

 P.L.A. Membership No. 202255

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**Manager: Mrs Donna White**

**Achieving positive behaviour**

**Policy statement**

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.

Children need to learn to consider the views and feelings, needs and rights, of others and the impact that their behaviour has on people, places and objects. This is a developmental task that requires support, encouragement, teaching and setting the correct example. The principles that underpin how we achieve positive and considerate behaviour exist within our programme for promoting personal, social and emotional development.

**Procedures**

All staff have responsibility for our programme for supporting personal, social and emotional development, including issues concerning behaviour.

* We require each staff member to:
* keep her/himself 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 our programme for supporting personal, social and emotional development; and
* 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 this 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 to 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 actions and support them in learning how to cope more appropriately.
* We never send children out of the room by themselves, nor do we use a ‘naughty chair’ or a ‘time out’ strategy that excludes children from the group.
* We never use physical or corporal punishment, such as smacking or shaking. Children are never threatened with these.
* We do not use techniques intended to single out and 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(s) is/are 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 years old behave in inconsiderate ways we recognise that the strategies for supporting them will need to be developmentally appropriate and differ from those for older children.*
* *We recognise 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.*
* If tantrums, biting or fighting are frequent, we try to find out the underlying cause - such as a change or upheaval at home, or a frequent change of carers. Sometimes a child has not settled in well and the behaviour may be the result of ‘separation anxiety’.
* We focus on ensuring a child’s attachment figure in the setting, their key person, is building a strong relationship to provide security to the child.

*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, e.g. blowing up and shooting, 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 an explanation and discuss the incident with them to their level of understanding.
* On rare occasions it may be necessary for staff in the setting to implement restrictive physical intervention, such as situations where a child is in danger of hurting themselves or others, or of causing significant damage to the property.
* Physical intervention will only be used if all other aspects of managing a child’s behaviour have failed and there is a real danger of injury either to the child or others. The aim in using such restraint is to restore safety, both for the child and those around them and staff will use as little restrictive force as necessary, for as short a period as possible in such situations.
* Physical intervention will never be used out of anger, as a punishment or as an alternative to measures which are less intrusive and which staff judge to be more effective.
* Where it is judged that restrictive physical intervention is necessary, staff should:

• aim for side-by-side contact with the child. Avoid positioning themselves in front (to reduce the risk of being kicked) or behind (to reduce the risk of allegations of sexual misconduct)

 • aim for no gap between the adult’s and child’s body, where they are side by side. This minimises the risk of impact and damage

• aim to keep the adult’s back as straight as possible

• beware in particular of head positioning, to avoid head butts from the child

• hold children by “long” bones, i.e. avoid grasping at joints where pain and damage are most likely

• ensure that there is no restriction to the child’s ability to breathe. In particular, this means avoiding holding a child around the chest cavity or stomach.

• avoid lifting mobile children where possible.

* Staff receive training regarding the use of physical intervention and any incidents where restraint has been used are recorded in our incident book. The parent/carer of the child/ren concerned will be requested to sign and date the recording to acknowledge that restraint has been used and the reasons why.
* We recognise that young children require help in understanding the range of feelings they experience. 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? Did it make you feel angry? Is that why you hit him?” Older children will be able to verbalise their feelings better, talking through themselves the feelings that motivated the behaviour.
* 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 and 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:
* they do not feel securely attached to someone who can interpret and meet their needs - this may be in the home and it may also be in the setting;
* 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 may have insufficient language, or mastery of English, to express him or herself and may feel frustrated;
* the child is exposed to levels of aggressive behaviour at home and may be at risk emotionally, or may be experiencing child abuse;
* the child has a developmental condition that affects how they behave.
* Where this does not work, we use the Special Educational Needs Code of Practice to support the child and family, making the appropriate referrals to a Behaviour Support Team where necessary.

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| This policy was adopted at a meeting of |  | *(name of provider)* |
| Held on |  | *(date)* |
| Date to be reviewed |  | *(date)* |
| Signed on behalf of the provider |  |
| Name of signatory |  |
| Role of signatory (e.g. chair, director or owner) |  |