



Behaviour Management in the Setting Policy

This policy was adopted from	Signed on behalf of Twickenham Park Riverside	Date for review
Policies from 20/21	Guy Mitchell	September 2022

We believe 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. We want every member of our nursery to feel valued and respected.

Children need to learn to consider the views, feelings, needs and rights of others and notice when their behaviour has an impact on people, places and objects. This developmental task requires support, encouragement, teaching and role modelling. Promoting personal, social and emotional development underpins the children's understanding of positive and considerate behaviour.

<u>Aim</u>

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

<u>Methods</u>

We have a named person who has overall responsibility for our programme for supporting personal, social and emotional development, including issues concerning behaviour. This person is Tina Sutton.

- Our named SENCO is: Rachel Seymour
- We require the named person to:
 - Keep up to date with legislation, research and thinking on promoting positive behaviour and on best managing a child's behaviour where it may require additional support
 - Access relevant sources of expertise about promoting positive behaviour within the programme for supporting personal, social and emotional development and to check that all staff have the relevant in-service training
 - When appropriate we implement a more formal behaviour management strategy individualised to each child.
- We recognise that codes for interacting with other people may vary between cultures and require staff to be aware and respectful of this
- 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 management policy and its guidelines for behaviour.
- We expect all members of the setting children, parents, staff, volunteers and students to keep to these guidelines.
- We work in partnership with each child's parents. Parents are regularly informed about their child's behaviour by their key person or the management. We work with parents to address recurring inconsiderate behaviour, using our observation records and daily records to help us to understand the cause and to decide jointly how to respond appropriately. ABC (Antecedent Behaviour Consequence) observations to support where a pattern can be identified, and a team agenda be implemented between the team, child and parents to support.
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Strategies with children who engage in inconsiderate behaviour

- 1. We require all staff, volunteers and students to use positive strategies for handling any inconsiderate behaviour. We help children find solutions in ways which are appropriate for the children's ages and stages of development. Such solutions might include: the 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.
- 2. 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.
- 3. We acknowledge considerate behaviour such as kindness and willingness to share.
- 4. We support each child in developing self-esteem, confidence and feelings of competence.
- 5. We support each child in developing a sense of belonging in our setting, so that they feel valued and welcome.
- 6. We avoid creating situations in which children receive adult attention only in return for inconsiderate behaviour.
- 7. When children behave in inconsiderate ways, we help them to understand the outcomes of their actions and support them in learning how to cope more appropriately using age appropriate resources and books.
- 8. We never send children out of the room by themselves.
- 9. We never use physical punishment, such as smacking or shaking, children are never threatened with these.
- 10. We do not use techniques intended to single out and humiliate individual children.
- 11. We use physical restraint, such as holding, only to prevent physical injury to children or adults and/or serious damage to property. If physical restraint is necessary, then the member of staff who carried out the restraint will fill out an incident form. 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 the management and are recorded in the child's personal file. The child's parent is informed on the same day.



- 12. 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. This behaviour would be noted on an incident form and shared with parent to read and sign.
- 13. We do not shout or raise our voices in a threatening way to respond to a child's inconsiderate behaviour.
- 14. At times, children are asked to sit for some 'Time In/reflection time' and to reflect on their behaviour with the support of the key person or other practitioner.

Children under three years of age

- 1. 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.
- 2. 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.
- 3. Common inconsiderate or hurtful behaviours of young children include tantrums, biting or fighting. Staff are expected to react in a calm and patient way, offer comfort for intense emotions and help children to manage and talk about these feelings, to help resolve issues and promote understanding.
- 4. At times, children are asked to sit out for some 'reflection time' and to reflect on their behaviour with the support of the key person or other practitioner.

