Personal Care and Intimate Care Policy

Wayland Stables Care Farm

Policy version: 1.0 - August 2026

Policy owner: Jake Payne, Business Manager

Approval date: To be completed on approval

Effective date: Upon approval

Next review: August 2027, or sooner after an incident, safeguarding concern or change in service offer

> **Service boundary:** Wayland Stables Care Farm (WSCF) does not provide personal care or intimate care. WSCF staff do not undertake routine hands-on toileting, washing, changing, continence, menstrual, dressing or feeding support. Any required care must be identified before placement and provided through another suitable arrangement.

1. Policy statement

WSCF provides education, therapeutic farm activity and pastoral support within its commissioned offer. It is not registered, staffed, equipped or commissioned as a personal-care provider. Staff must not accept, imply or drift into responsibility for planned personal or intimate care.

This boundary protects students' dignity and safety, gives families and commissioners accurate information, and ensures that support is delivered only by people who are appropriately authorised, trained, supervised and covered by an agreed care plan. It does not permit discrimination or the withdrawal of ordinary reasonable adjustments that fall within WSCF's competence and service offer.

> **Emergency exception only:** In an unforeseen emergency, a staff member may take the minimum necessary action to preserve life, prevent serious harm or protect a person from immediate danger or serious indignity. Emergency action must never become a planned care arrangement and must be reported, recorded and reviewed immediately.

2. Scope

This policy applies to all children and young people attending WSCF, and to staff, volunteers, agency workers, contractors, visitors and any externally arranged carer or support worker on the site, in WSCF-controlled transport or during WSCF activities. Adult participants are subject to the same service boundary, alongside the Adult Safeguarding Policy and their individual agreement.

The policy must be read with the Admissions, Referrals and Placement Suitability; SEND, Inclusion and Accessibility; First Aid, Medical Conditions, Medicines and Allergies; Safeguarding and Child Protection; Adult

Safeguarding; Staff Behaviour; Equality, Diversity and Inclusion; Data Protection; COSHH; Health and Safety; Visitor; and Serious Incident policies.

3. Definitions

Term	Meaning in this policy
Personal care	Hands-on assistance with everyday bodily or hygiene needs, including washing, bathing, dressing, grooming, eating or drinking, oral care, menstrual care, continence care or changing soiled clothing.
Intimate care	Personal care involving direct or potential contact with intimate body areas, bodily fluids or activities normally carried out in private, including toileting, changing continence products, cleaning after an accident or assisting with menstrual products.
Ordinary independence support	Environmental or communication adjustments that do not involve hands-on personal care, such as showing the location of an accessible toilet, giving general break information, providing privacy, or allowing extra time.
Emergency assistance	Unplanned, minimum necessary action in an immediate situation where delay would risk life, serious harm, safeguarding danger or serious loss of dignity. It is not routine or pre-arranged care.
External carer/support worker	A parent, carer or separately employed/commissioned person who remains responsible for the individual's agreed personal or intimate care and is not acting as a WSCF worker for that purpose.

4. Legal and guidance framework

The precise legal duties depend on the person, activity and commissioning arrangement. WSCF applies the following framework proportionately and does not claim that school-specific guidance automatically creates powers or duties for a non-school provider.

- Children Act 1989 and Children Act 2004 safeguarding principles, including the welfare of the child and coordinated safeguarding action;
- Care Act 2014 adult-safeguarding principles where an adult with care and support needs may be at risk of abuse or neglect;
- Equality Act 2010, including protection from disability discrimination and the duty to make reasonable adjustments where applicable;
- Human Rights Act 1998 principles, including dignity, privacy, bodily integrity and protection from degrading treatment;
- Health and Safety at Work etc. Act 1974 and Management of Health and Safety at Work Regulations 1999;
- UK GDPR and Data Protection Act 2018 for health, disability, continence and care information;
- Working Together to Safeguard Children and Keeping Children Safe in Education 2026, used for safeguarding alignment with commissioners; and

- DfE Non-school Alternative Provision: Voluntary National Standards, adopted by WSCF as its operating benchmark while non-statutory.

5. Responsibilities

Role	Required action
Business Owners	Maintain an honest service description; provide suitable, private and hygienic facilities within the agreed offer; resource safeguarding, first aid and emergency arrangements; oversee serious incidents and material service changes.
Jake Payne - Business Manager	Own this policy; ensure referral screening identifies care needs; approve any external-care arrangement; prevent role drift; coordinate commissioners and families; ensure incidents, complaints and safeguards are reviewed.
Manager/supervisor on duty	Confirm the daily plan and responsible external carer where applicable; protect privacy and safety; manage accidents or emergencies; notify safeguarding leads and relevant contacts; record and escalate concerns.
All WSCF staff and volunteers	Remain within the no-care boundary; do not agree informal exceptions; support independence without hands-on care; act in emergencies within competence; report disclosures, concerns, incidents and role pressure immediately.
Commissioner/registered school	Disclose needs and risks before placement; confirm that WSCF's offer is suitable; coordinate an individual plan and competent external care where needed; provide contacts, transport and review; retain statutory education/SEND duties.
Parent/carer	Provide complete current information, personal supplies and any agreed care support; remain contactable; report changes promptly; do not assume WSCF staff will provide care that has not been commissioned.
External carer/support worker	Provide only the care for which they are authorised and competent; follow their employer's care plan, safeguarding, PPE, medication and recording requirements; comply with WSCF visitor/site rules; never delegate care to WSCF staff.

