

Regulation Policy

Aims

- To support children to regulate their own emotions.
- To provide flexibility in the responses of staff to children's behaviours.
- To provide a supportive framework for children and staff support regulation and co regulation.
- To provide support to parents and carers regarding the management of their children's behaviour.

Information

Inappropriate behaviour refers to non-negotiable actions and may include discriminatory remarks, harm to self or others, bullying or destruction of equipment.

It is important to consider the reasons why children might present certain types of behaviour; boredom, feeling unsettled or unhappy, not feeling listened to, an un-stimulating play setting, and medical reasons.

We regard rough and tumble play and play that has aggressive themes, such as superhero and weapon play, as normal for young children and acceptable within limits. Staff will judge if such play becomes hurtful or inconsiderate and will then deal with it by using the procedures outlined for dealing with inappropriate behaviour.

Policy

- All interactions with children will be in ways which are appropriate for the children's ages and stages of development.
- Staff will be positive role models for behaviour.
- Play opportunities and activities will be varied and well planned so that children are engaged and interested.

- Staff will take active steps to not label children (i.e. difficult, naughty) and to consider the underlying reasons for behaviour.
- Staff will work as a team by discussing incidents and resolving to act collectively and consistently.
- Staff will ensure that the individual child feels valued and respected at all times.
- Staff will take positive steps to avoid a situation in which children receive attention for undesirable behaviour.
- Staff will encourage children to express their strong feelings without physical or verbal aggression.
- Staff will support children to manage behaviour themselves by helping them find solutions to situations and deal with their intense emotions.
- Staff will praise positive behaviours and give feedback to parents.
- Staff will never use physical punishment such as smacking or shaking and children will never be threatened with these.
- Staff will only use physical restraint, such as holding, to prevent physical injury to others and/or serious damage to property.
- Staff will not shout or raise their voices in a threatening way.

Responsibilities

The named member of staff responsible for behaviour management for our setting is: Hannah Summers
This person will:

- Keep up to date with legislation
- Research current behaviour management practices, where appropriate
- Identify additional behaviour management strategies for children with additional needs
- Access other agencies, where necessary

- Provide support to staff around behaviour management issues
- Ensure they and other staff have relevant up to date training and that they record details of this.

Procedures for Dealing with Inappropriate Behaviour

In situations that require adult intervention, staff will remain calm and consider the most appropriate response, dependent on what led up to the behaviour and also the age and level of understanding of the child.

Staff should;

- 1. **Stop** hurtful or disruptive behavior at once. Calmly place yourself between children.
- 2. Acknowledge child/ren's feeling whilst explaining why their behavior was not acceptable. "I can see you feel frustrated but we do not bite" "You look upset and you (other child) look upset. I'm really pleased that you have come to find me for help." Remember that all feelings are acceptable but not all behaviors are.
- 3. **Gather information** ask the child/ren what happened.
- 4. Restate the problem. "So the problem is..."
- 5. **Find a solution** Ask the/both/all child/ren for solutions and choose one together. Offer ideas if children struggle with this.
- If physical or verbal aggression occurs this will be addressed immediately. The child may be moved to another area and given 'time in'.
- If physical contact is necessary adults will keep their body language calm, acknowledge feelings and explain their actions e.g. "I need to hold you/lift you up to keep everyone safe."
 When the child is calm explanations can be given as to why their behavior was not acceptable.

When children are finding intense emotions difficult to express (tantrums) practitioners will:

- Remain calm and patient, be the child's calm, their emotion is not yours.
- Offer comfort to intense emotions and try to calm children through holding, cuddling or sitting close by.

- Practitioners will not try to engage children cognitively (reason with them) when expressing intense emotions.
- Talk with the child about their emotion, what they were upset about after the event. Do not labor on this if they do not know the reason why they were upset.

Time in

At Little Foxes we do not give time out or shame children. It is however sometimes necessary for children to have time to reflect, calm down and compose themselves before rejoining their friends. This can stop the cycle of frustration/anger and unwanted behavior. 'Time in', may be deemed necessary if a child has demonstrated unwanted behavior that practitioners believe may be repeated e.g. they have hit two children in quick succession and its likely they are going to hit a third child. If we have gone through the normal procedure and the child still needs more time or is a danger to themselves or others we:

- 1. Acknowledge their feelings, I can see you are still feeling...
- 2. Inform them what is happening, we are going to have some time away from the other children to help you to feel calm/better.
- 3. Take the child's hand and sit or stand calmly with them for 3-5 minutes.
- 4. Assess their emotions, "Well done, I can see you now feel calm, you can go back to playing with your friends." or "I think you are still feeling a little... shall we try some deep breaths?" repeat step 3 and 4 until the child is feeling better.

Recurring Inappropriate Behavior

Where inappropriate behavior is ongoing, staff will;

- Try to find if there is an underlying cause
- Liase with parents/carers and the SENCO
- Work with the child's parents/carers to develop and implement an action plan where manageable targets will be set and regularly reviewed
- Contact other professionals, such as the Area SENCO, for support and information

Physical Intervention procedure

As a setting, we will consider the age of children that we work with and what appropriate approaches are regarding physical intervention.

Physical intervention will only be used as a last resort if all other strategies detailed in this policy have not been successful and only if there are reasonable grounds for believing that immediate action is necessary to prevent a child from significantly injuring themselves or others or to prevent serious damage to property. E.g. a child running across the road; a child being physically aggressive towards themselves or others whilst upset.

Staff will first consider distraction, withdrawing adults and children and making the environment safe.

Physical Intervention will be used for the minimum amount of time and with the minimum amount of force.

Staff will consider the emotional impact of physical intervention on the child, witnesses and staff and debrief afterwards as appropriate.

Procedure for Promoting Positive Behaviour

- Draw up a clear and simple code of behaviour with children at the start of the year. This will include; be kind, be careful, be safe, you must not hurt anybody.
- Give attention for positive behaviour when the child does not seek it.
- Acknowledge considerate behaviour such as kindness and willingness to share.
- Acknowledge children's efforts as well as achievements.

Recording

Behaviour management issues will be recorded on an incident record. The record will be written in a non-judgemental manner, be confidential, accurate and signed by the member of staff involved and the parent/carer. If physical intervention has been used, an incident record must be completed in detail and the parent/carer needs to be informed on the same day. Staff will also ensure it covers any observed triggers; others involved; witnesses; type of physical intervention used; for how long and to what force. Any injuries obtained by children or staff as a result of physical intervention will also be recorded in the accident book.