

## St Anthony's Special School

# Intimate Care Needs Policy 2024

### Rationale:

This policy is designed to ensure that all children attending St Anthony's Special School, their families and school staff feel that pupils are treated with respect and that their right to privacy and dignity is upheld and actively promoted, while also ensuring that staff feel supported and safe while working with pupils.

We strive to develop the highest standard of independence that is possible at an age appropriate level for each pupil. We recognize that there will be times when assistance with intimate care is required.

The policy and related procedures have been developed to give direction to staff with regard to supporting pupils with their intimate care needs bearing in mind that all contact between staff and pupils with regard to intimate care should:

- meet the needs of the pupil;
- respect the dignity and privacy of the pupil;
- be consistent with the professional integrity of staff members;
- ensure the highest standard of best practice.

**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." (HIQA April 2024) In addition to this, intimate care may also include tasks such as: help with feeding, oral care and hair care.

### Intimate care may include:

- toileting;
- oral care;
- washing intimate body parts/showering (if required);
- feeding;
- dressing/undressing/changing clothing;
- menstrual care;
- first aid and medical assistance;
- supervision and prompting of a pupil involved in intimate self-care.

This list of examples is not exhaustive.

### Roles and Responsibilities:

All school employees are Garda vetted and continue to be so every 3 years. Intimate care will be carried out only by authorized school employees. Students on placement are not involved in the intimate care of pupils.

**Intimate care consent forms** are signed by parents/guardians on enrolment and are kept in the office on pupils' files. Parents/guardians have a responsibility to advise the school of any intimate care needs of their child and all staff have a responsibility to work in partnership with them.

Should a parent/guardian request that school staff do not undertake an aspect of intimate care on behalf of their child, this request must be in writing and will be respected. In the event of intimate care being required, the parent/guardian will be contacted and asked to come to the school to attend to their child's particular need.

If a staff member has concerns about a colleague's intimate care practice, they must report this to the Designated Liaison Person/Deputy Designated Liaison Person only.

#### **Intimate Care Plan/Pupil Personal Plan:**

An Intimate Care Plan will be drawn up for pupils who need regular and targeted support with regard to intimate care, e.g. for those who are not toilet trained.

These pupils will be identified by the Class Teacher and Special Needs Assistant and this plan should be signed by parents/guardians.

The Pupil Personal Plan detailing general intimate care needs will be drawn up by the SNA, in consultation with the Class Teacher, pupil (age appropriate) and if relevant, a family member as outlined in Circular 0030/2014-'The Special Needs Assistant (SNA) scheme to support teachers in meeting the care needs of some children with special educational needs, arising from a disability'.

#### **In St. Anthony's School the following Principles guide all Intimate Care Procedures:**

It is essential that every pupil with a disability is treated as an individual when intimate care is being provided and that appropriate time is taken for intimate care.

It should enhance the quality of life of the individual receiving care and should be provided as gently and sensitively as possible, while respecting their privacy and dignity at all times.

St. Anthony's School will adhere to the basic principles which should be borne in mind when providing intimate care: (taken from HSE Guidance 2019)

1. Individuals should give their consent prior to the provision of intimate care. (In St. Anthony's Parents/Guardians permission and co-operation is always sought)

2. Individuals have a right to feel safe and secure.
3. All individuals have the right to personal privacy.
4. All individuals receiving intimate care should be respected and valued as individuals. Individuals 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.
5. Individuals have a right to be treated with dignity and respect and a professional approach from staff when meeting their needs.
6. Individuals have the right to information and support to enable them to make appropriate choices.
7. All individuals have the right to be involved and consulted in their own intimate care to the best of their abilities.
8. Individuals have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs.
9. All individuals have the right to express their views on their own intimate care and to have such views taken into account.
10. Individuals have the right to know how to complain and have their complaint dealt with.
11. An individual's personal care plan should be designed to lead to independence.

Intimate care may involve touching intimate parts of an individual'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 which protects all parties involved.

#### **Good Practice Procedures in St. Anthony's School:**

1. Establishing effective working relationships with families, parents and carers is a key task to ensure each individual's needs are properly identified, understood and met.
2. Plans for the provision of intimate care will be clearly recorded to ensure clarity of expectations, roles and responsibilities.
3. Records will also reflect arrangements for ongoing monitoring and review of intimate care plans.

