

Intimate and Personal Care Policy

Introduction

This Intimate and Personal Care Policy has been developed by the staff of Danu Community Special School (CSS) in consultation with the relevant stakeholders to 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 Danu CSS 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 Patron Body, DDLETB, and is in accordance with Child Safeguarding Procedures and DES Guidelines. 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.

Danu CSS is 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.

Aims

The aim of this policy is 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.
- we acknowledge cultural and religious issues with regard to intimate care

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 or indirect contact with or exposure to the body.

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. Hoist training will be provided if this is necessary. Staff at Danu CSS 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), wearing of protective clothing (e.g., gloves) and ensure safe practice in relation to procedures carried out. 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.

Levels of staffing for the provision of intimate and personal care assistance will be organised based on the individual needs of the students in each classroom. This will be agreed at the beginning of the school year between the principal, staff involved with the students, parents and where appropriate students. Staffing levels should be reviewed with the relevant staff and parents as the need arises during the course of the school year. Two staff will provide intimate care assistance and when using a hoist.

All staff members are expected to:

- Encourage the student towards independence.
- Get to know the students and gain an appreciation of his/ her moods, likes/ dislikes and verbal and non-verbal communication.
- 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.

- 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 such as wearing PPE when disposing of soiled materials. Use nappy and sanitary bins provided for 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 to 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.

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 using the toilet independently should do so. 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.

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.

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 22/3/22

Signed: Chairperson *Barbara W. Egan*

Principal Pat Doonan

Appendix 1

Parent /Guardian Intimate Care 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.

Please tick below necessary intimate care for your child.

Type of Care	Assistance	Supervision
Dressing/undressing		
Toileting		
Menstrual care		
Nail Cutting		
Sun Cream		

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.....

Appendix 2

Personal/Intimate Care Guidelines

By

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- *All students should be supported to manage their own personal care*
- *Each student will be supported to achieve the highest level of independence possible taking into account their age and ability*

Rationale: Why have an intimate policy in place?

- All students have the right to be treated with sensitivity, dignity, and respect. Students with Special Needs/general learning disabilities are more vulnerable in that they may not have the skills needed to seek those rights. Attending to personal care of the students should not cause embarrassment, distress or pain. They are entitled to consistency in how they experience care needs across settings. Therefore, those charged with their care must be sensitive to their needs at all times and in particular, when their needs involve personal /intimate care.
- To reassure parents that staff is knowledgeable of intimate care, and to involve them in planning the intimate care needs of their child.
- The staff who care for this group of students also have rights, and there is need to provide guidance and reassurance for them, to maintain the rights of both parties and to promote best practice

What is Personal/Intimate Care?

Any intimate care task that the student is unable to do independently

Personal care tasks include dressing, undressing, dental care, ear care, hair brushing, nail care, cream application (sun/eczema etc.)

Intimate care tasks are washing, bathing, toileting, changing incontinence pads and attending to menstrual needs.

Invasive care tasks are dealing with nasal gastric tubes, gastrostomy feeding, care of pegs, administration of rectal diazepam/suppositories.

What should be explored when developing guidelines?

- Staff guidelines may need to be developed for the following areas
 - Levels of staffing required for the provision of each element of care
 - Protocol if a member of staff has to carry out intimate care tasks on his/her own
 - Appropriate training in invasive care tasks/ use of equipment
 - Protocols on male/ female staff support of students
 - Protocols on Physical contact

- Agreement on the appropriate terminology for private parts of the body and functions to be used by staff.
- Procedures for staff when carrying out support of students
 - Maximising safety (water temp/ items missing)
 - Health and safety on intimate care (gloves/apron/disposal/towels/facecloth/)
 - Intimate care items
 - Where intimate care can occur
 - Masturbation
- Protocols on Student Welfare
 - Maximising independence
 - Choices (shower/bath- staff)
 - Maximising dignity (communication/ door open/close /knock, nakedness)
 - Intimate care and school outings
 - Avoidance of missing the same lesson all year due to medical/toileting routines
 - Food temperatures- students with sensory difficulties may not be aware of the temperature of food and drink
- Protocols on reporting
 - Physical changes in student skin (marks/bruises/soreness/cuts)
 - If student is accidentally hurt during intimate care
 - Distress shown with a staff member
 - Emotional reaction without apparent due cause.
- Individual Care Plan
 - Care plan needs to be read so that cultural/religious differences are understood and adhered to and to be aware of any medical conditions (diabetes, allergies etc.)

Communication regarding Intimate Care

Letter of Permission

Permission must be sought from the parent/carer before any form of Intimate Care can be undertaken. Only in emergency would staff undertake any aspect of intimate care that has not been agreed by parents and school. Parents would then be contacted immediately. All those staff working with the student should know that permission has been given before undertaking any Intimate Care. Permissions need to be updated as needs change.

Daily Home/School Communication

Intimate care arrangements should be discuss with each student's parent(s) or guardian(s) on a regular basis and decisions should be recorded. Using the home school communication system to pass information between the school and home is good practice. However, information concerning intimate care procedures should not be recorded in home/school books as it may contain confidential information that could be accessed by people other than the parent and

named staff member. Staff should have an understanding of parental and cultural preferences and communication should take account of these at all times. The daily communication book provides the means for organizing a time to talk about intimate care needs.

Communication of Sensitive Intimate Care information

Information on more sensitive issues of Intimate Care

- Should be communicated to relevant staff in a sensitive confidential manner
- Should be communicated to the parent by telephone, sealed letter or personal contact as appropriate.
- Continue to maintain confidentiality and dignity for the parent/carer

Staff Communication with the Student or Young Person

- Where a situation renders a student fully dependent, talk about what is going to be done and give choices where possible.
- Check your practice by asking the student or parent about any preferences while carrying out the intimate care.
- Appropriate use of language, signs, symbols, photographs or objects should be used as much as possible to keep the student informed of what is happening to him/her.
- Staff should work in a reassuring, supportive and focused manner with the student or young person when involved in intimate care

