Early Years Foundation Stage

Personal Care

and

Health Policy

Last updated: January 2025

Contents:

Statement of intent

At **Broadway First School, Laugh 'N' Learn Nursery and Laugh 'N' Learn Preschool,** we understand that, as with all developmental milestones, children will master certain skills at different ages. Toileting and personal self-care are key skills which contribute to independence and self-belief. We believe in nurturing children's growing independence to manage their own basic hygiene and personal needs to allow children to learn the skills to independently look after their bodies as the grow.

We believe that children learn best when they are healthy, safe, secure, and when their individual needs are met. We are therefore committed to providing intimate care for children in ways that:

- Maintain their dignity
- Are sensitive to their needs and preferences
- Maximise their safety and comfort
- Maintain privacy
- Maintain high standards of care
- Protect them against intrusion and abuse
- Respect the child's and parent's right to give or withdraw their consent
- Encourage the child to care for themselves as much as they can
- Protect the rights of all others involved
- Promotes equality and inclusion

This policy has been developed to ensure that staff providing intimate care always undertake their duties in a professional manner and treat children with sensitivity and respect. Adoption of this policy will create a high-quality, welcoming, and safe setting where children can enjoy learning and grow in confidence. Personal care will only be administered by those trained and have completed the induction on personal and health care.

1. Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Children and Families Act 2014
- Childcare Act 2006
- Education Act 2011
- Equality Act 2010
- Safeguarding Vulnerable Groups Act 2006
- The Control of Substances Hazardous to Health Regulations 2002 (as amended in 2004)
- UK Health and Security Agency (2023) 'Health protection in children and young people settings, including education'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2024) Early years foundation stage statutory framework; For group and school-based providers
- DfE (2024) 'Working Together to Safeguard Children 2024'
- DfE (2024) 'Keeping children safe in education 2024'

This policy operates in conjunction with, but not limited to, following policies for (named) Laugh 'N' Learn Nursery and policies of Broadway First School (BFS):

- First aid policy (BFS)
- Early Years Policy
- Health and Safety Policy (BFS)
- Laugh 'N' Learn Nursery and Laugh 'N' Learn Preschool Admission, Induction and Transition Policy
- Laugh 'N' Learn Nursery Child Protection and Safeguarding Policy
- Laugh 'N' Learn Nursery Health and Safety and Risk management Policy
- Policy for supporting children with medical condition
- Online Safety Policy
- Special Educational Needs and Disabilities (SEND) Policy
- Pupil Equality, Equity, Diversity and Inclusion Policy (April 2024) and our yearly Equality statement (May 2024)
- Safeguarding and Child Protection Policy 2024/25 (Sept 2024)
- Special Educational Needs and Disabilities (April 2024)
- Whistleblowing (June 2018)
- Safe touch Policy
- Staff Code of Conduct

2. Definitions

For the purpose of this policy, **intimate care** as defined by NSPCC, is a term used to describe activities involved in meeting the intimate personal care needs of a child. It includes providing care which requires direct or indirect contact with, or exposure of, private parts of the body, such as:

- changing nappies, underwear, continence pads or sanitary wear
- helping a child use the toilet
- bathing, showering or washing
- providing some forms of specialist medical care

It can also involve other forms of physical care, sometimes referred to as 'personal care' or 'non-intimate' care, including:

- feeding
- changing outer layers of clothing
- applying or administering external or oral medication
- hair care
- washing non-intimate body parts e.g. hand washing
- nose wiping
- prompting children to go to the toilet.

We are aware that children may present upon admission with varying levels of independence requiring varying levels of intervention and support. The type and level of care a child needs depends on a number of factors, including: age; stage of development; and whether the child has any disabilities, special educational or additional needs, or medical conditions.

Children may present as:

- Fully toilet trained across all settings.
- Fully toilet trained but regress for a little while in response to the stress and excitement of starting nursery.
- Be fully toilet trained at home but prone to accidents in new settings.
- Be on the point of being toilet trained but require reminders and encouragement.
- Not toilet trained at all but likely to respond quickly to a well-structured toilet training programme.
- Be fully toilet trained but have disabilities or learning difficulties.
- Have delayed onset of full toilet training in line with other development delays but are likely to master these self-care skills with support and a well-structured toilet training programme.
- Have SEND that makes it unlikely that they will be toilet trained in the immediate future.

3. Roles and responsibilities

The governors will be responsible for:

- Ensuring that there are appropriate policies, procedures, and practices in place to deliver the 'Early years foundation stage (EYFS) statutory framework' in line with statutory requirements.
- Ensuring that a robust and effective safeguarding policy is in place that meets statutory requirements and includes the following:
  - The action to be taken when there are safeguarding concerns about a child
  - The action to be taken in the event of an allegation being made against the member of staff
  - How mobile phones, cameras and other electronic devices with imaging and sharing capabilities are used in the setting

- Ensuring there is an adequate number of toilets and hand basins available, with separate toilet facilities for adults.
- Ensuring there are suitable hygienic changing facilities for changing any children who are in nappies.

