EAST DULWICH GROVE NURSERY
31 East Dulwich Grove, Dulwich, SE22 8PW
Email:management@edgnursery.co.uk
Website: www.edgnursery.co.uk
Tel: 02082999518/02086931504

CARING FOR BABIES & TODDLERS POLICY

Policy Statement

EDG Nursery recognises that babies and toddlers require particularly **responsive, sensitive and consistent care**.

During these early years, children are developing rapidly in their communication, physical abilities, independence, emotional regulation and understanding of boundaries. They rely heavily on adults to keep them safe, understand their cues and help them regulate emotions and behaviour.

All practitioners must therefore provide care that is **warm, respectful, developmentally appropriate and safe**.

Care routines are not simply tasks to complete. Feeding, changing, dressing, sleeping, comforting and supporting behaviour are important opportunities for **relationship-building, communication, learning and developing independence**.

1. Responsive and Individualised Care

Staff should know the babies and toddlers in their care and understand their individual:

- routines and preferences;
- communication and cues;
- feeding and dietary needs;
- sleep/rest needs;
- comfort and emotional needs;
- physical development and mobility;
- personal care needs;
- sensory needs;
- interests and development;
- SEND/additional needs where applicable; and
- family routines and relevant changes at home.

Children should be spoken to and involved in what is happening to them, even when they are not yet able to respond verbally.

For example:

"I'm going to pick you up now."

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"Let's get you ready for your nappy change."

"I'm going to help you with your coat."

Care should be something we do with children, not simply to children.

2. Safe and Respectful Handling

Babies and toddlers must always be handled **gently, respectfully and safely**.

Practitioners must:

- support the child's head, neck and body appropriately for their developmental stage;
- use safe lifting and carrying techniques;
- tell the child before lifting or repositioning them where appropriate;
- respond to signs that a child is uncomfortable or distressed;
- encourage mobile children to move independently where safe and appropriate;
- consider the child's size, mobility and individual needs; and
- ask another practitioner for assistance where required.

Children must never be:

- pulled or dragged by their arm, wrist, clothing or another body part;
- lifted or swung by their arms or hands;
- roughly picked up, carried, placed down or repositioned;
- pushed or forced into a sitting/lying position;
- physically forced into equipment;
- unnecessarily restrained;
- handled roughly because they are refusing to cooperate; or
- physically handled in anger or frustration.

Where a child resists being moved or handled, practitioners should consider **why** and whether another safe approach can be used.

3. Appropriate Physical Contact

Babies and toddlers need warmth, affection and reassurance from familiar adults.

Appropriate cuddles, hugs, holding and comforting are a normal and important part of responsive early-years care where these are welcomed or needed by the child.

Physical contact must, however, remain **child-centred and professionally appropriate**.

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Staff should:

- respond to the child's cues;
- respect when a child moves away or does not want contact;
- avoid unnecessarily prolonged physical contact;
- encourage independence as children develop; and
- maintain EDG's professional boundaries.

Staff must **not kiss children or encourage children to kiss them**.

Children should not routinely be encouraged to sit between an adult's legs or remain facing an adult on their lap with bodies pressed together .

These expectations should never prevent a child receiving appropriate physical reassurance when they are upset, tired, hurt or seeking comfort.

4. Key Person and Secure Relationships

The key-person relationship is particularly important for babies and toddlers.

Key people should develop a strong understanding of the child's:

- cues;
- communication;
- family routines;
- preferred comfort;
- feeding;
- sleep;
- personal care;
- interests;
- development; and
- emotional wellbeing.

Wherever practicable, familiar practitioners should support significant care routines.

Children should also gradually develop secure relationships with other practitioners within their room so that their wellbeing does not depend entirely on one adult being present.

5. Care Routines

Care routines must be completed **safely, respectfully and without unnecessary rushing**.

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Nappy changing, dressing, handwashing and other p
opportunities for:

- one-to-one communication;
- songs and conversation;
- developing vocabulary;
- body awareness;
- choices;
- emotional connection;
- cooperation;
- independence; and
- developing children's understanding of routines.

Practitioners should explain what they are doing and encourage children to participate according to their developmental ability.

Children must never be shamed, embarrassed or spoken negatively about because of nappies, toileting accidents or bodily functions.

Staff must follow EDG's **Intimate Care/Nappy Changing Policy** for full procedures.

6. Feeding and Mealtimes

Babies and toddlers must be appropriately supervised while eating and drinking.

