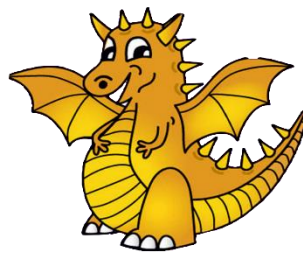




**Wessex**  
Learning Trust  
We Learn Together!

# Early Years: Intimate Care and Nappy Changing Policy



**Date approved by Trust Board: September 2024**  
**Review Date: September 2027**

## **Wessex Learning Trust**

### **Intimate Care and Nappy Changing Policy**

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This policy will be reviewed by the Board of Trustees every three years.



Signature:

Name: Mr Gavin Ball

Position: Chief Executive

Date: 01/09/2024



Signature:

Name: Mr Paul Jacobs

Position: Chair of the Board

Date: 01/09/2024

## **1. Introduction**

1.1 Nappy changing is an important part of every child's young life and the Trust believes that this time, while practical, should also be treated as key times in the day for 'tuning-in' to a child, nurturing them, and promoting security as well as communication, exploration and learning.

1.2 Settings will liaise with parents/carers and discuss any routines or language that they use with their child whilst having nappy changes and toileting and where possible, settings will support this.

1.3 This policy outlines how nappy changing, toileting and intimate care should be carried out in our early years settings, so as to be a relaxed time for the child; while also maintaining their welfare, independence, and dignity. Settings are advised to speak to the child's parents/carers to find out their nappy changing routine at home.

1.4 This policy should be read in conjunction with settings' own intimate care procedures.

1.5 Providers must ensure:

- There is an adequate number of toilets and hand basins available – there should usually be separate toilet facilities for adults
- There are suitable hygienic changing facilities for changing any children who are in nappies

## **2. Nappy Changing**

2.1 Babies/young children must usually be changed within sight or hearing of other staff whilst maintaining their dignity and privacy at all times. Where the layout of the setting makes this difficult to achieve, the setting manager must complete a risk assessment to ensure that appropriate alternative arrangements can be put in place.

2.2 In the first instance, a child's key person should undertake changing for their key groups, with back up Key persons changing in their absence. Key persons must have a list of personalised changing or checking times for the babies and toddlers in their care.

2.3 Changing areas should be warm with no bright lights shining down into the baby or toddlers' eyes. There should be mobiles or other objects of interest to take their attention.

2.4 While being changed, each child should have their own basket/bag to hand, containing their nappies and changing wipes; there may also be a special toy for the child to play with.

2.5 All members of staff should be made familiar with the appropriate hygiene procedures and carry these out when changing nappies. This includes putting on aprons and preparing the changing area before changing starts. Gloves should always be worn for soiled nappies.

2.6 The key person changing a child should ensure that the experience is a relaxed and happy time, and that they are gentle when changing – allowing time to communicate with the child, talking, and responding to their sounds. They should allow time for play and 'rituals' that the child enjoys.

2.7 The changer must never turn their back on a child or leave them unattended on a changing mat. They must also avoid pulling faces or making negative comment about the nappy contents.

2.8 The changer must not make inappropriate comments about the child's genitals, nor attempt to pull back a baby boy's foreskin to clean.

2.9 There should be an adequate supply of clean bedding, towels, spare clothes, and any other necessary items.

### **3. Nappy Changing Records**

3.1 Key persons must record when they changed the child and whether the child passed a stool and if there was anything unusual about it e.g. hard and shiny, soft and runny or an unusual colour.

3.2 If the child does not pass a stool, or they strain to do so, or is passing hard or shiny stools, the parents/carers will be informed. The child may be constipated so their feed may need to be adjusted by parents/carers. Constipation in children is not 'normal' and every effort is made with the parent/carer to help them adjust the diet until soft, formed stools are passed.

3.3 A stool that is an unusual colour can usually be related to the food that was eaten, so it is important that this is noted. However, a stool that is black, green or very white indicates a problem, and the parent/carer should be advised so they can arrange an appointment with their doctor.

