

Intimate Care Policy

**Kilbonane National School
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1. Introduction

This policy establishes the procedures and guidelines for intimate care at Kilbonane National School, including provisions for our Sonas Class (for children with autism). It is designed in accordance with:

- Child Protection Procedures for Primary and Post-Primary Schools (2023),
- Department of Education guidance on supporting pupils with medical and personal care needs,
- NCSE (National Council for Special Education) guidelines,
- INTO (Irish National Teachers' Organisation) guidelines, and
- Best practice in Irish primary schools,

adapted for our unique school setting.

Intimate care refers to any support provided to a child to meet their personal care needs, ensuring that their dignity, privacy, and safety are maintained at all times. This policy supports the school's obligations under the Education Act 1998 and the Equal Status Acts 2000–2018, and the aims of the EPSEN Act 2004.

2. Definition of Intimate Care

Intimate care encompasses any activity required to meet the personal care needs of a child. This may include, but is not limited to:

- Assisting a child with changing clothes (e.g., after an accident, wetting, or soiling).
- Supporting a child with toileting (e.g., cleaning, changing underwear).
- Supervising a child during intimate self-care (e.g., washing hands, using the toilet).
- Providing first aid (e.g., cleaning wounds; see also the school's Administration of Medication Policy).
- Assisting with feeding, where a child requires support.
- Supporting a child with specific medical procedures they cannot perform independently (see Section 4.4 and the Administration of Medication Policy).

Parents/guardians are responsible for informing the school of any known intimate care needs for their child. This is particularly important for children with special educational needs (SEN), as outlined in the NCSE's Continuum of Support Framework.

3. Principles of Intimate Care

This policy is grounded in the following fundamental principles, aligned with NCSE guidelines and child protection best practice:

- **Safety:** Every child has the right to be safe and protected from harm.
- **Privacy:** Every child has the right to personal privacy appropriate to their age and needs.
- **Dignity & Respect:** Every child has the right to be treated with dignity and respect.
- **Individuality:** Every child has the right to be valued as an individual, with their unique needs and preferences considered.
- **Consultation:** Children have the right to be consulted and involved in their own intimate care, to the best of their age, ability and understanding.
- **Consistency:** Children have the right to consistent and appropriate levels of intimate care, as outlined in their Personal Pupil Plans (PPPs), Student Support Plans (SSPs) or Individual Care Plans (ICPs).
- **Inclusivity:** Every child, regardless of ability, has the right to equal access to care and support.

4. Guidelines for Intimate Care

4.1 General Procedures

- **Encourage Independence:** Staff will always encourage children to perform self-care tasks independently. Assistance is provided only when necessary, in line with the NCSE's focus on promoting independence.
- **Role of SNAs:** Intimate care is provided by Special Needs Assistants (SNAs), as this falls properly within the SNA role. Teachers may supervise or assist only in exceptional circumstances where an SNA is not available, and any such instance will be recorded and reported to the Principal.
- **Privacy:** Children will be given opportunities for privacy (e.g., changing in a private, designated area with the door secured appropriately).
- **Two Staff Members:** Where reasonably practicable, two staff members should be present or within hearing during intimate care to ensure safety and accountability. Where this is not possible, intimate care will proceed as required in the child's best interests, and the circumstances will be recorded. Staff should never be completely hidden from the view of other adults while providing intimate care (e.g., doors of changing areas remain slightly open where appropriate).
- **Parental Notification:** Parents will be informed promptly and discreetly if their child has required intimate care, unless the child is in distress and requires urgent assistance, in which case parents will be informed as soon as practicable.
- **Consent:** For ongoing, planned intimate care needs, parents must provide written consent (see Appendix 1). One-off accidents are managed under Section 4.3 and do not require pre-consent.

4.2 Changing Clothes

If a child needs to change clothes (e.g., due to an accident, wetting, or soiling):

1. The child will be encouraged to change independently.
2. If assistance is required, staff will provide minimal support while respecting the child's privacy and dignity.
3. Spare clothing will be provided by the school (parents of children with ongoing needs are asked to provide a change of clothes in school).
4. Soiled clothing will be sealed in a plastic bag and returned to parents.
5. The incident will be recorded (Appendix 2) and parents informed discreetly.

