



## **Behaviour Management Policy**

### **Ethos**

At Norcot Early Years Centre we seek to develop children's ability to manage their own behaviour through the provision of positive role models and the development of children's ability to think through situations and make positive choices.

### **Aims**

- To create a secure physical and emotional environment which encourages and reinforces acceptable behaviour
- To constantly enhance children's self-esteem, self-control and ability to consider others
- To work with families and other professionals in order to ensure clear communication and to develop shared strategies

### **Responsibilities of Governors**

- To agree this policy and review it on a regular basis, ensuring that it conforms to relevant laws and guidance
- To monitor and support the implementation of this policy with reference to, in particular, Safeguarding and Health & Safety
- To keep themselves informed of Behavioural issues and approaches through regular meetings with staff and visits to the Centre

### **Responsibilities of Head of Centre**

- To ensure that this policy is consistently implemented across the centre
- To ensure that this policy is a key part of induction for all new staff, students and volunteers
- To make recommendations to Governors about any necessary amendments
- To ensure that there is a named practitioner with responsibility for behaviour
  - This position is currently filled by Diana Heath
- To ensure that staff receive appropriate training
- To ensure that adequate staff supervision is provided, particularly if staff have to support extremely challenging children

### **Responsibilities of the Special Educational Needs Co-ordinator (SEND)**

- To be the named practitioner with responsibility for behaviour across the centre
  - This position is currently filled by Katarina Bingham
- To provide advice and support to staff regarding supporting children's behaviour
- To liaise with appropriate external professionals when necessary.

### **Responsibilities of Staff**

- To be familiar with and follow this policy at all times
- To provide positive role models to children, ensuring that their behaviour reflects the good practice of the Centre
- To respond to children in a calm manner and never to use negative, judgemental language such as 'naughty' or 'bad'
- To always praise and reinforce positive behaviour
- To always emphasise what they would like a child to do rather than dwelling on the negative
- To enable children to share and negotiate with each other
- To work with children to understand the effects of positive and negative behaviour on others
- To enable children to learn strategies for managing situations which may be challenging, e.g. what to do if someone behaves toward you in a way that you do not like
- To always value each individual child, even if at times their behaviour needs support
- To enable and support children to recognise and manage a range of feelings, both positive and negative
- To promote respect for the environment and the property of others
- To work with their team to develop, agree and consistently implement strategies to develop positive behaviours of individuals and groups; strategies beyond those which would be usually employed, such as time out and reward charts, should be agreed with the team and other professionals as appropriate, and reviewed regularly
- Work closely with parents and carers to ensure strategies are developed together and that there is as much continuity as possible when dealing with a child's behavioural issues.
- To seek support and guidance from other centre staff and professionals as appropriate, e.g. SEND, Family Worker
- To ensure the safety of the children at all times
- To ensure that students and volunteers are given appropriate guidance
- We do not believe that there is intentional 'bullying' at this age but the children are taught how to deal with unwanted approach.

### **Responsibilities of Students & Volunteers**

- To follow the guidance given above where appropriate
- To request support and advice when necessary
- To deal with unwanted approaches in appropriate way they are taught.

### **Responsibilities of Parents**

- To keep the Centre informed about concerns, problems or family circumstances which may affect their child's behaviour or well-being
- To work with staff to plan and implement behaviour support plans when necessary

### **Criteria for Success**

- The policy is compliant with all legislation and guidance
- Children's behaviour in the centre is judged to be good
- Staff report that they feel confident and supported when dealing with challenging behaviour

### **Physical intervention**

#### **REASONABLE FORCE PHYSICAL INTERVENTION**

There may be circumstances where staff may need to use reasonable force physical interventions with a child such as guiding them by the arm or restraining a child. These should only be engaged in if the child is at serious risk of hurting him/herself or someone else and should be used to safeguard children and staff. Reasonable force physical interventions should involve the minimum amount of force for the minimum amount of time. All incidents of restrictive physical intervention should be reported to the DSL or DDSL using an incident reporting form.

Staff should use positive behaviour strategies to support the children. They consider the individual needs of each child and use individual behaviour plans for children with SEN or disabilities to reduce the occurrence of challenging behaviour and the need to use reasonable force.

