

## 09 Childcare practice procedures

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

Prime times of the day make the very best of routine opportunities to promote 'tuning-in' to the child emotionally and to create opportunities for learning. 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, intimate care and toileting

- Children are changed within sight or hearing of other staff whilst maintaining their dignity and privacy at all times.
- Staff have a list of personalised changing or checking times for the children in their care.
- Key persons undertake changing their key children wherever possible during settling-in; back up key persons change them if the key person is absent where possible. Where it is unavoidable that other members of staff are brought in, they must be briefed as to their responsibilities towards designated children, so that no child is inadvertently overlooked and that all children's needs continue to be met.
- Nappy changing areas are warm; there are no bright lights shining down children's' eyes.
- There are posters of interest to take the children's attention.
- 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.
- Each child has their own bag to hand, containing their nappies, cream and changing wipes etc.
- Members of staff always put on gloves for soiled nappies and plastic aprons are available.
- All members of staff are familiar with the hygiene procedures and carry these out when changing nappies.
- Staff ensure that nappy changing is relaxed and a happy time for children and a time to promote independence in young children.
- Staff never turn their back on a child or leave them unattended on a changing mat.
- Staff are gentle when changing; they allow time for communicating, talking, and responding to the child.
- Staff avoid pulling faces and making negative comment about the nappy contents.
- Staff do not make inappropriate comments about children's genitals, nor attempt to pull back a baby boy's foreskin to clean unless there is a genuine need to do so for hygiene purposes.
- 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.

- Wipes are used to clean the child. Where cultural practices involve children being washed and dried with towels, staff explain to parents the reasons why this is not possible in the setting and that 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.
- Young children may be put into 'pull ups' as soon as they are ready to start toilet training.
- Parents are encouraged to provide enough changes of clothes for 'accidents when children are potty training.
- 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.
- 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.
- Older children use the toilet when needed and are encouraged to be independent.
- Members of staff do not wipe older children's bottoms unless there is a medical need, or unless during toilet training the child has asked.
- We have limited spare clothes kept in the setting, they are clean, in good condition and there is a small range of sizes.

### **Nappy changing records.**

- Staff record when they changed children and whether the nappy was wet or soiled and if there was anything unusual about it e.g., hard and shiny, soft and runny or an unusual colour. This is then sent to parents at the end of the day via the care diary on Tapestry.
- If the child strains to pass a stool, or is passing hard or shiny stools, the parents will be informed. Constipation in children is not 'normal' and parents will be advised to adjust their child's diet or seek further help from the health visitor or doctor.
- 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 child should be taken to the doctor.
- 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 should be called immediately to collect their child, who must be taken to the doctor. The child will not be able to return until 48 hours after the last bout of diarrhoea unless during an epidemic or pandemic etc. then this will change to 72 hours.
- Sometimes a child may have a sore bottom. This may have happened at home as a result of poor care; or the child may have eaten something that, when passed, created some soreness. The child also may

be allergic to a product being used. This must be noted and discussed with the parent and a plan devised and agreed to help heal the soreness. This may include use of nappy cream, if a medicated nappy cream such as Sudocrem is used, this must be recorded on the care diary any other medicated cream must be recorded prior to use as per procedure 04.2 Administration of medicine.

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.