The Assistant Headteacher will be responsible for:

- Ensuring all relevant staff read and implement this policy.
- Ensuring parents are aware of relevant Early Years policies, practices and procedures in relation to toileting, continence and changing.
- Handling any complaints about the provision of personal and intimate care online with our Complaints Procedures Policy.
- Organising **annual** training for the provision of intimate care.
- Induction of new staff on Personal and Health Care practises and Policy.

The EYFS lead will be responsible for

- Creating a culture where children have positive and enriching experiences.
- Ensuring that all children receive appropriate levels of care tailored to their individual needs.
- Ensuring that intimate care is conducted professionally and sensitively.
- Communicating with parents regarding their child's welfare.
- Ensuring there is an adequate supply of clean bedding, towels, spare clothes and any other necessary items.
- Communicating with parents in order to establish effective partnerships when providing intimate care to children.

Practitioners will be responsible for:

- Acting in accordance with this policy at all times.
- Understanding and acting within the statutory frameworks which set out their professional duties and responsibilities.
- Appropriately supervising children and undertaking intimate care where necessary and appropriate.
- Undergoing **annual** training for the provision of intimate care.
- Undertaking intimate care practice respectfully, sensitively and in line with the guidelines outlined in this policy.
- Recording intimate care interventions in line with the setting's Data Protection Policy.
- Reporting any concerns to the Assistant Headteacher and DSL if there is a safeguarding concern.

Parents will be responsible for:

- Liaising with the setting to communicate their wishes regarding their child's intimate care.
- Providing their consent to the setting's provision of their child's intimate care.
- Adhering to their duties and contributions to their child's intimate care plan, as outlined in this policy.

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4. Procedures for Personal and intimate care

Children who can use the toilet independently will be encouraged to do so at regular intervals.
Each child's nappy will be checked on arrival in the setting and changed immediately where necessary.

Individual child key worker practice in the Early Years ensures that the personal care provided for is tailored to meet the individual child's needs and supports working partnership with parents and carers and the team around the child.

Staff will undertake regular checks on all children in their care. All children will be changed as and when needed, but at least three times daily – morning, lunch and afternoon. If a child's nappy does not need to be changed, the time it was checked will still be noted on the nappy changing chart.

Children will be changed immediately if they soil their nappy, or it becomes wet. Staff will not leave children with soiled nappies or clothing.

Each instance of intimate care will be recorded by the adult who completed it. Details recorded will include:

- What personal care tasks were carried out.
- Whether the nappy was D (dry), W (wet) or BM (bowel movement).
- The person undertaking the intimate care.
- The time and date it was completed.

Each child using nappies will have a clearly labelled personal bag from home or allocated box to them in which they have clean nappies, wipes and any other individual changing equipment necessary.

Whenever possible children will be changed by their key person who will ensure that nappy changing is relaxed and a time to promote independence.

All members of staff will inform another member of staff in the setting prior to taking a child to be changed or to use the toilet.

Staff will be trained in good working practices which comply with Health and Safety regulations.

If a situation occurs that causes a member of staff concern, a second member of staff will be called, and the incident reported to the line manager and recorded.

How to change a nappy

When changing a child's nappy staff will follow the procedure below:

1. Access the child's bag, to ensure they have everything to hand.
2. Gather all the necessary items needed before each nappy change, for example, nappy, wipes, nappy sack, and cream if necessary - if children require creams, e.g. nappy cream, or other medicines, these will be used in accordance with the Administering Medication Policy. Parental consent will be obtained prior to use of any medicine.

3. Wash hands thoroughly with hot water and liquid antibacterial soap,
4. Put on disposable gloves and apron. Use a new set of gloves and apron for each nappy change.
5. Clean the changing area with hot soapy water and blue/ white roll paper or disinfection wipes/spray.
6. Place a sheet from the blue/white roll on the changing mat to lay the child down on.
7. Place the child on a nappy changing mat. To ensure safe moving and handling, children will use steps to independently climb onto the changing area, wherever possible and with support where needed. If required the nappy changing mat can be placed on the floor.
8. Remove the child's clothing to access the nappy.
9. Slide the opened nappy underneath by carefully lifting the child's legs, then pull the front of the nappy between the legs and over the belly.
10. Remove the nappy and place it inside the nappy sack and put it in the nappy bin.
11. Using the wipes, clean the child's whole nappy area gently, but thoroughly, from front to back. making sure the areas inside the folds of skin are cleaned.
12. If the child's clothes are soiled, bag them separately and send them home.
13. Apply barrier cream, if required and where consent and agreement has been given, and put on a clean nappy.
14. Adjust the nappy to fit snugly around the waist and legs. Check it is not too tight by running two fingers between the nappy and the child's tummy.
15. Take off the gloves and apron and place them in the nappy bin.
16. Dress the child.
17. Help the child to wash their hands, using liquid soap, warm water and paper towels - it is good practice to allow young children to wash their hands after nappy changing as this promotes good hygiene practice from an early age.
18. Wash own hands using liquid anti-bacterial soap, warm water and paper towels.
19. Take the child back to the room.
20. Return to the nappy changing area and use anti-bacterial spray and paper towels to clean the changing mat, surrounding area and underneath the mat before leaving to dry. Then wash and dry hands again.
21. Record nappy change details in the child's individual Nappy Change chart.

