



BALLYOWEN MEADOWS SPECIAL SCHOOL (BMSS)

PERSONAL AND INTIMATE CARE POLICY

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INTRODUCTION

All BMSS School Staff understand that the delivery of personal and intimate care requires a professional and sensitive approach in order to preserve the dignity and integrity of our pupils and to safeguard their wellbeing at all times.

The policy has been agreed by BMSS School Management, Staff and Parents through a consultation process with all stakeholders. The policy has been developed for the purpose of retaining the content, which was previously contained in the BMSS Child Protection Policy prior to the 2018 requirement for schools to adhere to the DES Child Protection Statement.

CHARACTERISTIC SPIRIT OF BMSS

Many of our pupils have sensitivities about their bodies and bodily functions; about dressing and undressing; and find personal hygiene routines challenging. We support our pupils by offering the highest appropriate level of privacy, choice and control, as determined by each individual's personal needs and/or degree of independence.

Due to the nature of our pupils however it is often necessary to engage in personal and intimate care routines with pupils during the school day. Such routines are always undertaken in the least obtrusive way possible, whilst ensuring that the needs of the pupils are fully met.

DEFINITION OF PERSONAL AND INTIMATE CARE IN BMSS

Personal and intimate care is defined as care tasks of a personal and/or intimate nature, associated with bodily functions, body products, medication and personal hygiene which need direct or indirect contact with or exposure of the child's body.

Personal and intimate care takes place for pupils in mainly in relation to four areas of school life:

- (1) Toileting
- (2) Personal hygiene
- (3) Intimate dressing
- (4) Supporting sensory needs

BMSS GUIDELINES ON POLICY IMPLEMENTATION

(1) LINKAGE TO OTHER POLICIES

The BMSS School Policy on Personal and Intimate Care is informed by wider school policy in the areas, particularly in the following areas:

- **PHYSICAL CONTACT**
 - BMSS Code of Behaviour
 - BMSS Child Protection Statement
 - DES Child Protection Procedure (2017)
 - BMSS Health and Safety Statement and Policy
 - BMSS Assessment Strategy
 - Functional Skills Assessment (In development)
 - BMSS Teaching and Learning Policy (In-development)
 - BMSS Curriculum Policy (In development)

The BMSS School Policy on physical contact reaches across many aspects of school life, such as management of challenging behaviour, health, safety and well-being of pupils and staff, child safeguarding and curriculum delivery. Physical contact across all areas of school life are informed by the common guideline that physical contact between School Staff and the child should always be in response to the needs of the child and not the needs of the adult. While physical contact may be used to comfort, reassure or assist a child, the following should be factors in determining its appropriateness:

- It is acceptable to the child.
- Two adults present at all times (including at least one contracted staff member)
- It is open and not secretive.
- The age of the child.
- Touching should never be intrusive or inappropriate.
- School personnel should avoid doing anything of a personal nature for children that they can do for themselves.
- Staff should not be involved in physical contact with a child that relates to the delivery of clinical therapy unless trained and recommended by a clinician and/or discussed and documented with Parents/Guardians as part of care plan.
- Activities for which physical contact is necessary, e.g. brushing, deep pressure, etc. will be modelled for the child with the aim of encouraging independence, and staff must be acting on the basis of recent occupational therapy recommendation(s).

- **RESPECT**
 - BMSS School Ethos, Mission and Vision Statement
 - BMSS Child Protection Statement

- BMSS Code of Behaviour

It is vital to the dignity and personal development of children with special needs that persons coming into contact with them during their school day show respect. This can be done in many ways, for example:

- Allowing the child to become part of the decision-making process and then act on the child's contributions.
- Giving praise and compliments as much as possible.
- Allocating ability and age appropriate responsibilities such as independence in toileting.
- Setting tasks that are achievable for the child.
- Being careful not to talk about pupils when they can overhear.

We should be aware of how we speak and behave towards the children as we care for their needs, for example:

- Attempting to establish eye-contact when we speak to them.
- Using a language level that is developmentally appropriate for the child, such as reduced language, visual aids and/or signs to assist their understanding.
- Thanking them and praising them by using positive behaviour management.