6. Referral, assessment and placement suitability

Personal and intimate care needs must be discussed openly and sensitively before any placement begins. WSCF will not ask for more health information than is necessary, but a commissioner or family must not withhold information that is required to decide whether the placement can operate safely.

- The referral must state whether the person is fully independent in toileting, washing, dressing, eating/drinking and menstrual or continence management during the proposed session.
- WSCF will consider communication, mobility, cognition, sensory regulation, behaviour, medication, seizures, swallowing risk, fatigue, menstrual needs, continence, emergency evacuation and access to suitable facilities.
- A disability or care need does not automatically make a person unsuitable. WSCF must consider reasonable adjustments within its competence and whether an external carer can safely enable access without transferring care responsibility to WSCF.

- A placement must not start until responsibilities, contacts, equipment, supplies, privacy, infection controls, transport, emergency action and review arrangements are written and understood.
- If essential care cannot be provided safely within an agreed external arrangement, WSCF may decline or pause the placement and explain the functional safety reason. The commissioner must consider another suitable provision or support package.
- Any new, increased or previously undisclosed care need triggers an urgent suitability review before the person next attends, unless an immediate safeguarding or emergency plan is agreed.

7. What WSCF staff may and may not do

Within WSCF's ordinary role	Not provided by WSCF staff
Show a person where the toilet, accessible toilet, handwashing point or private changing space is located.	Accompany a person into a toilet to supervise or assist with toileting, except minimum emergency action.
Give general information about breaks; respond to a student's request to use the toilet; protect privacy and allow sufficient time.	Wipe, wash or clean intimate areas; change continence products; assist with catheter, stoma or bowel/bladder procedures.
Provide access to the person's own sealed supplies and a safe disposal route without handling used items.	Insert, remove or change menstrual products; handle used continence or menstrual items as a routine care task.
Offer calm verbal reassurance and contact the named parent/carer, commissioner or external carer.	Undress, dress or change a person's soiled clothing; provide hands-on washing, bathing, grooming or oral care.
Make agreed environmental, timetable, communication or mobility adjustments within staff competence.	Provide routine hands-on feeding, drinking or swallowing support; undertake clinical care or a moving-and-handling task outside training and plan.
Give first aid or emergency medicine under the First Aid and Medical Policy and within training/authorisation.	Describe first aid, reassurance, behaviour support or reasonable adjustments as permission to deliver planned personal care.

> **No informal consent:** A student, parent, commissioner or colleague cannot create a personal-care service by asking a WSCF worker to 'just help this once' as a planned arrangement. Staff must refer the request to the manager and use the agreed collection, external-care or placement-review process.

8. Toileting, menstrual needs, continence and accidents

- Students who attend without an external carer must be able to use the toilet and manage clothing, hygiene, menstrual products and continence needs independently during their session.
- Students may bring clearly identified personal supplies in a discreet sealed bag. Supplies and health information must be accessible to the person without unnecessary disclosure to peers.
- Staff may make the area private, keep others away, provide access to the person's supplies, give simple verbal information from outside the private space and contact the agreed adult. Staff must not observe, inspect or physically assist as routine practice.

- After an accident, the student should self-clean and self-change if able. If they cannot, staff contact the parent/carer, external carer or commissioner for prompt assistance or collection and supervise welfare from an appropriate distance.
- Soiled clothing or personal items handled by the student or their carer should be double-bagged or placed in an agreed sealed container and taken home. WSCF staff do not rinse or launder personal items.
- A student is never shamed, punished, publicly identified or denied reasonable toilet access because of menstruation, continence, disability, distress or an accident.
- Repeated accidents, distress, pain, altered continence or an unexplained change in self-care may indicate a medical, neglect or safeguarding concern and must be reported through the appropriate route.

9. First aid, medical support and physical assistance

First aid is not the same as routine personal care. Trained staff may assess an injury, give first aid, administer authorised emergency medicine or follow a current medical plan under the First Aid and Medical Policy. Where first aid involves exposure of the body, staff use the minimum necessary contact and exposure, explain what they are doing where possible, preserve dignity and seek appropriate assistance.

