice is promoted throughout the school within the framework of the current policy
- All staff will be made aware of the standards expected of them and are responsible for ensuring this policy is adhered to.

### **Definition of Intimate Care**

Intimate care is defined as care tasks of an intimate nature, associated with body functions, body products, medication and personal hygiene which needs direct contact with or exposure to the body.

### **School Staff**

Intimate care will be carried out only by regular school employees – new substitute staff should be supported by regular staff when engaging with intimate care. All students on placement are not involved in the intimate care of pupils, with the exception of nursing students (who work under the guidance of the CNM1 at the school). All staff at the school has a duty of care to all children. The menstruation care needs, toileting and dressing of female students will be attended to by female staff.

**Teachers** have responsibility, with the principal, for the learning and care of all students. Apart from their own duty of care, they oversee and direct other staff in supporting the care of students, at a class level. Outside of class, teachers are responsible, with the principal, for the learning and care of all students and they oversee and direct other staff in supporting the care of students. Given the high support needs of most of our students, much of the work of the teacher can be considered as 'intimate' in nature.

**SNAs** play a key role in the primary and secondary care of students with high support needs. In general terms the SNA acts in a care and support role that is non-teaching in nature and works under the guidance and supervision of the Principal and/or class teacher. The role and duties of the SNA are also outlined DES Circular 0030/2014 (SESS). Much of the work of the SNA can be considered as 'intimate' in nature.

**Nursing Staff**

Nursing Staff play a key role in providing additional support to students particularly in relation to medical need. Much of the work of the Nurse can be considered as 'intimate' in nature.

**Bus Escorts**

Much of the work of the bus escort can be considered as 'intimate' in nature e.g. supporting on transport, fastening seatbelts/harnesses, physical prompting, etc.

**Practice in Intimate Care and Personal Care**

The Board of Management will make every effort to ensure that all staff are trained and supported in the area of intimate care. Staffs at St Michael's House SNS are expected to familiarise themselves with the Intimate and Personal Care Policy and be aware of the standards expected of them. The staff will establish good working practices regarding physical transfer (manual handling) and wearing of protective clothing (mask, visor, apron, gloves). Staff will social distance where possible and ensure safe practice in relation to procedures carried out. Equipment will be disposed of and staff will wipe down and disinfect the changing area after use. Where possible, events requiring intimate care assistance will be identified in advance. Should an emergency arise where assistance is required and/or where surroundings are less than ideal, the principles of privacy and dignity will be respected.

An Intimate Care Plan will be in place for each pupil by 31<sup>st</sup> October each year. Intimate care plans are devised jointly by parent/guardian with class teacher. Parents/guardians have a responsibility to advise the school of any intimate care needs of their child and all staff has a responsibility to work in partnership with them. Parents/guardians are asked to supply wipes, nappy sacks (where appropriate), a change of clothing and/or undergarments should intimate care be required on a regular basis.

Should a parent/guardian request that school staff does not undertake an aspect of intimate care on behalf of their child, this request must be in writing and will be respected. In this event, where intimate care is required, the parent/guardian will be contacted and asked to come to the school to attend to their child's particular need. Staffing levels should be reviewed with the relevant staff and parents as the need arises during the course of the school year.

Students aged 18 years and over have the right to be consulted about and signatory to their own intimate care plan

If a staff member is required to go into the cubicle/ changing area with a student a second staff to be made aware that the staff member is toileting/showering a pupil and may discreetly check on staff and pupil at any time (ref No.2 **Toileting Programmes**).

Two staff will provide intimate care assistance and when using a hoist.

All staff members are expected to:

- Encourage the student towards independence.
- Have a knowledge and understanding of any religious or cultural sensitivity related to aspects of intimate care for each student in their class.
- Explain what is happening in a straightforward and reassuring way. In this way, the student is prepared for and can anticipate your assistance. Initially, approach the student from the front, make eye contact and use their name.
- Be careful that in intimate care, the touch should be affirmative and supportive, not rough or insensitive.
- Use visual cues such as pointing to a prompt, use a picture schedule or board or any other appropriate aid to signal intention to wash or change (where necessary).
- Use discreet observation to monitor changing needs, for example in the case of a nappy or sanitary pad.
- Staff should ensure students can use toilet facilities without delay.
- Change or toilet students, one at a time. Ensure supplies of fresh clothes are to hand so that the student is not left unattended while items are found.
- Access protective gloves and ensure that they are used where necessary.
- Take special precautions when disposing of soiled materials.
- Check in advance, where possible, that suitable facilities exist for intimate care procedures when on school trips, etc.
- Never carry out an intimate care procedure unless the staff member knows how to carry it out correctly. If in doubt, staff will seek help or advice before commencing.
- Do not allow a student assist another student with his/ her intimate care needs.
- Intimate care procedures will be carried out in a manner which treats the student in a dignified and respectful way and allows the student the maximum level of privacy.
- Intimate care procedures must not be undertaken if a student is presenting with challenging behaviours. Staff should follow individual behaviour management strategies/programmes in this instance.
- Where possible, male staff will provide intimate care support to male students and female staff will provide intimate care support to female students. However, within current resources staff of either gender may be required as part of their duties to attend to the intimate care needs of students both male and female.
- Staff will not bring mobile phones to the toilet area

## **1. Toileting Training**

As children learn to use the toilet at different stages, the school's approach to toilet training will be parent-led and individual to each student. Parents are expected to provide changes of clothes when a child is being toilet trained and also for any child prone to accidents.

