



# Behaviour Management Policy

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## **Statement of intent**

Our setting believes that children flourish best when their personal, social and emotional needs are met and where there are clear and developmentally appropriate expectations for their behaviour.

## **Aim**

We aim to teach children to behave in socially acceptable ways and to understand the needs and rights of others. The principles guiding management of behaviour exist within the programme for supporting personal, social and emotional development.

## **Methods**

We have two named persons, Debby Medford and Bhavna Dattani who have overall responsibility for our programme for supporting personal, social and emotional development, including issues concerning behaviour. In small settings, this may be shared between co-staff.

- We require Debby and Bhavna to:
- keep themselves up to date with legislation, research and thinking on promoting positive behaviour and on handling children's behaviour where it may require additional support;
- access relevant sources of expertise on promoting positive behaviour within the programme for supporting personal, social and emotional development; and to
- check that all staff have relevant in-service training on promoting positive behaviour. We keep a record of staff attendance at this training.
- We recognise that codes for interacting with other people vary between cultures and require staff to be aware of - and respect - those used by members of the setting.
- We require all staff, volunteers and students to provide a positive model of behaviour by treating children, parents and one another with friendliness, care and courtesy.
- We familiarise new staff and volunteers with the setting's behaviour policy and its guidelines for behaviour.
- We expect all members of our setting - children, parents, staff, volunteers and students - to keep to the guidelines, requiring these to be applied consistently.
- We work in partnership with children's parents. Parents are regularly informed about their children's behaviour by their key person. We work with parents to address recurring inconsiderate behaviour, using our observation records to help us to understand the cause and to decide jointly how to respond appropriately.

## **Strategies with children who engage in inconsiderate behaviour**

- We require all staff, volunteers and students to use positive strategies for handling any inconsiderate behaviour, by helping children find solutions in ways which are appropriate for the children's ages and stages of development. Such solutions might include, for example, acknowledgement of feelings, explanation as to what was not acceptable, and supporting children to gain control of their feelings so that they can learn a more appropriate response.

- We ensure that there are enough popular toys and resources and sufficient activities available so that children are meaningfully occupied without the need for unnecessary conflict over sharing and waiting for turns.
- We acknowledge considerate behaviour such as kindness and willingness to share.
- We support each child in developing self-esteem, confidence and feelings of competence.
- We support each child in developing a sense of belonging in our group, so that they feel valued and welcome.
- We avoid creating situations in which children receive adult attention only in return for inconsiderate behaviour.
- When children behave in inconsiderate ways, we help them to understand the outcomes of their action and support them in learning how to cope more appropriately.
- We never use physical punishment, such as smacking or shaking. Children are never threatened with these.
- We do not use techniques intended to humiliate individual children.
- We use physical restraint, such as holding, only to prevent physical injury to children or adults and/or serious damage to property.
- Details of such an event (what happened, what action was taken and by whom, and the names of witnesses) are brought to the attention of our setting leader and are recorded in the child's personal file. The child's parent is informed on the same day.
- In cases of serious misbehaviour, such as racial or other abuse, we make clear immediately the unacceptability of the behaviour and attitudes, by means of explanations rather than personal blame.
- We do not shout or raise our voices in a threatening way to respond to children's inconsiderate behaviour.

### **Children under three years**

- When children under three behave in inconsiderate ways we recognise that strategies for supporting them will need to be developmentally appropriate and differ from those for older children.
- We recognise that very young children are unable to regulate their own emotions, such as fear, anger or distress, and require sensitive adults to help them do this.
- Common inconsiderate or hurtful behaviours of young children include tantrums, biting or fighting. Staff are calm and patient, offering comfort to intense emotions, helping children to manage their feelings and talk about them to help resolve issues and promote understanding.

### **Rough and tumble play, hurtful behaviour and bullying**

Our procedure has been updated to provide additional focus on these kinds of inconsiderate behaviours.