4. The procedure for dealing with concerns arising from the intimate care processes will be clearly stated and understood by all those involved.
5. Monitoring of plans will take place at least annually or at times of significant change.
6. Wherever possible, staff will work with individuals of the same sex in providing intimate care. However, when setting up a personal care plan, it may be acceptable to all parties for a carer to be of the opposite sex and at times this may be an option.
7. Religious and cultural values will always be taken into account.
8. Staff will demonstrate their respect for the dignity, modesty and privacy of all individuals through their general demeanour, through the manner in which they address and communicate with each individual, through their appearance and dress, by avoiding ageist, racist, sexist or other inappropriate comments or jokes and through discretion when discussing the individual's medical condition or treatment needs. Staff understand that lapses are unacceptable, even when they are working under pressure.

### **Practical Procedures:**

#### **1.Children with Specific Toileting/Intimate Care Needs**

- ✓ In all situations where a pupil needs assistance with Toileting / intimate care, a meeting will be convened, after enrolment and before the child starts school.
- ✓ Parents, Guardians, Principal, Class Teacher, SNA, School Nurse and if appropriate, the pupil, will attend.
- ✓ The specific care needs of the child, and how the school will meet them, will be clarified.
- ✓ Personnel involved in this care will be identified.
- ✓ Any possible training needs will be identified and training sought. E.g. catheter/peg fed
- ✓ Provision for occasions when usual staff are absent will be outlined. Any change of personnel will be discussed with the pupil, if appropriate. As far as practicable and possible staff will be known to the pupil.
- ✓ Two members of staff will be present in the same area when dealing with intimate care needs.

✓ Any changes will be discussed with parent/guardian and pupil and noted in writing to the pupil's file.

✓ As far as possible the pupil will be involved in identification of his/her personal requirements, wishes, changes etc. Independence is encouraged as much as possible.

✓ A written copy of the agreement will be kept on the pupil's file.

✓ Parents will be notified of any changes from agreed procedures.

✓ At all times the dignity, privacy and safety of the pupil will be paramount in addressing intimate care needs, staff will focus on the procedures and carry out procedures as efficiently and quickly as possible.

✓ Staff will wear protective gloves.

## **2. Toileting Accidents:**

✓ At the School Admissions Meetings, the school procedures will be outlined to parents and they will be asked to submit in writing specific wishes regarding Toileting Accidents.

✓ A supply of clean underwear, wipes, track-suit bottoms etc provided by the parents will be kept in the school.

✓ In the first instance the pupil will be offered fresh clothing to clean and change themselves.

✓ If, for any reason, the child is unable to clean or change themselves, the procedure outlined by parents will be followed.

✓ If staff must clean /change the child, two members of staff, familiar to the child will attend to him/her.

✓ Parents will be notified of these accidents.

✓ Two records of the incident should be kept: one with nurse and one with class teacher.

## **3. Training**

All relevant staff will receive **Manual/Patient handling** training in the management of intimate care needs. All staff are required to take part in the **Children First** training on a continuing basis. Staff should at all times follow best practice in relation to **Infection Control**.

### 3. Safety

- From a child protection perspective both the pupil and the staff members are at exposed risk; accepting this creates an awareness so safety can be maintained. As far as staffing will allow two members of staff should be present in the same area when dealing with intimate care needs.
- Staff should be careful not to leave themselves open to the possibility of allegations and ensure that actions, comments or remarks cannot be misinterpreted.
- Staff will wear protective, disposable, latex/vinyl gloves to avoid infection.
- Whilst every effort will be made to adhere to best practice, in the event of an emergency where this is not possible or practical, a full written record of the incident should be made and reported to the Principal.

### 4. Reporting:

If during the provision of Intimate care assistance.....

- The pupil seems unusually sore, tender or bruised
- The pupil appears to misinterpret what is said or done
- The pupil has a very emotional reaction without apparent cause

Then the staff member involved in the intimate care should **immediately** report any such incident to the class Teacher/ Nurse. The incidents should also be reported as **soon as possible** to the Principal/Deputy Principal. Parents will be contacted and an incident report will be completed as appropriate. Follow up will take place as required.

The national Child Protection guidelines will be followed at all times.

These procedures will be reviewed regularly or as each individual case changes.

This policy was reviewed and amended January 2008 and ratified by the Board of Management at a meeting on Thursday 10/1/2008. Following review by School Nurse, Staff and Principal it was agreed that this policy continues to be effective and it was reviewed and ratified by the BOM at a meeting on 23rd March 2015.