At Norcot Early Years Centre we believe that it is quite acceptable to appropriately make physical contact with young children, for example to give reassurance to a child who is hurt or distressed. Staff should however be aware that children respond differently to touch and a child's personal boundaries should always be respected.

#### **Associated Policies**

- Safeguarding
- Teaching & Learning
- Health & Safety
- Inclusion

**Policy Agreed SMT: February 2018**

**Policy Agreed Governors: February 2018**

**Policy to be Reviewed by Curriculum Committee: February 2019**

## **Appendix 1--Strategies for Supporting Behaviour**

It is important to remember that any strategies for supporting behaviour must be adapted to take into account the child's level of development and specific learning needs.

Sometimes children, for whatever reason, find it hard to follow the guidelines. Where this happens it is important that staff deal with the incident calmly and let the child see that we are unhappy with the action and not with the child her/himself, i.e. that it is the behaviour that is wrong, not the child that is bad. Where a child repeatedly ignores the guidelines we will recognise/acknowledge the problem, stop the child and make them aware of the problem. The first approach that we will use is **conflict resolution**.

### **Strategy for when there is conflict between children and/or involving equipment**

Adults are not always clear what triggered a conflict, who was responsible or what to do next. When children encounter conflict with one another during their everyday experiences, we can use these steps to ensure there are positive outcomes to disputes. We use a conflict resolution process to help children learn to:

- Express their needs and feelings
- Hear and respect others' points of view
- Express ideas and experience the give and take of relationships
- Develop a desire to engage in positive social behaviours
- Feel in control of the solution and outcome
- Experience successful cooperative solutions
- Develop trust in adults and other children
- Understand how to make constructive choices
- Experience feelings of competence

This approach will need to be adapted using knowledge of the children's level of understanding and how distressed they are at the time.

#### **Step 1 Approach calmly**

Put yourself at the child's eye level and put a stop to harmful actions or language. If the incident concerns a toy or equipment let the children know that you need to hold the object. Where possible, put your first focus on the child who has been hurt. Show the child positive care and attention. Comfort the child. If possible, get everyone to sit down. When the child is feeling calmer, you turn to the child who has done the hurting.

#### **Step 2 Acknowledgement of feelings**

"You are both upset" "Can you see that hurt him/her? S/he is very sad/angry." If appropriate, encourage the child who has been hurt to make an assertive statement such as "When you hit people, it hurts them" or "We use kind hands"

#### **Step 3 Gather information**

Discuss the situation with both children. Remember that the question "What did you want when you...?" is easier to understand for a young child that "Why did you...?" this is a more abstract concept.

#### **Step 4 Restate the problem to clarify the issue.**

Use simple language to check that you have identified the problem correctly

**Step 5** Ask for ideas about how to solve the problem.

Give them time to respond. If sharing is suggested explore how this will be done so agreed actions are understood by both children. If necessary suggest possible solutions, e.g. finding another toy, taking turns, using a timer

**Step 6** Offer follow-up support, e.g. "I'll come and see you in two minutes and check that you have both had a turn."

Once a solution has been agreed, remember to reinforce the notion that the children have solved the problem themselves.

**Strategies adopted when a child's behaviour is challenging**

- Get down to the child's level where possible. Show concern for the child. Make eye-contact where possible. Remember to adjust your proximity to the child, according to what you know about him/her. A child may find you being too close aggressive or challenging; some children respond best if you are beside them rather than face to face
- If eye contact is not possible, ensure that you are speaking so that the child can hear you
- Ensure that you have the child's attention, use their name
- Keep what you say focused and to-the-point
- Speak calmly and don't raise your voice
- State positively what you want or need, e.g. "I need you to move around safely indoors." - "I need you to come down from there, it's dangerous." Try to say what you positively need, wherever possible
- Be firm and clear but avoid a direct power struggle
- Be clear and use simple words or phrases. Support your speech with symbols or signs if appropriate. Try not to keep talking or repeating
- Remember that when a child is very angry or aroused it is much more difficult for them to hear and act on what is being told to them. You may need to stay with the child until they are calm and then talk through what has happened with them. In such situations call upon team members to remove other children to ensure their safety and prevent the child who is angry from having their behaviour reinforced by the attention of their peers
- Offer the child two positive and realistic choices to resolve the situation

