



O Connell Primary Intimate Care Policy



An Edmund Rice School



Intimate Care Policy O Connell Primary School

Introduction

O'Connell Primary School is a mainstream school with two special classes which caters for 12 pupils with a diagnosis of Autism Spectrum Disorder. Each boy in these classes has an Individual Education Plan which should include daily living skills and self-care skills if needed, as determined from assessment. Toilet training is one of the first and most important skills to be taught, if there is a need. Toileting is a complex process, with many issues to be considered before and during the process of toilet training.

Relationship to School Ethos

Aims

- To teach our students to become independent with toileting and other self-care skills.
- To safeguard both our students and staff with the toilet training and teaching of other self-care skills of students.
- To support best practice in toilet training and the teaching of other self-care skills.
- Create a safe, trusting responsive and caring environment by valuing each child's contribution and work through praise and encouragement.
- Provide a personal safety skills education which specifically addresses abuse and prevention for all children in the school. The children in our care may not be or may not be always be capable of talking about their problems. Therefore all staff members need to be vigilant in observing changes in a child's behaviour or demeanour and monitor the child's difficulties.
- Develop an awareness and responsibility in the area of child protection and safeguarding amongst the whole school community.
- Put in place procedures for good practice to protect all children and staff.
- Ensure that all staff are aware of and familiar with the "Children First" and Department of Education and Skills Guidelines and Procedures in relation to their role in reporting concerns and disclosures of child abuse and bullying.
- Provide for ongoing training in this and related areas for all school staff.

Procedures

All staff (Teachers, SNAs, Bus escorts, Caretaking, secretarial, students on placement) in the school will follow the recommendations for reporting concerns or disclosures as

outlined in the “children first” and Department of Education and Skills document Child Protection Guidelines and Procedures.

Copies of this policy document and the appended section from Dep of Education and skills, Child protection Guidelines and Procedures will be made available to all staff (policy document folder in each class). It is incumbent on all staff to familiarize themselves with “children first” and Dep of Education documents.

The BOM of O Connell Primary school has appointed Michael McHugh as Designated DLP and Ciara Naughton as Deputy DLP.

The staff and management of O Connell Primary have agreed:

- All concerns/disclosures involving child protection/child welfare issues will be reported in the first instance to the DLP or Deputy DLP where appropriate.
- Each report to the DLP will be dated and signed by the person making the report.
- A strict adherence to maintaining confidentiality-information regarding concerns or disclosures of abuse should only be given on a “need to know basis”.

The staff and management of O Connell Primary recognize the childrens right and will treat them with dignity and respect by:

- Not accepting threatening, violent or degrading behavior.
- Telling children their rights and responsibilities.
- Treating children as individuals.
- Involving children.
- Hearing the childs voice.
- The right for all non-verbal children to communicate using augmentative/ alternative communication system.

Rationale

It is the policy of O’Connell Primary to ensure that our policies are in accordance with the ethos and values of our School and in accordance with the Child Protection and D.E.S. Guidelines.

We have endeavored to highlight areas which are relevant to all children in O’Connell Primary School.

This policy works in conjunction with the Child Protection Policy.

General Toilet Training Guidelines:

1. Medical advice should be sought by families to ensure their child is ready for toilet training; this is especially true for children with any gastro-intestinal disorders.
2. Toilet training should be introduced both in the school and in the home at the same time. (See Appendix A for general guidelines). The specific procedure written for each

student will be individual to each student and data will be kept on appropriate versus inappropriate toileting.

3. Parents will be encouraged to keep records of toileting success and accidents at home and to run the same procedure as done in school.
4. A supply of clean underwear, wipes, track-suit bottoms etc. will be kept in the school for each student undergoing a toileting procedure.
5. If a student is not independent with the toileting procedure, requiring assistance from a staff member, the staff member will be sure to leave the door open while they are assisting (use toilet A). It is desirable that they also seek a second person if available.
6. In the event that a student requires assistance and teaching to adequately wipe themselves, 2 staff members MUST be present.
7. If a student is independent with the toileting procedure, no staff member will be in the bathroom with them, and the door will be closed.
8. Students will be appropriately rewarded for success but never punished for accidents. Occasional accidents are normal. Students will be cleaned and changed immediately. If a student needs assistance with changing and dressing, there will be 2 staff members present in the bathroom with the door closed over. If the student does not need assistance with changing and dressing, no staff members will be in the bathroom with them, and the door will be closed.
9. The bathroom will be a child friendly area. Visual aids will be displayed in the bathroom area outlining all of the steps involved in successful toileting.
10. We will always encourage students to communicate their need to use the toilet (using verbals, PECS, Lámh, etc).
11. We will keep data in school to help track toilet training success.
12. If the data shows that a particular schedule is working (accident free for 3 days or more), we will lengthen the times between reminders to use the toilet.
13. Toileting procedures will be reviewed at least once per week by the class teacher
14. At all times the dignity and privacy of the student will be paramount in addressing toileting needs.