These procedures were updated in accordance to HIQA and HSE guidelines and reviewed by Nurse, Principal and Staff and ratified by the Board of Management on the 4<sup>th</sup> of November 2024

Signed: \_\_\_\_\_ Chairperson, Board of Management

Signed: \_\_\_\_\_ Nurse St Anthony's Special School

- Medication must not be administered without the specific authorisation of the Board of Management.
- In administering medication to pupils, staff members will exercise the standard of care of a reasonable and prudent parent.
- A written record of the date and time of administration will be kept.
- Medication should be locked away securely in nurse's room and a stock check done regularly. Emergency Medication such as Buccolam, Pipe, Inhalers, Insulin etc. should be in a secure safe place near the pupil so they can be accessed quickly in an emergency.
- In emergency situations, staff should do no more than is obviously necessary and appropriate to relieve extreme distress or prevent further and otherwise irreparable harm. Qualified medical treatment should be secured in emergencies at the earliest opportunity.
- It is also recognised that under emergency situations some medication may be wasted or spilled in error. This should be recorded alongside any medication given.
- In the event of a drug error occurring Health and Safety procedures will be followed so that the pupil's safety is paramount. The following procedure must be followed:
  - a) Ring pupils doctor
  - b) Inform parents/guardians
  - c) Record event

#### **4) PRN Medication**

PRN means "as required"

- PRN medication is administered to a person over and above their regular prescribed medication
- PRN medication is often an important part of an individual's treatment plan by assisting them through difficult periods of time while at school
- If medication is prescribed on a PRN basis there must be clear written guidelines from the prescriber. It is the responsibility of the nurse to obtain these written guidelines prior to administering PRN medication. The nurse may also have to contact parent/guardian to check if PRN medication was given before school, to ensure the appropriate time interval has lapsed and the maximum dose has not been exceeded.

- If a pupil is on regular PRN medication (eg.Nurofen, Paracetamol, Antihistamine) the parent should send in a supply at each new term with the pupil's name on box

### **5) Emergency medication on out of school activities**

- All staff receive training in the administration of emergency medication (Buccal Midazolam) for epileptic seizures, the latest in August 2023 and are due again May 2025. The school nurse also provides refresher training for individual staff as the need arises.
- When pupils are on out of school activities the emergency supply of medication is brought with them in the care of the class teacher or SNA in charge of the pupil.
- Each pupil who has Epilepsy has an individualised Epilepsy Care Plan(ECP) in place which details the management of their epileptic seizures and rescue medication (if prescribed). This is kept with their medication in a box
- Only Staff trained in the administration of rescue medication for seizures may administer emergency medication as required if it becomes necessary to do so.
- A written record will be kept, and parents will be informed immediately. Medical attention from a doctor or nearest Casualty unit will be sought if required, and if seizure is prolonged and not responded to rescue medication.
- On return to the school unused medication will be returned to the secure storage area. If medication was administered the staff member responsible will liaise with the School Nurse and the parents to report what happened.

### **6) Immunisations and Vaccinations**

- St. Anthony's Special School host and support a HSE led Vaccination Clinic twice a year for school aged children 5-18years attending St Anthony's.
- The School Nurse liaises closely with the Vaccination Department in the HSE to compile a list of pupils scheduled for vaccinations.
- Parental consent is secured prior to the vaccination clinic. The School Nurse sends these to the vaccination team.
- The Area Medical Officer(AMO) and the Vaccination Nurse bring all vaccines needed on the day to the Nurses Station in St Anthony's. They



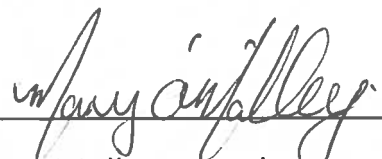
are prescribed and dispensed by the AMO prior to the clinic. The AMO ensures that all Health & Safety requirements are met.

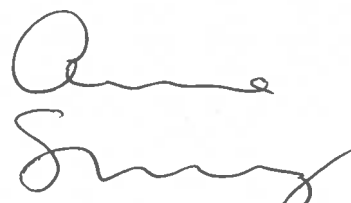
- The AMO & Nurse on the team administer the vaccinations with the assistance of the School Nurse.
- Pupils are monitored closely post vaccinations for a minimum of 15 minutes for any adverse reactions.
- Parents receive a text from the school Nurse to inform them their child has received their vaccination and a record sheet from the team to bring home.
- In the event of anaphylaxis, the AMO and the vaccination team are trained in these emergency situations and carry the appropriate medication.

### 7) Approval & Ratifications Procedures

This policy and procedures was introduced in 2003 and is regularly reviewed. Approved & Ratified by Board of Management 2003. Reviewed and updated in June 2006. Reviewed and updated in November/December 2008 & Approved by BOM on 8/12/2008 and 12/1/2009 Reviewed Oct 2010. Reviewed by School Nurse & Principal Feb 2015 Approved by BOM at meeting on 23rd March 2015. Reviewed by School Nurse & Principal October 2024 Approved by BOM at meeting on 4<sup>th</sup> of November 2024.

  
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Joe Staunton Chairperson

  
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Mary O'Malley School Nurse

  
\_\_\_\_\_  
Principal.

Date: 4<sup>th</sup> of November 2024