Rough and tumble play and fantasy aggression

Young children often engage in play that has aggressive themes - such as superhero and weapon play; some children appear pre-occupied with these themes, but their behaviour is not necessarily a precursor to hurtful behaviour or bullying, although it may be inconsiderate at times and may need addressing using strategies as above.

- We recognise that teasing and rough and tumble play are normal for young children and acceptable within limits. We regard these kinds of play as pro-social and not as problematic or 'aggressive'.
- We will develop strategies to contain play that are agreed with the children, and understood by them, with acceptable behavioural boundaries to ensure children are not hurt.
- We recognise that fantasy play also contains many violently dramatic strategies - blowing up, shooting etc., and that themes often refer to 'goodies and baddies' and as such offer opportunities for us to explore concepts of right and wrong.
- We are able to tune in to the content of the play, perhaps to suggest alternative strategies for heroes and heroines, making the most of 'teachable moments' to encourage empathy and lateral thinking to explore alternative scenarios and strategies for conflict resolution.

### **Hurtful behaviour**

We take hurtful behaviour very seriously. Most children under the age of five will at some stage hurt or say something hurtful to another child, especially if their emotions are high at the time, but it is not helpful to label this behaviour as 'bullying'. For children under five, hurtful behaviour is momentary, spontaneous and often without cognisance of the feelings of the person whom they have hurt.

- We recognise that young children behave in hurtful ways towards others because they have not yet developed the means to manage intense feelings that sometimes overwhelm them.
- We will help them manage these feelings as they have neither the biological means nor the cognitive means to do this for themselves.
- We understand that self-management of intense emotions, especially of anger, happens when the brain has developed neurological systems to manage the physiological processes that take place when triggers activate responses of anger or fear.
- Therefore, we help this process by offering support, calming the child who is angry as well as the one who has been hurt by the behaviour. By helping the child to return to a normal state, we are helping the brain to develop the physiological response system that will help the child be able to manage his or her own feelings.
- We do not engage in punitive responses to a young child's rage as that will have the opposite effect.
- Our way of responding to pre-verbal children is to calm them through holding and cuddling. Verbal children will also respond to cuddling to calm them down, but we offer them explanation and discuss the incident with them to their level of understanding.
- We recognise that young children require help in understanding the range of feelings experienced. We help children recognise their feelings by naming them and helping children to express them, making a connection verbally between the event and the feeling. 'Adam took your car, didn't he, and you were enjoying playing with it. You didn't like it when he took it, did you? It made you feel angry, didn't it, and you hit him'.
- We help young children learn to empathise with others, understanding that they have feelings too and that their actions impact on others' feelings. 'When you hit Adam, it hurt him and he didn't like that and it made him cry'.

- We help young children develop pro-social behaviour, such as resolving conflict over who has the toy. 'I can see you are feeling better now and Adam isn't crying any more. Let's see if we can be friends and find another car, so you can both play with one.'
- We are aware that the same problem may happen over and over before skills such as sharing and turn-taking develop. In order for both the biological maturation and cognitive development to take place, children will need repeated experiences with problem solving, supported by patient adults and clear boundaries.
- We support social skills through modelling behaviour, through activities, drama and stories. We build self-esteem and confidence in children, recognising their emotional needs through close and committed relationships with them.
- We help a child to understand the effect that their hurtful behaviour has had on another child; we do not force children to say sorry, but encourage this where it is clear that they are genuinely sorry and wish to show this to the person they have hurt.
- When hurtful behaviour becomes problematic, we work with parents to identify the cause and find a solution together. The main reasons for very young children to engage in excessive hurtful behaviour are that:
  - their parent, or carer in the setting, does not have skills in responding appropriately, and consequently negative patterns are developing where hurtful behaviour is the only response the child has to express feelings of anger;
  - the child is exposed to levels of aggressive behaviour at home and may be at risk emotionally, or may be experiencing child abuse; and
  - the child has a developmental condition that affects how they behave.
- Where this does not work, we use the Code of Practice to support the child and family, making the appropriate referrals to a Behaviour Support Team where necessary.