If a student has a toileting accident follow these steps.

- A. Ask for Assistance
- B. Move student to toilet
- C. Ask staff member to mop area and disinfect chair
- D. Change student with assistance
- E. Place soiled clothes in nappy bag
- F. Write note in communication book for parents

Guidelines for Changing a Child in School

- A. Two adults must be present
- B. The adapted toilet next to the Arts and Well-being room should be used.
- C. The door of the adapted toilet must remain closed to ensure privacy.

- D. Any wipes/nappies etc. to be stored in the specialized bin provided which is emptied weekly.
- E.

General Guidelines for Toilet based Life Skills Tasks

- A. First toilet on the left in toilet situated beside room 7
- B. Door remains open at all times.
- C. Staff will follow a task analysis and deliver only gestural, partial and physical prompts (no verbals)
- D. Student may follow visual prompts to be kept on wall of toilet.
- E. If skills are of a basic nature e.g. brushing teeth no second person if required.
- F. If skills are of a more intimate nature e.g. deodorant task - second person required.

Health and Safety

- Staff will wear protective gloves.
- Soiled underwear/clothes will be placed in nappy bags and sent home.
- Staff will use anti-bacterial spray provided.
- If student has a toileting accident that might allude to sickness e.g. diarrhea the student will be sent home.
- Students should keep their toiletries separate to others.
- Disinfectant and mop should be stored in a safe location away from students.

Policies related to:

Health and Safety

Child Protection

Ratification and Review:

This policy was ratified by the BOM on Nov 22nd 2022.

It will be reviewed annually or as needed.

Chairperson: Chris Pureser

Date: November 22nd 2022

Secretary: Michael Jones

Date: Nov 22 2022

APPENDIX A

Toileting Training Procedure

Guide for Parents and Staff

BASELINE:

- Nappy must come off.
- The child is taken to the bathroom every 15 minutes during his/her waking hours. This should start as soon as the child wakes up in the morning.
- You should have the child sit on the toilet for at least 5 minutes or until he/she urinates/defecates. May have to “shape” up the behaviour of sitting on the toilet by using isolated reinforcers (See Behaviour Analyst for details on how to do this). Eventually we don’t want to give any reinforcers (not edibles, tangibles, or social) for just sitting on the toilet, so this will be faded out. We want to save all of the good stuff for when they actually urinate/defecate in the toilet.
- Record whether or not he/she urinated/defecated during each 15-minute interval.
- Also record any accidents and the exact time.
- This is done for a specific number of days - e.g., 3-5 days.

Baseline Data:

- We take the data from the 3-5 days and graph the urination/defecation frequencies per each 15-minute interval (e.g., 15, 30, 45, 60, 75, 90, etc. minutes).
- We determine the highest frequency, which becomes the sliding interval.

Sliding Interval Toileting Procedure:

- Nappy stays off. Take it off first thing when they wake up in the morning or first thing when they arrive to school in the morning.
- Each child’s “sliding interval” = the highest frequency 15-minute interval we determined from the graphs.
- Really push the fluids (every half hour!)
- Start taking the child to the toilet every 15 minutes.

- Once they urinate/defecate in the toilet, take them back to the toilet according to their “sliding interval” (e.g., in 30 min., in 45 min., etc.).
- When you take them at their “sliding interval”
 - if they urinate/defecate in the toilet, take them back according to their “sliding interval”
 - if they do not, urinate/defecate in the toilet; take them every 15 min., until they do go
- If they have an accident, do not comment at all. Clean them up and have them assist.
- Then, take them back to the toilet according to their “sliding interval” and follow the steps above.

TIPS:

- Have them sit on the toilet until they have urinated/defecated, but no longer than 5 minutes.
- You may have to use an isolated toy/edible for sitting on the toilet. However, we would want to fade this out as quickly as possible.
- When a child urinates/defecates in the toilet, deliver reinforcement as it is happening (“mid-stream”)! Have a party, as this is a very big deal! J

WHY DELIVER REINFORCEMENT AS IT IS HAPPENING?

- There are so many different behaviours occurring during toileting time (pulling down pants, flushing toilet, pulling up pants, etc.).
- For the sliding interval toileting procedure we want to reinforce specifically the relaxation of the bladder.