3.4 Very soft, watery stools are signs of diarrhoea; strict hygiene needs to be carried out in cleaning the changing area to prevent spread of infection. The parent/carer should be called immediately to collect their child, who must be taken to the doctor. The child must have passed at least two formed stools before returning to the setting.

3.5 Sometimes a child may have a sore bottom. There are various reasons why this may have happened, including the child may have eaten something that, when passed, created some soreness or the child may be allergic to a product being used. This must be noted and discussed with the parent/carer and a plan devised and agreed to help heal the soreness. This may include use of nappy cream or leaving the child for a period of time without a nappy in some circumstances. If a medicated nappy cream such as Sudocrem is used, this must be recorded as per procedure in the 'Administration of Medicine Policy.'

### **4. Young Children, Intimate Care and Toileting**

4.1 Wherever possible, key persons undertake changing young children in their key groups; back-up key persons change them if the key person is absent.

4.2 Young children, from two years, may be put into 'pull ups' as soon as they are comfortable with this and this is part of a discussion with parents/carers.

4.3 Changing areas should be warm, appropriately sited and have safe areas to lay young children if they need to have their bottoms cleaned. There should be mobiles or other objects of interest to take the child's attention.

4.4 If children refuse to lie down for nappy change, they can be changed whilst standing up, providing it is still possible to clean them effectively.

4.5 Each young child should have their own basket/bag to hand with their nappies/pull ups and changing wipes, and key persons should ensure that nappy changing is relaxed and a time to promote independence in young children.

- 4.6 All members of staff should be made familiar with the appropriate hygiene procedures and carry these out when changing (as above).
- 4.7 Young children should be encouraged to take an interest in using the toilet – for instance sitting on it.
- 4.8 Where a child has used the toilet, they should be encouraged to wash their hands and have soap and paper towels to hand. They should be allowed time for some play as they explore the water and the soap.
- 4.9 Wipes or cotton wool and water should be used to clean children. Where a family's cultural practices require children being washed and dried with towels, staff must aim to make reasonable adjustments to achieve the desired results in consultation with the child's parents/carers. Where this is not possible however, it should be explained to parents/carers the reasons why. The use of wipes or cotton wool and water achieves the same outcome whilst reducing the risk of cross infection from items such as towels that are not 'single use' or disposable.
- 4.10 The procedure for dealing with sore bottoms is the same as that in section 3.
- 4.11 Older children should be allowed to use the toilet when needed and encouraged to be independent. Members of staff should not wipe older children's bottoms unless there is a need, or unless the child has asked.
- 4.12 Key persons are responsible for changing where possible. Back-up key persons take over in the key person's absence, but where it is unavoidable that other members of staff are brought in, they must be briefed as to their responsibilities towards the children, so that no child is inadvertently overlooked and that all children's needs continue to be met.
- 4.13 Parents/carers are encouraged to provide enough changes of clothes for 'accidents' when children are potty training. If spare clothes are kept by the setting, where possible, they should be 'gender neutral' i.e. neutral colours, and be clean, in good condition and are in a range of appropriate sizes. Children should not be able to be made to feel humiliated should they have to wear the setting's clothes.
- 4.14 If young children are left in wet or soiled nappies/pull-ups in the setting, this may constitute neglect and will be a disciplinary matter.

## **5. Other Considerations**

- 5.1 Nappy changing must always be done in an appropriate/designated area. Children should not be changed in play areas or next to snack tables. If there are limitations for nappy change areas due to the lay-out of the room or space available this must be discussed with the setting manager's line manager so that an appropriate site can be agreed that maintains the dignity of the child and good hygiene practice.
- 5.2 Staff are reminded that at all times they have a duty of care towards the children they are looking after, and that if in the course of nappy changing or other intimate care they notice something about a child which doesn't seem right they should report this immediately to the centre manager and/or designated safeguarding lead (or their deputy) so as appropriate action can be taken.