Staff must know children's:

- allergies;
- dietary requirements;
- feeding stage;
- medical needs; and
- individual feeding arrangements where applicable.

Babies must **never be left unattended while feeding**, and bottles must never be propped.

Children should be safely and appropriately positioned for eating and drinking.

Practitioners should encourage children to develop independence and self-feeding skills according to their developmental stage.

Children must not be forced to eat and food must not be used as punishment or reward.

Staff must follow EDG's food safety, allergy and choking procedures.

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7. Sleep and Rest

Babies and toddlers will be supported to sleep and rest according to their individual needs while following EDG's **Safe Sleep Policy and procedures**.

Sleeping children must be appropriately monitored and required sleep checks completed and recorded.

Unsafe sleep arrangements must never be introduced simply because a child appears to settle more easily in a particular position or piece of equipment.

Safe sleep requirements take priority over convenience or preference.

8. Physical Development and Movement

Babies and toddlers require frequent opportunities for **free movement and physical exploration**.

Children should not spend unnecessary periods restrained in highchairs, buggies, seats or other restrictive equipment.

Developmentally appropriate opportunities should include:

TUMMY TIME → REACHING → ROLLING → SITTING → CRAWLING → PULLING TO STAND → CRUISING → WALKING → CLIMBING

Staff should provide appropriate floor-based play, outdoor experiences, movement and physical challenge.

Children must not be forced into developmental positions they are not physically ready to maintain safely.

9. Understanding Babies' and Toddlers' Behaviour

Babies and toddlers are still developing:

- language;

- impulse control;
- emotional regulation;
- understanding of boundaries;
- sharing and turn-taking;
- awareness of others;
- independence; and
- ability to communicate their needs.

Practitioners must therefore maintain **realistic developmental expectations**.

At different stages children may:

- bite;
- hit;
- push or scratch;
- throw objects;
- shout or scream;
- repeatedly test boundaries;
- resist care routines;
- struggle with sharing;
- become distressed during transitions;
- say "no" frequently; or
- experience strong emotions they cannot yet regulate independently.

These behaviours can be challenging for adults, but they must be understood within the context of the child's age, development and individual needs.

10. Supporting Boundaries and Emotional Regulation

Practitioners should provide **calm, consistent and developmentally appropriate boundaries**.

Staff should:

- remain calm;
- use clear and simple language;
- model appropriate behaviour;
- acknowledge children's emotions;
- redirect where appropriate;
- support turn-taking and sharing rather than expecting young children to manage these independently;
- provide choices where appropriate;

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- use co-regulation and reassurance;
- consider environmental triggers; and
- praise and reinforce positive interactions naturally.

When behaviour becomes difficult, practitioners should consider:

What is the child communicating?

Possible factors may include:

- tiredness;
- hunger;
- frustration;
- limited language;
- sensory overload;
- discomfort;
- separation anxiety;
- change in routine;
- illness;
- developmental needs; or
- SEND/additional needs.

Staff must follow EDG's **Behaviour Policy** for further guidance.

11. Staff Must Check Their Own Response

Working with babies and toddlers can sometimes be physically and emotionally demanding.

Practitioners are responsible for recognising when their own frustration, tiredness or emotional response may be affecting how they interact with a child.

When finding a situation challenging, staff should ask themselves:

Am I calm?

Is my expectation realistic for this child's age and development?

What might the child be communicating?

Do I need another adult to support me?

All policies contained within this handbook have been created in line with current legislation and statutory guidance. EDG Nursery reviews all policies annually and updates them sooner where changes to legislation, statutory guidance, and recognised sector best practice.

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Where a practitioner feels overwhelmed or notices thc
must **seek assistance from another practitioner or Room Leader**.

Asking for support is responsible professional practice.

Children must never experience shouting, intimidation, humiliation, rough handling, inappropriate restraint or excessive consequences because an adult has become frustrated.

12. Apprentices and Less Experienced Practitioners

EDG recognises that caring for babies and toddlers and responding appropriately to challenging behaviour requires knowledge, experience and confidence.

Apprentices, students and less experienced practitioners must therefore receive appropriate **guidance, modelling and supervision**.

They must not routinely be left to manage complex, escalating or repeatedly challenging situations without appropriate support.

Room Leaders and experienced practitioners should:

- model appropriate interactions;
- demonstrate safe handling;
- explain why particular strategies are being used;
- ensure apprentices understand children's individual needs;
- monitor their confidence and competence;
- step in when situations become difficult;
- provide opportunities for reflection and feedback; and
- appropriately distribute responsibilities across the team.