Biting

The nursery uses the following strategies to help prevent biting: adequate resources and staff who recognise when children need more stimulation or quiet times. However, in the event of a child being bitten we use the following procedures. The most relevant staff member(s) will:

- 1. Comfort any child who has been bitten and check for any visual injury. Administer any first aid where necessary. Complete an accident form and inform the parents via telephone if deemed appropriate. Continue to observe the bitten area for signs of infection. For confidentiality purposes and possible conflict, we do not disclose the name of the child who has caused the bite to the parents.
- 2. An incident form must also be completed in order to share information with parents regarding the child that bit stating all details.
- 3. Tell the child who has caused the bite in terms that they understand that biting (the behaviour and not the child) is an unkind choice and show the child that it makes staff and the child who has been bitten sad. The child will be asked to say sorry if developmentally appropriate or helped to develop their empathy skills by giving the child who has been bitten a favourite book or comforter.



- 4. If a child continues to bite, carry out observations to try to distinguish a cause, e.g. tiredness or frustration
- 5. Arrange for a meeting 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
- 6. In the event of a bite breaking the skin and to reduce the risk of infection from bacteria, give prompt treatment to both the child who has bitten and the child who has been bitten.

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

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.

- 1. 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'.
- 2. 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.
- 3. We recognise that fantasy play also contains many violently dramatic themes 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.
- 4. 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.
- 5. We use activities such as show and tell to encourage children to talk about their toys when brought in from home, offering open ended questions and shared interest. This aims to support children's open-ended play opportunities during free play and creating more focused language and interaction.

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 understanding of the feelings of the person whom they have hurt.

- 1. 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.
- 2. We will help them manage these feelings.
- 3. 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.
- 4. 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.
- 5. We do not engage in punitive responses to a young child's rage as that will have the opposite effect.
- 6. 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.
- 7. 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'.
- 8. 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'.
- 9. 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.'
- 10. 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.
- 11. 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.



- 12. 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.
- 13. 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:
 - 1.1. They do not feel securely attached to someone.
 - 1.2. The child is exposed to levels of aggressive behaviour at home and may be at risk emotionally or may be experiencing child abuse.
 - 1.3. 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 and Harassment Policy

We take bullying and harassment very seriously at Twickenham Park Day Nursery. Bullying or harassment involves the persistent physical and verbal abuse of one person to another. It is characterised by intent, often planned and accompanied by an awareness of the impact of the bullying or harassing behaviour.

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

In the event of a child bullying or harassing another child we will:

- 1. Show the children who are being bullied or harassed that we are able to listen to their concerns and act upon them
- 2. Intervene to stop the child who is bullying or harassing from harming the other child or children
- 3. Explain to the child doing the bullying why his or her behaviour is not acceptable
- 4. Give reassurance to the child or children who are being bullied
- 5. Endeavour to help the child who has done the bullying or harassment to recognise the impact of their actions
- 6. We do not label children who bully as 'bullies'
- 7. We recognise that children who bully may be experiencing bullying themselves, or be subject to abuse or other circumstances causing them to express their anger in negative ways towards others
- 8. We will share what has happened with the parents of the children who have been bullied or harassed
- 9. We share with the parents of the children who have bullied and work out a plan for handling their child's behaviour to adopt more acceptable ways of behaving





10. If necessary, complete ABC (Antecedent – Behaviour - Consequence) observations as a support to understand the triggers and create a team agenda to support the child/children.

Please see the form below that staff will complete if there is a behaviour incident.

STAFF MEMBER REPORTING BEHAVIOUR INCIDENT FORM

To be completed by STAFF regarding a child's behaviour.

Child's FULL name:	Completed by (FULL name):	Today's		
		Date:		
Child's D.O.B	Relationship to child:	//		
CIIIId 5 D.O.D	Relationship to child.	//		
	Date of incident:			
Details of incident in	cluding place incident occurred			
Details of incident including place incident occurred.				
Please detail area of body and describe any visible injury				
Did the child require or receive any medical attention? Any other relevant information:				
Any other relevant information:				



Parent's signature:	
Manager's signature:	
Date:	
file:	