4.3 Toileting Accidents

If a child has a toileting accident:

1. The child will be comforted and reassured throughout the process.
2. Staff will contact parents/emergency contacts to inform them and, if practicable, request that a parent attend or give verbal permission for staff to assist the child.
3. If no contact can be made, staff will act in the child's best interests to ensure the child is clean, comfortable and safe, and will record the incident accordingly, in line with the Child Protection Procedures (2023).
4. Disposable gloves will be used, and hygiene procedures followed throughout.
5. The incident will be recorded (Appendix 2).

4.4 Medical Procedures

If a child requires specific medical procedures (e.g., tube feeding, catheter care):

- Staff will only assist if they have volunteered, have been appropriately trained, and feel competent to do so. There is no obligation on any teacher or SNA to perform medical or nursing procedures.
- Parents must provide detailed written instructions and consent for any such care, and the child's medical needs will be managed in accordance with the school's Administration of Medication Policy and relevant HSE/Department of Education guidance.
- Training and competence in supporting children with medical needs is emphasised in NCSE and Department of Education guidance.

5. Special Considerations for Sonas Class (Autism Support)

5.1 Student Support Plans (SSPs) and Personal Pupil Plans (PPPs)

Children in the Sonas Class may have unique intimate care needs due to sensory, communication, or physical challenges. Student Support Plans and/or Personal Pupil Plans will be developed in consultation with parents, teachers, SNAs, and relevant professionals (e.g., occupational therapists, speech and language therapists), as recommended by the NCSE's Continuum of Support Framework. Care plans will include:

- Triggers (e.g., sensory sensitivities, communication barriers).
- Preferred methods of assistance (e.g., visual supports, step-by-step instructions).
- Staff assigned to provide care (to build trust and consistency).
- Sensory preferences (e.g., lighting, noise levels, textures).

5.2 Communication & Sensory Needs

- Visual Supports: Use PECS, social stories, or visual schedules to explain intimate care procedures, in line with NCSE guidelines for supporting children with autism.
- Clear, Simple Language: Use short, direct instructions (e.g., "Let's change your clothes now.").
- Sensory Considerations:
 - Provide a calm, quiet space for intimate care.
 - Use familiar staff members to reduce anxiety.
 - Allow the child to hold a comfort item (e.g., fidget toy, blanket) if it helps.

5.3 Toileting Support

Some children with autism may require additional support for toileting due to:

- Sensory aversions (e.g., fear of flushing, dislike of certain textures).
- Communication difficulties (e.g., inability to express needs verbally).

Strategies include:

- Toileting schedules (e.g., timed reminders).
- Visual prompts (e.g., pictures of toilet steps).
- Positive reinforcement (e.g., praise, sticker charts).

6. Personal Pupil Plans (PPPs) and Student Support Plans (SSPs)

For children requiring ongoing intimate care or additional support, a PPP or SSP must be developed. This aligns with the NCSE's Continuum of Support Framework and ensures that:

- The child's unique needs are identified and addressed.
- Parents, teachers, SNAs, and professionals collaborate to create the plan.

- The plan is reviewed regularly (at least annually, or sooner if needs change).

6.1 Content of PPPs/SSPs

PPPs/SSPs for intimate care should include:

- Child's details (name, class, date of birth).
- Specific intimate care needs (e.g., toileting, changing, medical support).
- Triggers and preferences (e.g., sensory sensitivities, communication methods).
- Assigned staff (names of SNAs/teachers responsible for support).
- Hygiene and safety procedures (e.g., use of gloves, disposal of soiled items).
- Parental consent (signed by parents/guardians).
- Review date.

7. Staff Responsibilities

7.1 Training & Vetting

All staff involved in intimate care:

- Are vetted in accordance with the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012–2016 — teachers through the Teaching Council, and SNAs and other staff through the school's arrangements under the National Vetting Bureau system.
- Are trained in Child Protection procedures, including the Child Protection Procedures for Primary and Post-Primary Schools (2023).
- Are made familiar with this policy and receive relevant training in intimate care as required.

7.2 Good Practice Guidelines

To safeguard children and staff, the following guidelines must be adhered to:

- **Involve the Child:** Encourage the child's independence and consult them about their preferences.
- **Respect Privacy:** Ensure privacy appropriate to the child's age and needs (e.g., use screens, private areas).
- **Avoid Working Alone:** Two staff members should be present or within hearing where reasonably practicable; where not, records will note the circumstances.
- **Consistency:** Maintain consistent approaches to intimate care (e.g., same staff, same routines).
- **Know Your Limits:** Only perform tasks you are trained and comfortable with; raise any concerns about competence with the Principal.
- **Promote Positive Self-Esteem:** Use encouraging language and respect the child's body autonomy.
- **Report Concerns:** If you notice unusual markings, bruising, or distress, report immediately to the Designated Liaison Person (DLP) in accordance with the Child Protection Procedures (2023).