All staff should note that our Early Years provision has a duty of care towards children's personal needs. If young children are left in wet or soiled nappies or clothing whilst in the setting, this may constitute neglect and could be dealt with as a disciplinary matter.

Bond while changing

The setting is aware that children thrive when they have positive relationships with the adults caring for them. Staff will therefore be expected to interact and chat with children while they are being changed, for example, pulling faces, smiling and laughing with them to encourage bonding and help their development.

To help children learn that doing a poo is not something unpleasant or negative, staff will not show any disgust at what's in a child's nappy.

Nappy rash

Staff will be trained to notice the signs of nappy rash which may include the following symptoms:

- Red or raw patches on your baby's bottom or the whole nappy area
- Skin that looks sore and feels hot to touch
- Scaly and dry skin
- Itchy or painful bottom
- Children seeming uncomfortable or distressed
- Spots, pimples, or blisters on bottom

Where symptoms are identified, staff will record this in the child's individual Nappy change chart and inform parents when they collect their child at the end of the session.

Toileting procedures

The setting is aware that as children develop bladder control, they will pass through the following three stages:

1. The child becomes aware of having wet and/or soiled pants.
2. The child knows that urination/defecation is taking place and can alert a member of staff.
3. The child realises that they need to urinate/defecate and alerts a member of staff in advance.

In collaboration with parents, staff will encourage all children to achieve continence when they exhibit signs that they are ready. This will be achieved through modelling, positive praise, working with parents and having high expectations.

Parents will be engaged in the process of toilet training and supported to continue this with their child at home.

All children will be free to go to the toilet at any time during the session, with adult help or supervision wherever needed.

Potties will be washed in hot soapy water, dried and stored upside down.

Children will be reminded to wash their hands after using the toilet, following the correct procedures for using soap and drying their hands.

Staff will ensure that children using potties are given privacy when using potties, by sitting them out of sight of passers-by and other children using the toilet area.

After use, staff will dispose of the waste appropriately in a toilet, clean them with anti-bacterial wipes or spray and put them away immediately. Again, staff then wash their hands in accordance with good practice health & hygiene procedures.

5. Health and safety

The setting is aware that older babies may try to wriggle away when being changed and, when using a changing table, staff will be vigilant and will never walk away or turn their back on children being changed. Staff will try to occupy children by giving them a toy or by using a mobile to distract them.

Changing mats will be checked weekly for tears. These will be discarded if the cover is damaged in any way.

Any bodily fluids that transfer onto the changing area will be cleaned appropriately in accordance with the good practice health & hygiene procedures.

The setting will ensure that:

- Staff wear plastic aprons whenever administering intimate care or changing children's clothes or nappies.
- Gloves provided are disposable, latex-free and CE marked.
- Spillages are cleaned using detergents and disinfectant that is effective against bacteria and viruses.
- All spillages are cleaned in line with the COSHH Policy.
- Disposable paper towels are used to clean spillages and are disposed of immediately after use.
- Contaminated clothing is removed immediately and placed in a plastic bag away from play areas and communal spaces.
- Bags of children's contaminated clothing are handed to their parents at the end of the session.
- When there is too much nappy waste for one standard refuse bag or container of human hygiene waste over the usual collection interval, it is packaged separately from other waste streams.
- Contaminated material, such as disposable gloves, are disposed of in a plastic bag, which is securely sealed and disposed of according to local guidelines.
- Contaminated clothing is laundered at the hottest wash that the fabric will tolerate.

The Health and Safety Policy lays out specific requirements for cleaning and hygiene, including how to deal with spillages, vomit and other bodily fluids.

Any member of staff that is required to assist a child with medical needs will be trained to do so and will carry out the procedure in accordance with the Supporting Pupils with Medical Conditions Policy.

Hand washing

The setting is aware of its responsibility to ensure good health and hygiene practices on the premises to prevent the spread of bacteria and infection on site.