- **PERSONALISED LEARNING**

- BMSS Assessment Strategy – Functional Skills Assessment (In development)

This policy describes school practices in relation to the assessment of each child's personal and intimate care needs for the purpose of informing their personalised Care Plan.

- BMSS Teaching and Learning Policy (In-development)

This policy contains the teaching and learning methodologies and strategies that are used in BMSS to support each child's learning in the area of personal care, particularly in relation to independence.

- BMSS Curriculum Policy (In development)

This policy contains information on how each child's personalised learning is underpinned by the curriculum and how it is delivered by the school through each child's Personal Pupil Plan and also the Class Topic Plan.

(2) SCHOOL PRACTICE

BMSS School Staff have agreed the guidelines below for school practice in the area of personal and intimate care to ensure that norms have to be established so that children can expect consistency from Staff throughout the school day.

- **CHILD SAFEGUARDING**

- All BMSS Staff must have received satisfactory Garda vetting prior to beginning to work in BMSS, as per DES Circular 0031/2016.
- All BMSS staff to complete the TUSLA Children First ELearning programme.
- BMSS SNA staff recognise that it is good practice to inform the Class Teacher when they are taking a pupil to the toilet.
- In addition, **BMSS operates a strict 2.1 supervision policy that requires two members of staff to be present when meeting the personal and intimate care needs of individual pupils and when possible at all other times. This is for the protection of both the pupil and staff.**
- In the event that a staff member finds themselves alone with a child, they should ensure they are **proactive** in rectifying the situation by using the internal telephone system to request support or going onto the corridor to seek assistance;
- Staff should inform pupils what is being done and/or where they are going;
- In the interests of safeguarding children, BMSS Staff should not lock the doors of individual rooms, such as the Special Needs bathrooms, when toileting with a pupil.
- Whenever possible, pupils have a range of known carers delivering teaching programmes and who may also offer support with intimate care routines. Whilst being mindful of establishing appropriate ‘public – private’ boundaries for pupils and avoiding situations where unknown adults will deliver intimate care, attention is also given to ensure that over familiar relationships between staff and pupils do not develop.
- The child must be compliant with requests by School Staff in relation to their personal and intimate care.
- In the event that they are non-compliant, physical intervention will not be used unless the child’s actions are putting themselves at risk of injury.
- In the event that physical intervention is used it will be in accordance with sanctioned physical holds as contained in the BMSS Code of Behaviour. Staff should always seek additional guidance if they feel that it is required and record on an incident report form.

- **INDEPENDENCE**

- Pupils attending BMSS are taught self-help skills to work towards achieving greater independence. Pupils are encouraged to be as independent as possible during toileting routines. Pupils are given the highest possible level of autonomy during intimate care routines; the aim is always to teach them to be able to carry out their own care where possible and appropriate.
- Staff will typically be present to oversee safety, however if a pupil is known to be able to use the toilet appropriately and independently, they may ask permission to go to the toilet and

do so unescorted (the staff member being aware of where they are going and checking for safety as appropriate to their needs).

- Where pupils are being taught how to be independent with such skills, (for example through a task analysis), staff may be present but make no verbal comments, as prompts can often be difficult to fade and can ultimately limit pupil independence).
- We also aim to give pupils the skills and opportunities to communicate their preferences and dislikes during intimate care routines.

- **PRIVACY**

- BMSS Staff respect the privacy and personal space of all pupils and will offer the least intrusive support needed during toilet times to encourage the independence and dignity of the child or young person.
- Where more help with toileting is required, when possible pupils are supported by a known member of staff. All toileting and changing facilities allow the children as much privacy as is required.
- Pupils should never be left totally alone, but it is important to try to ensure as much privacy as possible, especially for senior pupils;

- **LANGUAGE AND COMMUNICATION**

- Staff working with pupils give clear and appropriate commentary on what is happening during personal and intimate care routines.
- There should be appropriate language, conversations and interactions at all times with pupils in order to avoid any upset or worry to pupils or any misinterpretation of events;
- Staff should avoid discussing issues in the presence of the child.
- All pupils are given support in communication so that they can understand and respond to intimate care routines and can express their views through objects of reference, gesture, signing, symbols or words.