8. Communication with Children

8.1 Effective Communication

Staff must be aware of the child's communication method (e.g., verbal, sign language, PECS, body language). Strategies include:

- Make eye contact at the child's level.
- Use simple, clear language and repeat if necessary.
- Wait for a response and continue explaining what is happening.

- Treat the child with dignity and respect at all times.

8.2 For Non-Verbal Children (Sonas Class)

- Use visual supports (e.g., pictures, symbols).
- Observe body language (e.g., facial expressions, gestures).
- Provide choices (e.g., "Do you want to change now or in 5 minutes?").

9. Record Keeping & Monitoring

9.1 Record of Intimate Care

A Record of Intimate Care must be completed promptly each time a child requires assistance (see Appendix 2). Records will include:

- Date, time, and pupil's initials.
- Class and type of incident (e.g., W = wetting, S = soiling, V = vomiting).
- Action taken (e.g., changed clothes, cleaned up).
- Staff involved (initials), and witness/second adult initials where one was present.
- Additional comments (e.g., reasons why a second adult was not present, if applicable).

Records should be completed contemporaneously and, where a second adult was present, co-signed by both staff members.

9.2 Confidentiality

All records will be stored securely in the child's confidential file. Information will only be shared with relevant staff and parents on a need-to-know basis, in compliance with GDPR and the Child Protection Procedures (2023).

10. Parental Involvement

10.1 Parental Consent

Parents must provide written consent for ongoing, planned intimate care (see Appendix 1). Consent may be withdrawn at any time by written notification to the Principal. Parents will be informed discreetly if their child requires intimate care, and are encouraged to communicate any specific needs or preferences for their child. One-off accidents will be managed sensitively under Section 4.3 and do not require prior consent.

10.2 Collaboration

The school will work in partnership with parents to ensure the best possible care for their child, in line with the NCSE's emphasis on parental involvement. Intimate care plans will be reviewed regularly with parents.

11. Contact Information

For questions or concerns regarding this policy, please contact:

- Principal: Keith Cotter
- Designated Liaison Person (DLP): Keith Cotter
- Deputy Designated Liaison Person (DDL): Eva O'Driscoll
- Sonas Class Coordinator: Ciara McCarthy

12. Policy Review & Ratification

This policy will be reviewed annually and updated as needed. It aligns with:

- Child Protection Procedures for Primary and Post-Primary Schools (2023),
- Department of Education and NCSE guidance, and
- INTO guidelines and best practice in Irish primary schools.

Ratified by the Board of Management: _____

Date of Ratification: _____

Signed: _____ (Chairperson)

Appendix 1: Parental Permission for Ongoing Intimate Care

Kilbonane National School, Aherla, Co. Cork

I, _____ (Parent/Guardian Name), give permission for my child,
_____ (Child's Name), to receive ongoing, planned intimate care (e.g.,
assistance with changing clothes, toileting) as outlined in the school's Intimate Care Policy.

I understand that:

- Staff will encourage my child's independence at all times.
- I will be informed discreetly when intimate care is required.
- This consent applies to ongoing, planned care needs; one-off emergencies will be managed sensitively in my child's best interests.
- I may withdraw this consent at any time by written notification to the Principal.

My child has the following specific needs (if any): _____

Signed (Parent/Guardian): _____

Date: _____

Appendix 2: Record of Intimate Care

Kilbonane National School, Aherla, Co. Cork

Date	Time	Pupil Initials	Class	Incident (W/S/V)	Action Taken	Staff Initials	Witness Initials	Comments
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Staff should complete this record promptly after each incident of intimate care and, where a second adult was present, have the record co-signed.

Appendix 2: Record of Intimate Care

Kilbonane National School, Aherla, Co. Cork

Date

Time

Pupil Initials

Class

Incident (W/S/V)

Action Taken

Staff Involved (Initials)

Additional Comments

12. Contact Information

For questions or concerns regarding this policy, please contact:

Principal: Keith Cotter

Designated Liaison Person (DLP): Keith Cotter

Sonas Class Coordinator: Ciara McCarthy

Note: This policy is designed to ensure the safety, dignity, and well-being of all children at Kilbonane National School, including those in our Sonas Class. It will be reviewed and updated in line with INTO, NCSE, and national best practices.