WSCF does not provide clinical personal care, tube feeding, suction, catheter or stoma care, invasive procedures, routine skin care, or planned moving and handling. A separate external arrangement and competent risk assessment are required where such support is necessary. Any uncertainty is escalated before attendance or before the task is attempted.

10. Unforeseen emergency procedure

There is no blanket rule that prevents a staff member from protecting a person in an emergency. The response must be necessary, proportionate, the least intrusive option reasonably available and within the responder's capability. Call 999 immediately where life, serious injury or urgent clinical need may be involved.

1. Make the area safe, summon another staff member where this will not delay urgent help, and protect the person from public view.
2. Explain what is happening in a way the person can understand and seek consent where practicable. Do not delay life-saving action where valid consent cannot be obtained.
3. Use the least contact and least exposure required. Encourage the person to do as much as they safely can for themselves. Do not photograph or use personal devices.
4. Use appropriate first-aid supplies or PPE without delaying urgent care. Avoid unnecessary moving, restraint, examination or removal of clothing.
5. Call 999, the parent/carer, external carer and commissioner as appropriate. If there is a safeguarding concern, contact the designated safeguarding lead immediately and follow the safeguarding policy.
6. Record facts promptly: circumstances, people present, consent/communication, action and contact, body areas exposed or touched where relevant, PPE, advice, notifications and outcome.

7. The Business Manager completes an immediate suitability, safeguarding and risk review before return. Repeated emergency reliance is evidence that the current placement arrangement is not adequate.

11. External carers and site arrangements

- An external carer must be named, expected, booked and signed in under the Visitor Policy unless another controlled staffing arrangement applies. Identity and organisation must be verified.
- The commissioner or carer's employer remains responsible for safer recruitment, training, competence, supervision, insurance, care plans, equipment, PPE, medicines and care records. WSCF may request assurance proportionate to the risk.
- The manager must approve the space and timing for care, considering privacy, safeguarding, infection control, cleaning, emergency access and the security of other students. WSCF does not automatically provide a specialist changing facility or lifting equipment.
- The external carer remains responsible for the person during the care task and must tell the manager promptly about injury, distress, disclosure, contamination, equipment failure or a change that affects the placement.
- WSCF staff do not act as a second carer, witness or informal assistant unless a genuine emergency requires minimum action. If two-person care is required, the commissioner must provide both competent people.
- Any concern about an external carer's conduct is treated as a safeguarding concern and managed through the relevant safeguarding, staff-allegation and visitor procedures.

12. Safeguarding, dignity and professional boundaries

- Treat every person with respect, use their preferred communication method, avoid assumptions about gender or disability, and preserve privacy without creating unsafe secrecy.
- Never use humiliation, threats, withholding toilet access, forced exposure, punishment, unnecessary touch or care as a behaviour-management measure.
- Do not ask intrusive questions, examine a person's body, diagnose the cause of an accident or promise confidentiality. Listen, reassure and report.
- A disclosure, injury, unexplained mark, pain, fear of a carer, sexualised behaviour, neglect concern or allegation must be reported immediately to the designated safeguarding lead. Evidence is preserved; staff do not investigate themselves.
- A concern about a staff member, volunteer, contractor, carer or manager follows the staff-allegation/low-level-concern route. The person implicated must not control the referral.
- Students may raise concerns through a trusted adult, parent/carer, commissioner, WSCF complaints route or safeguarding route. They must not experience retaliation or loss of dignity for doing so.

13. Hygiene, bodily fluids and waste

Blood, vomit, urine, faeces and contaminated materials are managed as potential biological hazards under the First Aid, COSHH and infection-control arrangements. Staff use appropriate PPE, handwashing, isolation, cleaning and waste controls for the environment; this does not authorise them to provide intimate care to the person.

- Keep students and animals away from the affected area and obtain trained help. Do not leave a distressed person without appropriate supervision.
- Use disposable gloves and any additional assessed PPE for environmental cleaning; cover cuts; avoid splashes and sharps; wash hands after removing PPE.
- Use the approved spill kit, disinfectant, contact time and waste route. Do not use farm, food or animal equipment for bodily-fluid cleaning.
- Report exposure to broken skin, eyes, mouth or a sharps injury immediately and obtain prompt medical advice under the exposure procedure.
- Restock supplies, record significant contamination or exposure and review the cause and control failure before reopening the area.

14. Information, records and confidentiality

- Record only information needed for placement safety, safeguarding, health, equality and accountability. Health and care information is special-category personal data and receives additional protection.
- Share relevant information with staff, carers, commissioners, emergency responders or safeguarding agencies on a need-to-know and lawful basis. Safety information must not be withheld where sharing is necessary to protect a person.
- Keep referral decisions, external-care agreements, risk assessments, relevant plans, incidents, notifications, complaints, training and review actions within the controlled record system.
- Do not record intimate details in routine emails, messaging groups, personal notes or personal devices. Do not take photographs of accidents, bodily fluids, injuries or intimate areas unless a lawful safeguarding authority specifically directs and controls evidence collection.
- Records must distinguish observed fact, the person's own words, action taken and professional opinion. Corrections must remain auditable and retention follows the Data Protection Policy.