- **PERSONAL HYGIENE ROUTINES**

- In consultation and agreement with Parents, some pupils may follow programmes designed to improve their independence with personal hygiene routines such as washing, applying deodorant and brushing their teeth. However, such programmes are for a fixed purpose for learning and supporting the pupil in maintaining their personal hygiene routine at home and, therefore, will not replace their home routine.

- Such programmes are taught with the least intrusive level of prompting or instruction. In the interests of safeguarding children, staff should not lock the doors of individual rooms such as the Special Needs bathrooms when changing or working with a pupil.

- **BEHAVIOUR MANAGEMENT**

- If a pupil has a toileting accident, they are changed as soon as possible and will not be reprimanded for their accident.
- Behaviours of concern will be managed using strategies that are personalised for each child. These strategies will be agreed as a Class team to ensure consistency is maintained for the child.
- Personal behaviours such as touching private body parts, are a fact of life and learning when and in what places it is appropriate to touch private body parts can be more challenging for young people with autism.
- If a pupil is displaying inappropriate sexualised behaviours, and no child protection issues are raised or noted, the pupil will be redirected to an appropriate task or activity. In the instance that this does not have an effect, the pupil will be redirected to the bathroom.
- Parents will be informed by the Class Teacher that the behaviour is occurring in school and that it is being monitored. BMSS recognises that some parents may find it difficult to discuss their son or daughter's sexualised behaviours in a public forum and may prefer to conduct such conversations over the telephone or in a meeting with only two staff members present.
- If the inappropriate behaviour continues, parental permission will be sought to send a clinical referral for the purpose of receiving an intervention programme aimed at supporting the learning of more appropriate behaviour.
- No child will ever be reprimanded for inappropriate sexual behaviour. It is preferable to develop a proactive rather than reactive approach to managing behaviours. Any behavioural intervention will be reviewed in consultation with parents.
- BMSS recognises that a sudden increase in sexualised behaviours may, very occasionally, be the result of sexual abuse and as such, monitors records and reports any significant changes in behaviour in accordance with the BMSS Child Protection Statement and DES Child Protection Guidelines.

- **HEALTH AND SAFETY OF PUPILS AND STAFF**

- Staff will wear protective gloves at all times.
- If, through delivering intimate care, staff observe any health issues i.e. a pupil shows signs of having worms, or head lice are discovered they will communicate this with parents immediately and inform the School Principal as appropriate, so that other parents may be informed if necessary.

- **TOILET-TRAINING**

- When a toilet-training programme is appropriate for a pupil, BMSS will support Parents in following such a programme. It is very useful to have clinical support to link both home and school and provide a personalised toilet-training programme for the child. It is also important that the expectation of the child is in line with their developmental level and realistic.
- When a toilet training programme is implemented in BMSS, it is for those pupils who are known to have the necessary pre-requisite skills necessary to be successful in this programme, yet require a structured approach to learning toileting behaviour.
- Toileting is recognised to be an important daily living skill, not least because a higher level of independence affords a child greater personal dignity and reduced vulnerability. Before any toilet training programmes are introduced, parents are consulted and guidelines for consistent partnership working between home and school are agreed. With any toileting programme parents may request the input of a psychologist or Behaviour analyst.
- Parental guidance will be sought to agree how their child will be cleaned following accidental wetting or soiling (if their child is not independent with cleaning themselves).

- **PARENT/SCHOOL COMMUNICATION**

- BMSS Staff and Parents are encouraged to maintain regular communication about toileting and intimate care, having daily opportunities to share such information through the Home-School Communication Book/email with teacher. In addition, the child's care needs will be included in their Personal Pupil Plan (PPP) and discussed at the formal PPP meetings.
- Parents/carers have regular communication with school through the daily Home/School Communication Book or email, as mentioned above; are kept aware of all intimate care arrangements and are partners in discussions when an Individual Care Plan is needed.
- Parents/carers will provide a regular supply of wipes, nappies (if required), clean clothes and underwear and are responsible for ensuring that a regular supply of these items is maintained in the school for their child.

POLICY RATIFICATION AND REVIEW

This policy was ratified by the School Management on 23 January 2023 and will be reviewed annually, alongside with the Child Protection Statement and Audit.