



Intimate Care Policy for Special Needs Pupils

Rationale

SN Iorball Sionnaigh values a broad curriculum and co-curricular activities in order to foster a deeper sense of the whole person. Staff and pupils seek excellence, including academic achievement. Urbleshanny NS seeks to nourish the mind, body and soul through a varied academic curriculum, involvement in the arts, physical education and sporting activity, and a commitment to moral development and personal responsibility. *Urbleshanny NS Mission Statement*

In tandem with the spirit of the school's mission statement all students with intimate care needs will be treated with respect and their right to privacy upheld and actively promoted. To this end, Urbleshanny NS strives to maintain standards, develop a supportive professional environment and promote positive attitudes and behaviours based on student-centred care.

Definition of Intimate Care

Intimate care is defined as "care tasks associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the sexual parts of the body". In addition to this, intimate care may also include tasks such as: help with feeding, oral care and hair care. Guidance for Designated Centres, Intimate Care, HIQA 2014

Examples of intimate care tasks

1. Help with eating
2. Oral Care
3. Hair Care
4. Dressing and undressing
5. Assistance with toileting
6. Menstrual care
7. Changing soiled continence pads
8. Catheter or stoma care
9. Prompting to go to bathroom

10. Supervision of an student involved in intimate care

As SEN pupils may not always be capable of talking about their needs, all staff connected with the pupil should observe and spend time to get to know the children and how they can hide their worries and problems.

All staff should make themselves aware of the procedure for dealing with accusations of abuse and bullying.

The Key Principles of Intimate Care in our school

Every student with a disability must be treated as an individual when intimate care is being provided and that appropriate time is taken for intimate care. It should be provided as gently and sensitively as possible, while respecting their privacy and dignity at all times.

- Students should give their consent prior to the provision of intimate care.
- Students have a right to feel safe and secure.
- All students have the right to personal privacy.
- All students receiving intimate care should be respected and valued as students. Students should be listened to and their views taken into account. They should be treated courteously at all times and know who is looking after them.
- Students have a right to be treated with dignity and respect and a professional approach from staff when meeting their needs.
- Students have the right to information and support to enable them to make appropriate choices.
- All students have the right to be involved and consulted in their own intimate care to the best of their abilities.
- Students have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs.
- All students have the right to express their views on their own intimate care and to have such views taken into account.
- Students have the right to know how to complain and have their complaint dealt with.
- A student's student care plan should be designed to lead to independence.

Child Protection

People with disabilities can be particularly vulnerable to abuse. The protection of people with disabilities is paramount. All staff connected with a pupil with intimate care needs must be familiar with intimate care policies and procedures and national guidance including Child Protection Procedures for Primary and Post-Primary Schools 2023.

The following are factors that increase the vulnerability of a student with a disability:

- they may have less control over their lives than is normal
- they may often not recognise abuse
- they may have multiple carers
- they may not always be able to communicate what is happening to them.

Intimate care may involve touching intimate parts of a student's body and may leave staff vulnerable to accusations of abuse. It is unrealistic to eliminate all risk but this vulnerability places an important responsibility on staff to act in accordance with agreed policies and procedures.

Planning

Where possible, arrangements for intimate care should be informed by parents' and students' experiences in relation to how this process can be made comfortable and appropriate for the pupil.

Plans for the provision of intimate care will be recorded in the student's Personalised Pupil Plan to ensure clarity of expectations, roles and responsibilities. Records should also reflect arrangements for ongoing monitoring and review of intimate care plans.

Occasionally, procedures may require two members of staff for health and safety reasons, for example, manual handling. This should be clearly stated in the student's individual plan.

SNA Role and Responsibilities

SNA staff may be involved daily in providing intimate care to students arising from learning difficulties, sensory impairments, medical needs and physical impairments. This places staff in a position of great trust and responsibility. They are required to attend to the safety and comfort of those students and to ensure that they are treated with dignity and respect. Staff should demonstrate their respect for the dignity, modesty and privacy of all students through their general demeanour, through the manner in which they address and communicate with each student, by avoiding inappropriate comments or jokes and through discretion when discussing the student's medical condition or treatment needs. It is important for staff to understand that lapses are unacceptable, even when they are working under pressure.

Positive Approaches to Intimate Care

- Assess students to determine how much care can be carried out independently and how support can be given to improve self-care skills.
- Plan intimate care using student-centred approaches at all times.
- Address each student by their given or preferred name.
- Address each student in an age-appropriate way.
- Provide explanations of what is happening or will happen in a straightforward and reassuring way so that students are aware of the focus of the activity and know what is happening or what will happen.
- Agree terminology for parts of the body and bodily functions that will be used by staff and encourage them to use these terms consistently and appropriately.
- Encourage the student to undertake as much of the procedure for themselves as possible, including washing intimate areas and dressing/undressing.

- Respect a student's preference for a particular sequence of care.
- Be aware of, and respect, any cultural or religious sensitivities related to aspects of intimate care.
- Seek the student's permission before undressing if s/he is unable to do this unaided.
- Provide facilities that afford privacy and modesty.
- Keep records noting responses to intimate care and any changes in behaviour.
 - Be mindful of the psychological effect that a student might experience due to relying on others for support with intimate tasks.
- Students have the right to expect that information about them is only shared to enable care.

Training

Staff should receive training for very specific intimate care procedures (for example, stoma care) where relevant.

Intimate care plans should be recorded in a student's individual care plan. The intimate care plan must be reviewed on a regular basis at least annually.

Facilities

- There should be sufficient space, heating and ventilation to ensure the safety and comfort of students receiving intimate care.
 - There should be hot and cold running water available in all facilities.
- Antibacterial hand wash facilities should be available. Hand hygiene should be carried out in accordance with national guidelines.
- Items of protective clothing, such as disposable gloves and aprons should be provided. There should be no re-use of disposable gloves.
 - Wet and/or soiled continence pads should be disposed of in line with national guidelines.
 - The arrangements for the disposal of any contaminated waste/clinical materials should be carried out in accordance with national guidelines. Supplies of suitable cleaning materials should be available. Anti-bacterial spray should be used to clean surfaces. The latest infection control advice should be followed, for example, for clearing blood spills or for cleaning specialist equipment.

This policy was updated in November 2024 and ratified by the Board of Management on Dec.

Signed: _____ . Chairperson

Date: _____