### **Bullying**

We take bullying very seriously. Bullying involves the persistent physical or verbal abuse of another child or children. It is characterised by intent to hurt, often planned, and accompanied by an awareness of the impact of the bullying behaviour.

A child who is bullying has reached a stage of cognitive development where he or she is able to plan to carry out a premeditated intent to cause distress to another.

Bullying can occur in children five years old and over and may well be an issue in after school clubs and holiday schemes catering for slightly older children.

If a child bullies another child or children:

- we show the children who have been bullied that we are able to listen to their concerns and act upon them;
- we intervene to stop the child who is bullying from harming the other child or children;
- we explain to the child doing the bullying why her/his behaviour is not acceptable;
- we give reassurance to the child or children who have been bullied;
- we help the child who has done the bullying to recognise the impact of their actions;
- we make sure that children who bully receive positive feedback for considerate behaviour and are given opportunities to practise and reflect on considerate behaviour;
- we do not label children who bully as 'bullies';

- we recognise that children who bully may be experiencing bullying themselves, or be subject to abuse or other circumstance causing them to express their anger in negative ways towards others;
- we recognise that children who bully are often unable to empathise with others and for this reason we do not insist that they say sorry unless it is clear that they feel genuine remorse for what they have done. Empty apologies are just as hurtful to the bullied child as the original behaviour;
- we discuss what has happened with the parents of the child who did the bullying and work out with them a plan for handling the child's behaviour; and
- we share what has happened with the parents of the child who has been bullied, explaining that the child who did the bullying is being helped to adopt more acceptable ways of behaving.

### **Biting Policy**

Biting is a common behaviour that some young children go through. This is part of some children's development and can be triggered when they do not yet have the words to communicate their anger, frustration or need.

Strategies to prevent biting include; sensory activities, biting rings, adequate resources and a stimulating exciting environment. However, in the event of a child being bitten the following procedure will be followed:

The child who has been bitten will be comforted and checked for any visual injury. First aid will be administered where necessary. An incident form will be completed and the parents may be informed via telephone if deemed appropriate. The bitten area will be continued to be observed for signs of infection.

For confidentiality purposes and possible conflict, the name of the child who has bitten will not be disclosed to the parents.

The child who has caused the bite will be told in terms that they understand that biting (the behaviour and not the child) is unkind, and be shown that it makes staff and the child who has been bitten sad. The child will be asked to say sorry if developmentally appropriate or show they are sorry, e.g. through hugging. An incident form will be completed and shared with the parents at the end of the child's session.

If a child continues to bite, observations will be carried out to try to distinguish a cause, e.g. tiredness or frustration. Meetings will be held with the child's parents to develop strategies to prevent the biting behaviour. Parents will be reassured that it is part of a child's development and not made to feel that it is their fault.

In the event of a bite breaking the skin and to reduce the risk of infection from bacteria, prompt treatment may be needed for both the 'biter' and the 'bitten'.

If a child or member of staff sustains a bite wound where the skin has been severely broken they may require urgent medical attention after initial first aid has been carried out.

Where a child may repeatedly bite and/or if they have a particular special educational need or disability that lends itself to increased biting, e.g. in some cases of autism where a child doesn't have the communication skills, the setting will carry out a risk assessment and may recommend immunisation with hepatitis B vaccine for all staff and children.

Introduce ABC behaviour form if and when required.

### Links to legislation

- Children Act 1989 and 2004
- Conventions on the Rights of the Child, UNICEF 1989
- Data Protection Act 1998
- Every Child Matters - Change for Children 2004
- Freedom of Information Act 2000
- Race Relations Amendment Act 2000
- Sex Discrimination (Gender Reassignment) Regulations 1999
- Statutory Framework for the Early Years Foundation Stage 2017
- The Human Rights Act 2000
- Equality Act 2010
- Children and Families Act 2014

Last reviewed on 4<sup>th</sup> December 2018

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