15. Training, concerns and review

- Induction and refreshers cover the no-care boundary, definitions, reasonable adjustments, referral escalation, safeguarding, first aid, consent, emergency action, bodily-fluid controls, recording and complaints.
- Staff must tell the manager if they feel pressured to provide care, if a family or commissioner assumes care will be given, or if the actual need differs from the referral. Raising the concern is a safety duty, not a refusal to support disability.

- The manager reviews any emergency intimate assistance, repeated accident, safeguarding issue, external-carer concern, complaint or near miss promptly and assigns actions with owners and dates.
- The Business Owners review the policy annually and before any proposal to change the service offer. WSCF must not begin providing personal or intimate care through custom and practice; a formal legal, regulatory, insurance, staffing, training, premises and commissioning review is required first.

Appendix A - Referral and readiness checklist

- The referral confirms whether the person is independent in toileting, hygiene, dressing, eating/drinking, menstrual and continence needs for the full session and transport period.
- Communication, mobility, medical, sensory, cognitive, safeguarding and emergency-evacuation factors have been assessed without assumptions.
- Reasonable adjustments within WSCF's service and competence have been identified and agreed.
- If care is required, the named external provider, care responsibility, staffing level, competence assurance, plan, supplies, equipment, PPE, insurance and contacts are confirmed.
- The approved care space, privacy, cleaning, waste, visitor, medication, transport and emergency arrangements are workable on the farm site.
- The student and parent/carer understand that WSCF staff do not provide personal or intimate care and know how to request assistance or report a concern.
- The commissioner, WSCF manager and relevant safeguarding/medical leads have approved the arrangement, with a review date and escalation route recorded.

Appendix B - Staff immediate-action guide

Situation	Immediate action
Planned care requested from WSCF staff	Do not undertake it. Protect dignity; contact the manager; use the agreed external carer, collection or commissioner route; record pressure or a material referral gap.
Student has an accident but can self-manage	Provide privacy and access to their own supplies; remain available at an appropriate distance; arrange safe environmental cleaning; contact the agreed adult if needed.
Student cannot self-manage and there is no immediate danger	Do not provide hands-on care. Protect privacy and welfare; contact parent/carer, commissioner or external carer for prompt attendance/collection; escalate safeguarding or medical concerns.
Immediate threat to life or serious harm	Call 999 where required; summon help; take the minimum necessary action within capability; preserve dignity; follow first aid/safeguarding procedures; notify, record and review.
Disclosure or concern about care	Listen, reassure and do not investigate. Report immediately to the designated safeguarding lead; preserve evidence and use an independent route if the usual person is implicated.
Actual need exceeds the agreed arrangement	Make the person safe; inform the manager and commissioner; pause affected activity/attendance as necessary; complete an urgent placement and risk review before return.

Appendix C - Minimum incident record

Field	Required information
Person and context	Name/identifier, date/time, location, activity, staff/carers present and relevant plan or known need.
What happened	Observed facts, student's own words, reason assistance was requested or required, immediate risks and whether the event was foreseeable.
Consent and dignity	Communication used, consent/capacity considerations, privacy measures, witnesses and steps taken to minimise contact and exposure.
Action	First aid, emergency assistance, body area/contact only where necessary for accountability, PPE, cleaning, 999/clinical/safeguarding advice and outcome.
Notifications	Manager, safeguarding lead, parent/carer, commissioner, external carer, emergency service or regulator as applicable, with times and names.
Review	Suitability decision, welfare follow-up, risk/plan/training changes, action owner, due date and confirmation of closure.

Sources and related guidance

Non-school Alternative Provision: Voluntary National Standards — Department for Education, August 2025.

Keeping Children Safe in Education 2026 — Department for Education.

Working Together to Safeguard Children — HM Government.

Code of Practice on Services, Public Functions and Associations - Reasonable Adjustments — Equality and Human Rights Commission, August 2026.

Care and Support Statutory Guidance — Department of Health and Social Care.

WSCF Admissions, SEND, First Aid/Medical, Safeguarding, Adult Safeguarding, Staff Behaviour, EDI, Data Protection, COSHH and Serious Incident policies — Wayland Stables Care Farm.

Revision history and approval

Version	Date	Summary of change	Owner
1.0	Aug 2026	New policy confirming that WSCF does not provide personal or intimate care; sets referral, independence, external-care, emergency, safeguarding, hygiene and recording controls.	Jake Payne

Approval record

Approved by	Role	Signature	Date

Next review due: August 2027, or sooner under section 15.