**Strategies for dealing with dangerous or harmful behaviour**

- It is important that we clearly signal the unacceptability of dangerous behaviour, and behaviour which harms others. If a child is in immediate danger you may need to change the tone of your voice to be heard. "I need you to put the stick down now. It's sharp and could hurt someone."
- If necessary, calmly call for support from another member of staff.
- Try to say what you want to happen and not what you don't want, e.g. "I need you to pick up all those toys now" and/or set a limit. If you do set a limit, remember that you need to stick to it and it should be something immediate and short, e.g. "I need you to come down now. If you don't come down now, then your playing will be finished for two minutes."
- To follow through this strategy, you might sit quietly with the child, or hold the child's hand and keep the child with you. "Time out" is not usually used unless it is part of a Personal Plan and has been agreed with the parents. Before the child returns to play, ensure that the boundaries are clear. For example: "Are you ready to do play

nicely now? Remember: in nursery there is no hitting.” Settle the child into an activity before leaving her or him.

### **Repeated patterns of behaviour**

If a child is consistently repeating the same difficult behaviour, or targeting a particular child, then you must make other staff aware as soon as possible. Issues like this may be approached by:

1. Raising staff awareness/vigilance.
2. Looking at “triggers” (e.g. is it always at tidying up time?) and acting to prevent the difficult behaviour occurring (e.g. giving child positive attention at that time.)
3. Evaluating the curriculum/expectations on the child and making adjustments if appropriate.
4. Meeting with the parents in order to gain an understanding of the child’s behaviour and develop agreed joint strategies to manage the difficulties

### **Involving parents**

- Parents should be involved as partners.
- Explain the difficulty in nursery and ask if the parent has any particular understanding. Parents are experts on their own children.
- Take a problem-solving approach: we need to work together to help your child with this... Ask for the parent’s support – can the parent take time to talk to the child about the difficulty? Can we all use the same strategies?
- Arrange to review progress a week later.
- Feedback information to the staff team.

When behaviour continues to be difficult, you will need to discuss with the SENDCO and a Personal Plan may be adopted. We will seek advice from other agencies if appropriate.

### **Strategies for dealing with unwanted approaches:**

- Use the sand timer
- Say ‘stop, I don’t like that’
- Offer two choices
- Staff scaffolding using negotiating skills through Fundamental British Values

## Appendix 2--Restrictive Physical Intervention

A restrictive intervention is defined as the use of physical force to control a child's behaviour. The law states that restrictive physical interventions with a child **should only be engaged in if the child is at serious risk of hurting him/herself or someone else, causing substantial property damage or interfering with the learning of others.** The centre believes that in the vast majority of circumstances restrictive physical intervention with young children is an extreme course of action and should only be used in an extreme crisis or as a last resort when all other strategies have been tried.

Restrictive physical interventions should involve the minimum amount of force for the minimum amount of time. All incidents of restrictive physical intervention should be reported to the Designated Child Protection Officer using an incident reporting form.

Where a child has serious, on-going behavioural difficulties that require physical intervention to ensure the safety of the child or others, staff will be given appropriate training, a behaviour support plan will be developed with the team and parents/carers and other agencies will be contacted for additional support as necessary.

As stated for the Statutory Framework in the Early Years Foundation Stage, 2014, corporal punishment is not permitted and its use would constitute an offence. Additionally:

*“Providers must not threaten corporal punishment, and must not use or threaten any punishment which could adversely affect a child's well-being.”*

And:

*“Providers are responsible for managing children's behaviour in an appropriate way. Providers must not give corporal punishment to a child. Providers must take all reasonable steps to ensure that corporal punishment is not given by any person who cares for or is in regular contact with a child, or by any person living or working in the premises where care is provided. Any early years provider who fails to meet 27 these requirements commits an offence. A person will not be taken to have used corporal punishment (and therefore will not have committed an offence), where physical intervention<sup>29</sup> was taken for the purposes of averting immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if absolutely necessary. Providers, including childminders, must keep a record of any occasion where physical intervention is used, and parents and/or carers must be informed on the same day, or as soon as reasonably practicable.”*