All staff will wash their hands after using the toilet, changing a nappy or assisting children with any instances of intimate care in line with the latest best practice guidelines from the NHS.

6. Staff and facilities

There will be designated hygienic nappy changing areas away from playing areas and areas where food and drink is prepared or consumed. These will be separate from the toilet facilities for adults.

Changing areas will be safe, warm and comfortable for children, private from others, and will have adequate ventilation.

The changing area will have the following facilities:

- A hand washing basin with warm running water
- A designated sink for cleaning potties, separate to the handwashing basins
- Adapted toilet seat or commode seat
- Changing mat
- Non-slip step
- Cupboard
- Anti-bacterial liquid soap at handwashing basins
- Disposable paper towels located next to basins in the sanitary facilities, alongside foot-operated waste bins
- Disposable gloves and aprons
- Nappies, pads and medical bags, where necessary
- Blue/white tissue roll paper
- Antiseptic cleanser for staff
- Antiseptic cleanser for the changing mat
- Clinical waste bag
- Spillage kit
- Anti-bacterial spray
- Children's individual nappy change storage if required.

Staff members who provide intimate care will be suitably trained and made aware of what is considered good practice.

The setting will always ensure that children are adequately supervised at all times, in accordance with the Early Years Policy.

7. Safeguarding

All staff will receive safeguarding training in line with the Broadway First School and the Early Years Safeguarding Policy.

Staff will receive safeguarding training on an annual basis, and receive child protection and safeguarding updates as required, but at least annually.

Where necessary and appropriate, Individual intimate care plans will be drawn up for children in accordance with the individual circumstances of the child.

Each child's right to privacy will be respected.

If any member of staff has concerns about physical changes to a child's presentation, such as marks or bruises, they will report the concerns to the DSL immediately.

Any information concerning a child's intimate care plan will be stored confidentially in the school office or nursery office, and only the child's parents and the designated member of staff responsible for carrying out the child's intimate care will have access to the information.

The setting will ensure that all staff providing intimate care have undergone an enhanced DBS check, including barred list information.

8. Parental responsibilities

The setting will work closely with parents to establish individual intimate care and nappy changing programmes for each child which consider the following:

- What care is required
- Any additional equipment needed
- The child's preferred means of communication, e.g. visual or verbal, and the terminology to be used for parts of the body and bodily functions
- The child's level of ability, e.g. what procedures of intimate care the child can do themselves
- Any adjustments necessary in respect to cultural or religious views
- The procedure for monitoring and reviewing the intimate care plan

The setting will expect parents to:

- Change their child, or assist them in going to the toilet, at the latest possible time before coming to the nursery.
- Provide spare nappies, incontinence pads, medical bags, wet wipes and a change of clothing in case of accidents.
- Inform the setting should their child have any marks or rashes.
- Come to an agreement with staff in determining how often their child will need to be changed, and who will do the changing.
- Sign an intimate care parental consent form to prove their agreement to the plan. If no parental consent has been given, but the child requires intimate care, a member of staff will contact the parents as soon as possible to obtain consent.

Any changes made to a child's intimate care plan will be discussed with parents to gain consent and will be recorded in the plan.

A copy of this policy will be read and signed by parents to ensure that they understand the policies and procedures surrounding intimate care and nappy changing.

9. SEND

The setting is aware that all Early Years providers are required to have arrangements in place to identify and support children with SEND and to promote equality of opportunity for children in their care. We maintain a culture of inclusion with high expectations for promoting independence and empowerment.

Where a child has additional needs, the setting will liaise with the child's parents and, where appropriate, any professional agencies, to ascertain any additional support that may be required.

The setting will use its best endeavours to make sure that a child with SEND gets the support they need and ensure that staff are alert to any emerging difficulties, follow individual health care plans and respond appropriately, in line with relevant policies, wherever concerns arise.

Where necessary, the setting will make reasonable adjustments, including the provision of auxiliary aids and services, to ensure that disabled children are not at a substantial disadvantage compared with their peers.

Personal care for children with SEND will cover the 4-step cycle of;

- Assess; assess the child's needs and gain a full holistic understanding of the individual needs of the child, such as medical, and make reasonable adjustments to support their needs
- Plan; plan for a child's needs, including accessing specialised toileting support and advice when needed.
- Do; ensure key workers who lead the daily care of the child, are trained to support a child's needs and a high-quality transfer has been provided.
- Review; ensure the parent and child voice is gained and actioned, interventions are put in place to meet the needs and reasonable adjustments have been made.

10. Monitoring and review

This policy is reviewed **annually** by the nursery manager. Any changes to this policy will be communicated to all practitioners and the parents of children attending the setting.

The next scheduled review date for this policy is **January 2026**.

	Date	Signed
Staff agreement:		
Governor agreement:		
To be reviewed:		