The same apprentice or inexperienced practitioner should not repeatedly be expected to manage the children or situations staff find most challenging.

Development should be gradual:

OBSERVE → MODEL → SUPPORTED PRACTICE → REFLECT → INCREASE RESPONSIBILITY

Apprentices should feel able to say:

"I'm finding this difficult and need some support."

This should be responded to constructively.

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Room Leaders remain responsible for ensuring deployr
children and the competence and experience of the adults caring for them.

13. Supervision and Staff Deployment

Staff deployment must be actively considered throughout the day.

Room Leaders must ensure that:

- children remain appropriately supervised;
- experienced practitioners are appropriately distributed;
- care routines do not leave other children inadequately supervised;
- apprentices/less experienced staff receive appropriate support;
- staff breaks are safely managed;
- children's changing needs are considered; and
- practitioners know when and where additional support may be required.

Particular attention should be given during:

- nappy changing;
- meals;
- sleep routines;
- busy transitions;
- outdoor play;
- staff breaks;
- challenging behaviour; and
- arrival and collection periods.

Deployment should be **responsive**, not simply based on having the correct number of adults physically present.

14. Keeping Babies and Toddlers Safe

Babies and toddlers develop quickly, meaning environmental risks can change rapidly.

Staff must continually consider children's current mobility and abilities.

An environment that was safe for a non-mobile baby may no longer be safe once that child begins crawling, pulling to stand or climbing.

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Practitioners must maintain appropriate supervision ar
the day.

Equipment must be:

- appropriate for the child's age, size and development;
- in good condition;
- used according to manufacturer instructions;
- appropriately secured; and
- checked before use.

Safety straps/harnesses must be used where required.

Broken or unsafe equipment must be removed from use and reported immediately.

15. SEND and Additional Needs

Babies and toddlers with SEND or emerging additional needs must receive responsive, individualised care.

Staff must understand relevant:

- SEND Support Plans;
- communication strategies;
- sensory needs;
- reasonable adjustments;
- interventions;
- professional recommendations;
- healthcare plans; and
- risk assessments.

Behaviour associated with an additional need must not simply be viewed as deliberate non-compliance.

Staff should seek guidance from the SENCO where they require additional support.

16. Partnership with Parents

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Parents/carers should be encouraged to share inform
development and significant changes.

Practitioners should provide appropriate information about the child's day, including relevant information about:

- sleep;
- meals/bottles;
- nappies/toileting;
- wellbeing;
- development; and
- significant experiences or concerns.

Where home and nursery routines differ, practitioners should work respectfully with families while ensuring that **safety, statutory requirements and EDG procedures are maintained**.

17. Concerns About Practice

Every member of staff has a responsibility to protect babies and toddlers from inappropriate care or handling.

If a practitioner witnesses another adult:

- handling a child roughly;
- unnecessarily restraining a child;
- forcefully moving a child;
- shouting or speaking aggressively;
- humiliating or intimidating a child;
- responding inappropriately through frustration;
- ignoring significant distress;
- using inappropriate physical contact; or
- otherwise providing unsafe or inappropriate care,

they must **not ignore it**.

Where necessary, the immediate priority is to make the situation safe for the child.

The concern must then be reported promptly under the appropriate EDG procedure.

Remember:

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Adult behaviour inconsistent with professional expectc
→ Low-Level Concerns / Cause for Concern

Adult may have harmed a child, poses a risk of harm or there may be a suitability concern
→ Allegations Against Staff / DSL / LADO consideration

Unsafe or harmful practice, or concerns are not being appropriately addressed
→ Whistleblowing

Immediate risk to a child
→ Act immediately under the Safeguarding and Child Protection Policy

Staff should **report concerns rather than attempting to determine the safeguarding threshold themselves**.

Related EDG Policies & Procedures

- Safeguarding and Child Protection Policy
- Staff Code of Conduct
- Low-Level Concerns Policy
- Allegations Against Staff Procedure
- Whistleblowing Policy
- Behaviour Policy
- Intimate Care/Nappy Changing Policy
- Safe Sleep Policy
- Food, Mealtimes and Allergies Policy
- SEND Policy
- Inclusion and Equality Policy
- Outdoor Play and Physical Activities Policy
- Key Person Policy
- Staff Supervision and Deployment Procedures
- Risk Assessment Policy

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