

PUDDLEDUCKS Nursery and Pre-School

CHILDREN'S BATHROOM HYGIENE AND INTIMATE CARE POLICY

Health and safety procedures

Children's bathrooms/changing areas

- Older babies/toddlers have low changing surfaces they can climb on to, or floor surface is used. Staff should not have to lift heavy toddlers on to waist high units.
- Changing mats are cleaned and disinfected in baby change areas.
- Disposable nappies/trainers are cleared of solid waste and placed in nappy disposal units.
- Staff use single use gloves and aprons to change children and wash hands when leaving changing areas. Please note that gloves are not always required for a wet nappy if there is no risk of infection, however, gloves are always available for those staff who choose to wear them for a wet nappy. Gloves are always worn for a 'soiled' nappy.
- Staff never turn their backs on or leave a child unattended whilst on a changing mat.
- Changing areas or stands are provided for older (disabled) children, if required.
- Changing mats used for babies are covered in tissue roll for each change.
- Changing mats are disinfected after each change.
- Anti-bacterial spray is not used where residue may have direct contact with skin.
- Anti-bacterial sprays used in nappy changing areas are not left within the reach of children.
- Natural or mechanical ventilation is used; chemical air fresheners are not used.
- All other surfaces are disinfected daily.

Children's toilets and wash basins

- Children's toilets are cleaned daily using disinfectant cleaning agent for the bowls (inside and out), seat and lid, and whenever visibly soiled.
- Toilet flush handles are disinfected daily.
- Toilets not in use are checked to ensure the U-bend does not dry out and are flushed every
 week. Taps not in use are run for several minutes every two to three days to prevent
 infections such as Legionella.
- There is a toilet brush available for children's toilets. These are stored at a high level out of the reach of children, along with a separate cleaning cloth.
- Cubicle doors and handles (or curtains) are washed weekly.
- Children's hand basins are cleaned daily and whenever visibly soiled, inside, and out using
 disinfectant cleaning agent. Separate cloths are used to clean basins etc. and are not
 interchanged with those used for cleaning toilets.
- Mirrors and tiled splash backs are washed daily.
- Towels are provided twice a day, paper towels available to manage infection control
- Bins are provided for disposal of paper towels and are emptied daily.
- All bins are lined with plastic bags.
- Staff who clean toilets wear rubber gloves.
- Staff changing children wear gloves and aprons as appropriate.
- Wet or soiled clothing is sluiced, rinsed, and put in a plastic bag for parents to collect.
- Floors in children's toilets are washed daily.
- Spills of body fluids are cleared immediately and mopped using disinfectant.
- Mops are rinsed and wrung after use and stored upright, not stored head down in buckets.

- Mops used to clean toilets or body fluids from other areas are designated for that purpose only and kept separate from mops used for other areas.
- Used water is discarded down the butler sink.
- Butler sinks and sluices are cleaned and disinfected at the end of each day.

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.

Babies

- Babies/young children are usually 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 completes a risk assessment to ensure that
 alternative arrangements are in place
- Key persons have a list of personalised changing or checking times for the babies and toddlers in their care.
- Key persons undertake changing babies in their key groups wherever possible; back up key persons change them if the key person is absent.
- Nappy changing areas are warm; there are no bright lights shining down in babies' eyes.
- There are mobiles or other objects of interest to take the baby's attention.
- Members of staff put on aprons before changing starts and the area is prepared, gloves are always worn for soiled nappies.
- All members of staff are familiar with the hygiene procedures and carry these out when changing nappies.
- Key persons ensure that nappy changing is relaxed and a happy time for babies.

- Key persons never turn their back on a child or leave them unattended on a changing mat.
- Key persons are gentle when changing; they allow time for communicating with the baby,
 talking, and responding to the baby's sounds. They allow time for play and 'rituals' that the
 baby enjoys, such as gently tickling tummies or toes.
- Key persons avoid pulling faces and making negative comment about the nappy contents.
- Key persons do not make inappropriate comments about babies' 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.

Nappy changing records.

- Key persons record when they changed the baby and whether the baby passed a stool and if there was anything unusual about it e.g. hard and shiny, soft and runny or an unusual colour.
- If the baby does not pass a stool, or if he/she strains to do so, or is passing hard or shiny stools, the parents will be informed. The baby may be constipated so their feed may need to be adjusted. Constipation in babies is not 'normal' and every effort is made with the parent to help them adjust the diet until soft, formed stools are passed.
- 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 baby must have passed at least 2 formed stools before returning.
- Sometimes a baby may have a sore bottom. This may have happened at home as a result of poor care; or the baby may have eaten something that, when passed, created some soreness. The baby 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 or leaving the baby without a nappy in some circumstances. If a

medicated nappy cream such as Sudocrem is used, this must be recorded as per procedure Administration of medicine.

Young children, intimate care and toileting

- Wherever possible, key persons undertake changing young children in their key groups;
 back-up key persons change them if the key person is absent.
- Young children from two years may be put into 'pull ups' as soon as they are comfortable with this and if parents agree.
- Changing areas are warm, appropriately sited and there are safe areas to lay young children if they need to have their bottoms cleaned. There are mobiles or other objects of interest to take the child'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.
- Key persons ensure that nappy changing is relaxed and a time to promote independence in young children.
- 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 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.
- The procedure for dealing with sore bottoms is the same as that for babies.
- 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
- 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 designated children, so that no child is inadvertently overlooked and 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.

Students or volunteers working in the setting are not permitted to change or monitor nappies or toileting

This policy was reviewed September 2021. Date of next review January 2022