

White Rock Pre-school

Positive Behaviour Policy

Policy statement

White Rock Pre-school 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. We aim to provide an environment in which children can develop self-discipline and self esteem in an atmosphere of mutual respect and encouragement.

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 the programme for promoting personal, social and emotional development.

Our designated person responsible for ensuring the implementation of our positive behaviour policy is **Karen Hornabrook**

Procedures

All the pre-school staff take responsibility for our programme for supporting personal, social and emotional development, including issues concerning behaviour.

Karen Hornabrook alongside **Rachel Phillips** the Pre-school supervisor will ensure that:

- Through training and reading of any relevant information, that the pre-school staff are kept up to date with legislation, research and thinking on promoting positive behaviour and on handling children's behaviour where it may require additional support;
- The staff have access to relevant sources of expertise on promoting positive behaviour within the programme for supporting personal, social and emotional development ; and
- Check that all staff have relevant in-service training on promoting positive behaviour.
- A record is kept of staff attendance at this training.
- We recognise that ways of 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 unwanted 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 unacceptable, 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 or negative behaviour.
- When children behave in undesirable 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 single out and humiliate individual children.
- 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 undesirable 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 behaviours of young children include tantrums, biting or fighting. Staff will remain 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, sensory seeking or frequent change of carers. Sometimes a child has not settled in well and the behaviour may be the result of 'separation anxiety'. In this case we will work with the parents to find a solution that may involve inviting the parent to stay with their child for a while.
- 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.

Physical Intervention

It is important that staff should only touch children in ways that are appropriate to their professional or agreed role and responsibilities. There are three main types of physical contact as follows.

Positive handling

Early years practitioners can use positive handling in a range of normal daily interactions such as:

- giving guidance to children, such as how to hold a paintbrush or use climbing equipment
- providing comfort and emotional support, such as placing an arm around a distressed child.
- providing intimate care, such as nappy changing or toileting and
- providing first aid.

Staff must always be aware and respect the fact that all children respond to physical contact and touch in different ways. Some children are over-demonstrative and may demand a great deal of affection and physical contact, while others may try to avoid it altogether. There may also be children who have experienced emotional, physical or sexual abuse and they will need very sensitive support and care. Staff must also respect any cultural or sensory sensitivities to physical contact.

All children have a right to safety, privacy and dignity when contact of a physical or intimate nature is required and depending on their abilities, age and maturity should be encouraged to act as independently as possible.

Physical intervention

Physical intervention is any method of physically intervening to resolve a difficult or dangerous situation and is not necessarily physical restraint. It can also include

mechanical and environmental means such as chairs with straps, stair gates or locked doors which are used to ensure a child's safety.

Restrictive physical intervention

This involves the use of physical intervention intentionally to restrict a child's movement against his or her will, reducing any risk to the child, other children or adults in the immediate area. In most cases, this will be through the use of the adult's body rather than mechanical or environmental methods.

Staff must only use restrictive physical intervention in extreme circumstances when children are in danger of hurting themselves, others or of causing significant damage to property. It should be used in the context of positive behaviour management approaches and alongside other strategies. The degree of force used will be the minimum needed to achieve the desired result. The aim of using physical restraint or intervention will be to restore safety, both to the child and those around him/her and to encourage positive behaviour. Staff should use the minimum restrictive force necessary to maintain safety and for as short a period as possible. Restrictive physical intervention must never be used as a punishment or as an alternative to other methods which would be effective. It is important that any use of restrictive physical intervention is recorded as soon as possible and within 24 hours of the incident. A **physical restraint record** should show who was involved, the reason physical intervention was considered appropriate, how the child was held, when it happened and for how long. It should also include any subsequent injury or distress and what was done in relation to this. Parents must be informed and given a copy of the record.

If a child is identified for whom it is felt that Restrictive Physical Intervention is likely, then a Positive Handling Plan will be agreed and completed with the parents. This Plan will include strategies to help the child avoid getting into these situations and identify the early warning signs that indicate foreseeable behaviours that may be developing. We will always follow the guidance for the Use Of reasonable Force 2013 document.

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 can 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.
- 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

- We help young children learn to empathise with others, understanding that they have feelings too and that their actions impact on others' feelings.
- We help young children develop pro-social behaviour, such as resolving conflict over who has the toy.
- 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:
 - 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;
 - 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 the strategies that the child's key worker and parents put in place do not work, we use the Code of Practice to support the child and family, making the appropriate referrals for behavioural support where necessary.