09 Early years practice procedures

**09.9 Prime times – Intimate care and nappy changing**

Nappy changing times are key times in the day for being close and promoting security as well as for communication, exploration and learning.

* Young children are usually changed within sight and 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 completes a risk assessment to ensure that alternative arrangements are in place.
* Key persons undertake changing children in their key groups wherever possible.
* Nappy changing areas are warm; there are no bright lights shining down in eyes.

\* Gloves are always worn for soiled nappies

* All members of staff are familiar with the hygiene procedures and carry these out when changing nappies.
* Members of staff ensure that nappy changing is relaxed and a happy time for young children
* Staff never turn their back on a child or leave them unattended on a changing mat.
* Staff avoid pulling faces and making negative comment about the nappy contents.
* Each child has their own nappies and wipes, we have a supply in case anyone forgets them or needs changing more than once.
* If a children refuse to lie down for nappy change, they can be changed whilst standing up, providing it is possible to clean them effectively.
* Young children are encouraged to take an interest in using the toilet, they may just want to sit on it and talk to a friend who is also using the toilet.

**Young children, intimate care and toileting**

* Young children from two years may be put into ‘pull ups’ as soon as they are comfortable with this and if parents agree.
* They are 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.
* Anti-bacterial hand wash liquid or soap should not be used by young children, as they are no more effective than ordinary soap and water.
* Key persons are gentle when changing and avoid pulling faces and making negative comment about the nappy contents.
* Wipes or cotton wool and water are used to clean the child. Where cultural practices involve children being washed and dried with towels, staff aim to make reasonable adjustments to achieve the desired results in consultation with the child’s parents. Where this is not possible it is explained to parents 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.
* Key persons do not make inappropriate comments about young children’s genitals when changing their nappies.
* Sometimes it may be necessary to do a written record of the changing of a nappy. To make notes of changes, health and safety, safeguarding or to inform parents.
* Most comments about having a sore bottom, loose stools etc will be conveyed verbally to parents.
* Older children use the toilet when needed and are encouraged to be independent.
* Members of staffs do not wipe older children’s bottoms unless there is a need, or unless the child has asked.
* Staff must be briefed as to their responsibilities towards designated children, so that no child is inadvertently overlookedand that all children’s needs continue to be met.
* Parents are encouraged to provide enough changes of clothes for ‘accidents when children are potty training.
* If spare clothes are kept by the setting, they are ‘gender neutral’ i.e. neutral colours, and are clean, in good condition and are in a range of appropriate sizes.
* 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.

Nappy changing is always done in an appropriate/designated area. Children are not 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 is 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.