

Safeguarding and Welfare Requirement: Health

Nappy changing

Policy statement

We welcome all children, including those who are not yet toilet trained or who require nappies, pull-ups, or toileting support for medical, developmental, or additional needs. No child will ever be excluded or discriminated against based on continence or intimate care needs.

We view toilet learning as a positive self-care milestone, supported sensitively, respectfully and in partnership with parents/carers.

We ensure the highest standards of hygiene, dignity and safeguarding at all times, in line with the EYFS statutory framework for group and school-based providers effective from 1 September 2026, Working Together to Safeguard Children 2026, current UKHSA infection-prevention guidance and Bromley safeguarding arrangements.

September 2026 update: intimate care and toileting practice must be inclusive, child-centred and risk assessed. Children are supported according to their communication, sensory, developmental, medical and SEND needs; reasonable adjustments are made where required; and safeguarding concerns are acted on without delay.

Key Principles

- Children's privacy, dignity and emotional wellbeing are prioritised at all times.
- Intimate care is carried out in a safe, professional and respectful manner.
- Children are supported according to age, stage of development, SEND needs and parental preferences.
- Staff follow all safer working practice expectations, including appropriate supervision and clear boundaries.
- Children are never shamed or punished for toileting accidents, delayed toilet training, or sensory/medical needs.

Procedures for Nappy Changing

Staffing & Safeguarding

- Key persons change their key children whenever needed; a backup key person steps in if the main key person is unavailable.
- Nappy changing and intimate care are carried out only by staff whom the provider has assessed as suitable for their role and who have received appropriate safeguarding, intimate-care and infection-prevention induction/training. Required safer-recruitment and DBS checks are completed in line with the setting's Employment/Suitable People Policy and current EYFS requirements.
- Staff never leave a child unattended on a changing mat or in the changing area.

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- The changing area is warm, clean, and designed to ensure safety and supervision while respecting children's privacy.

Preparation & Equipment

- Parents must supply nappies, wipes, creams (with permission), nappy sacks and spare clothes daily.
- The changing surface is prepared for each child and kept visibly clean. Disposable paper/liner may be used where this forms part of the setting's infection-control procedure.
- Disposable gloves and a disposable plastic apron are worn where contact with urine, faeces or other body fluids is anticipated, including for soiled nappies/continence pads. PPE is changed between children and hands are washed after removal.
- For a wet nappy/change where body-fluid contact is not anticipated, PPE is used according to the task and infection-control risk assessment; gloves do not replace handwashing.
- Changing mats are wiped after every use with soapy water or a mild detergent wipe, and at the end of each day. Mats are checked at least weekly for tears or damage and are discarded if the cover is damaged, in line with current UKHSA guidance.
- Where possible, the designated nappy-changing area is away from play areas and from places where food or drink is prepared or consumed, and has appropriate handwashing facilities available.
- Nappy creams and lotions are labelled with the individual child's name, are not shared between children, and are used only with parental permission/in accordance with the Administering Medicines policy where applicable.

During the Nappy Change

Staff must:

- Speak to children kindly and respectfully throughout.
- Maintain appropriate touch, boundaries and professionalism.
- Never make negative comments about nappies, toileting, smell, or the child's body.
- Support independence where appropriate (e.g., helping to undress, washing hands).

Nappy changing is used as a positive, calm care moment that supports relationship building and language development.

Hygiene & Disposal

- Soiled nappies are wrapped/bagged before disposal in general waste unless the setting uses a separate offensive-waste collection system. Waste is handled and stored securely and hygienically.
- Faeces from reusable nappies or potties are disposed of hygienically into the toilet where practicable, without rinsing nappies in handwashing or food-preparation sinks.

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- Soiled or wet reusable nappies, trainer pants or clothing are placed in a sealed, clearly identified bag/container and returned to parents/carers; staff do not rinse soiled clothing by hand.
- Staff wash and dry their hands with liquid soap and warm running water after every nappy/continence change, before handling another child or leaving the changing area. Children are supported to wash and dry their hands after toileting or a change, as developmentally appropriate.
- Alcohol hand rub and gloves do not replace handwashing after nappy changing or toileting. Skin-care products are used in accordance with individual need and infection-prevention guidance.