## **2. Toileting Programmes**

Students are encouraged to be as independent as possible around toileting needs. This may include requesting to use the toilet when required or independently entering the toilet when needed. At times, it may be necessary to implement a toileting programme for a student (where students are prompted to use the toilet at certain times throughout the day). This will include hygienic practices of washing hands after going to the toilet. As much as possible, the student is given the utmost privacy and is prompted using visual cues to attend to their toileting themselves. In some cases, the student may require assistance following urination or a bowel movement. The school's toileting facilities will at all times afford our students

privacy and safety. Where it is necessary for a student to be assisted in or following use of the toilet in school, they will be assisted by staff members. A staff member will never close over or lock themselves in a cubicle with a student. Where a staff member accompanies a student to the toilet the staff member should make it clear to another member of staff that they are accompanying that student to the toilet. The second staff member should be available if additional assistance is required and may discreetly check on staff and pupil at any time.

### **3. Touch/ Massage**

Massage/deep pressure may be included as part of a child's sensory schedule or on the guidance of a qualified Occupational Therapist. When using massage, staff must recognise the student's vulnerability. Approaching a person through touch in this way will be done within a relationship of trust built up gradually with staff who know the student well and who can sensitively interpret and respond to the student's reactions. Massage must be discontinued at the first indication of the student's wishes to do so.

### **4. Sexual Aspects of Intimate Care**

As part of normal development, interest in one's own body and other people's bodies may be evident. If a student shows signs of becoming sexually aroused during an intimate care procedure, staff must report this matter to class teacher. In such a case, individual guidelines will be drawn up by the relevant personnel. As a general guideline, physical contact will not be undertaken while someone is sexually aroused.

### **5. Inappropriate Sexualised Behaviours**

It may be more challenging for students with Autism or an Intellectual Disability to learn when it is appropriate to touch private body parts.

If a student is displaying inappropriate sexualised behaviours, and no child protection issues are raised or noted, the student will be redirected to an appropriate task or activity. In all instances of inappropriate sexualised behaviours this should be brought to the class teacher's attention as soon as possible. If the inappropriate behaviour continues, an intervention programme, aimed at decreasing the behaviour, will be devised.

### **6. Menstruation**

In consultation with parents, a student may require instruction, visual or verbal prompts, or assistance to cope with the practical aspects of menstruation. Such assistance should always be provided by a female member of staff. Staff will not be involved in any way in the use by students of internal sanitary protection.

### **Reporting**

If during the provision of intimate care assistance

- A staff member accidentally hurts a student
- The student seems unusually sore, tender or bruised in any area of the body
- The student appears to misunderstand or misinterpret what is said or done
- The student has a very emotional reaction without apparent cause.

The staff member(s) involved in the intimate and personal care assistance should **immediately** report any such incident to the class teacher and other class staff member. The incident should also be reported **as soon as possible** to the Principal. Parents will be contacted. An Incident Report will be completed as appropriate. National Child Protection Procedures for Primary Schools and school's Child Safeguarding Statement will be followed at all times. Concerns should be reported to the DLP or the DDLP in the event of the DLP absence.

From a child protection perspective both the pupil and the staff members can be considered to be at exposed risk; accepting this creates awareness and safety can be maintained.

Staff should be careful not to leave themselves open to the possibility of allegation and ensure that actions, comments or remarks cannot be misinterpreted.

Staff should always keep a record of intimate/personal care assistance provided (Appendix 2)

### **Parent/Guardian Consent**

All Parents/Guardians will be given a copy of the Intimate and Personal Care Policy. Parental/Guardian concerns or suggestions regarding the Intimate and Personal Care needs of their child will be addressed on enrolment, at the beginning of each school year or on review of this policy. Parents/Guardians will complete and sign the school consent form

(Appendix 1).

### **Policy Review**

The policy will be reviewed annually to ensure compliance with statutory requirements.

Ratified by the Board of Management on \_\_\_\_\_

Chairperson \_\_\_\_\_

# INTIMATE CARE FORM

## Appendix 1

### Parent /Guardian Consent Form

Date

Dear Parent/Guardian

In keeping with our Intimate Care and Personal Care Policy, intimate care support will be provided by staff to \_\_\_\_\_ as agreed below.

Type of Care	Assistance	Supervision
Dressing/undressing		
Toileting		
Menstrual care		
Additional Personal Care		

If you have any concerns in relation to this support your child's class teacher will be happy to talk to you.

Please sign below and return this page to your child's class teacher. A copy will be sent back out to you.

I give my consent for my child \_\_\_\_\_ to be provided with Intimate Care and Personal Care support as needed during the school day.

Signature: Parent/ Guardian.....

Signature: Class Teacher.....

Signature: Principal.....

Date.....