Toilet Training Procedures

Partnership with Parents

- Toilet training begins when the child is developmentally ready and in consultation with parents/carers.
- Strategies are consistent between home and the setting.
- Parents are encouraged to supply pull-ups or trainer pants when children are ready.

Promoting Independence

We support children through:

- Encouraging them to sit on the toilet or potty if they wish.
- Allowing children time to explore the bathroom environment safely.
- Helping them learn to wipe, flush, dress and wash hands.
- Encouraging communication about toileting needs, without pressure.

Older or more independent children have free access to toilets with appropriate supervision. Where potties are used, a designated sink that is not a handwash basin is used for cleaning. Staff wear disposable gloves to empty contents into the toilet, wash the potty in hot soapy water, dry it and store it upside down; potties are not stacked inside one another.

Intimate Care and Dignity

- Staff follow our Intimate Care & Safer Practice procedures.
- No mobile phones or recording devices are permitted in the changing area.
- Intimate care is organised so that safeguarding and privacy are both protected. Another practitioner/manager knows that the change is taking place and staff remain appropriately accountable and observable within the setting's safer-working arrangements; a blanket requirement for two adults to be present is not imposed unless an individual risk assessment or care plan requires it.
- Children's bodies are respected; unnecessary exposure is avoided.

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- The child is told what is happening in language/communication they can understand and is encouraged to participate and consent as far as developmentally possible. Any distress, refusal, unexplained injury, unusual behaviour or disclosure is responded to sensitively and referred to the DSL where safeguarding concerns arise.

Additional Needs, SEND or Medical Toileting

We support children who:

- Have delayed continence
- Have medical needs or disabilities
- Require bespoke toileting plans

For such children, we complete a Toileting / Intimate Care Plan, which includes:

- Specific support needs
- Equipment requirements
- Step-by-step care procedures
- Staff training requirements
- Parent agreement and review dates

Specialist training, equipment and/or individual risk assessment may be required for medical or complex intimate-care procedures. Where appropriate, the setting works with parents/carers, health professionals, the SENCO and Bromley Early Years Inclusion Team; parental awareness/consent is obtained for referrals where required by the service.

Reasonable adjustments are planned proactively. A child is not excluded, disadvantaged or delayed in accessing provision solely because they are not toilet trained or because of disability, SEND, medical or continence needs.

Record Keeping

We maintain:

- Nappy/Intimate Care logs
- Accident/incident logs
- Records of creams/ointments administered (with parental consent)
- Toilet training plans as needed

Parents are informed of significant changes, repeated loose stools, concerns about rash, or patterns that may indicate illness.

Repeated diarrhoea, vomiting or other symptoms of infectious illness are managed in accordance with the setting's sickness/infection policy and the current UKHSA public-health exclusion guidance (updated 7 September 2026).

Duty of Care & Safeguarding

- Children must never remain in wet or soiled nappies or clothing for extended periods.

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- Possible indicators of neglect or other harm are considered in context and with professional curiosity. Persistent unmet hygiene needs, significant or unexplained soreness/injury, changes in behaviour, disclosures or other concerns are recorded factually and handled under the Safeguarding & Child Protection Policy; staff do not investigate concerns themselves.
- Safeguarding concerns are reported promptly to the Designated Safeguarding Lead. Where necessary, the DSL follows current Bromley Safeguarding Children Partnership and London Child Safeguarding Procedures, including referral/escalation routes where a child may be at risk of harm.

Staff Training

All staff receive training in:

- Infection control
- Intimate care procedures
- Safeguarding and safer working practice
- Supporting SEND toileting needs
- Communication with children during intimate care

Training and supervision are refreshed when practice, individual children's needs or statutory/public-health guidance changes. Practice is monitored against the current EYFS 2026 requirements and Ofsted early years inspection arrangements effective from 1 September 2026.

Legal and guidance framework: EYFS statutory framework for group and school-based providers (effective 1 September 2026); Working Together to Safeguard Children 2026; Equality Act 2010; SEND Code of Practice 0 to 25 years; current UKHSA Health protection in children and young people settings guidance; current Bromley Safeguarding Children Partnership/London Child Safeguarding Procedures; Bromley SEND Local Offer and Early Years Inclusion Team arrangements.