Spilsby Playgroup



Promoting Positive Behavoiur Policy

2022/2023

Our aim is to promote positive behaviour through an environment where mutual respect is modelled and expected from all adults and children, with any inappropriate behaviour approached and dealt with in a calm manner helping children to learn over time and to behave in a positive manner, understanding, ultimately how their actions can impact on others.

Positive behaviour is supported within the context of the development of children's personal, social and emotional skills and well-being. A key person understands children's needs, their levels of development, personal characteristics, and specific circumstances, supports this development. This ensures children's individual needs are understood and supported.

Settling into a new environment is an emotional transition for young children especially as they learn to develop and master complex skills needed to communicate, negotiate and socialise with their peers. Skills such as turn taking and sharing often instigate minor conflicts between children as they struggle to deal with powerful emotions and feelings. During minor disputes, key persons help children to reflect and regulate their actions and, in most instances, children learn how to resolve minor disputes themselves. However, some incidents are influenced by factors, requiring a strategic approach especially if the behaviour causes harm or distress to the child or others. These situations are managed by the SENCO/key person using a stepped approach (below) which aims to resolve the issue and/or avoid the behaviour escalating and causing further harm.

This is an unsettling time for young children. Educators are alert to the emotional well-being of children who may be affected by the disruption to their normal routine. Where a child's behaviour gives cause for concern, educators take into consideration the many factors that may be affecting them. This is done in partnership with the child's parents/carers and the principles of this procedure are adhered to

The setting manager/SENCO will:

- ensure that all new staff attend training on behaviour management such as *Understanding and Addressing*Behaviour in the Early Years (EduCare)
- help staff to implement, Promoting positive behaviour in their everyday practice
- advise staff on how to address behaviour issues and how to access expert advice if needed

Rewards and sanctions

We support children with consistent messages, clear boundaries and guidance to intrinsically manage their behaviour through self-reflection and control.

Children are never labelled, criticised, humiliated, punished, shouted at or isolated by removing them from the group to be left in 'time out' or on a 'naughty chair'. If a child is distressed or causing harm to others, it may help for their key person to take them from the immediate environment where the incident occurred in order to calm down for a few minutes. If appropriate, the key person can use this time to help the child reflect on what has happened.

Physical punishment of any kind is never used or threatened.

Step 1

 Unwanted behaviours are addressed using our daily agreed approach and consistently applied to deescalate situations and support a child in developing positive behaviour.

Step 2

- Where step 1 has been applied yet further support is needed to support positive behaviours, appropriate adjustments to practice will be agreed within the setting. Behaviours are discussed by the key person, SENCo, manager and parents. During the meeting all-round knowledge of the child and family is to be shared to try and understand any known influencing factors such as a new baby in the family, child and/or parental illness, underlying additional needs, in order to help place the child's behaviour into context.
- These initial concerns and next steps will be recorded on SEN Initial Support Form (Appendix 1)
- If relevant, a risk assessment will be carried out.
- If the planned adjustments are successful and the unwanted behaviour does not reoccur or cause concern then normal monitoring can resume.

Step 3

- If the behaviour remains a concern, then the key person and SENCo continue to liaise with the parents to try to discover further possible reasons for the behaviour and to agree next steps. If relevant and appropriate the views of the child must be sought and considered to help identify a cause.
- If a cause for the behaviour is not known or only occurs whilst in the setting, then the setting manager, SENCo must suggest using a focused intervention approach to identifying a trigger for the behaviour such as the ABC approach, i.e. Antecedents what happened before; Behaviour what was the behaviour observed;
 Consequences what happened after the event.
- If a trigger is identified, then the SENCo and key person meets with parents to plan support for the child through a graduated approach via SEN support.
- Aggressive behaviour by children towards other children will result in a staff member intervening immediately to stop the behaviour and prevent escalation using the agreed initial intervention approach. If the behaviour has been significant or may have a detrimental effect on the child, the parents of the victim of the behaviour and the parents of the perpetrator must be informed. If physical intervention was needed, staff must follow the guidance as set out below. The designated person complete, Safeguarding Incident Reporting Form (appendix 2) and contact Ofsted if appropriate. A record of discussions is recorded and parents are asked to sign.
- Parents must also be asked to sign risk assessments where the risk assessment relates to managing the behaviour of a specific child.

- If relevant, actions for dealing with the behaviour at home are agreed with parents and incorporated into the action plan. Other staff are informed of the agreed interventions and help implement the actions. The plan must be monitored and reviewed regularly by the key person/SENCo until improvement is noticed.
- Incidents and intervention relating to unwanted/challenging behaviour by children must be clearly and appropriately logged on SEN Support Action plan (Appendix 3)

Step 4

If despite applying initial intervention to deescalate situations and focused interventions to identify triggers the child's behaviour continues to occur and/or is of significant concern, the SENCo and key person invite the parents to a meeting to discuss external referral and next steps for supporting the child. It may be agreed that we request support from the Early Help team and/or other specialist services such as the Area SENCo. This will help address most developmental or welfare concerns. If the behaviour is part of other welfare concerns that include a concern that the child may be suffering or likely to suffer significant harm, safeguarding procedures, Child Protection and Safeguarding Policy for children, young people and vulnerable adults procedures will be followed.

- Advice provided by external agencies is incorporated in SEN Support: Action Plan (Appendix 3) and regular multi-disciplinary meetings held to review the child's progress.
- If a review determines a statutory assessment may be needed then all relevant documentation must be collected in preparation for an Education Health and Care Assessment which may lead onto an Education, Health and Care Plan.

Use of physical intervention

Staff will already use different elements of physical contact with a child as part of their interaction in the setting especially when they are comforting a child or giving first aid. However, physical intervention to keep a child or other children safe is different and should only be applied in exceptional circumstances.

The EYFS states that physical intervention from a staff member towards a child may be used for the purposes of "averting immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if it is absolutely necessary".

Staff must do all they can to avoid using a physical intervention because this is not the preferred way of addressing children's behaviour.

To offer protection to children a range of appropriate graded interventions may be needed before physical intervention is applied. Most single incidents such as a child throwing a book on the floor or kicking a chair usually only require a verbal intervention from a member of staff. In other situations, an intervention can be applied through mechanical and environmental means such as locking doors and stair gates. This usually stops a situation escalating. However, there will be some situations where a child places themselves or others in danger which requires an immediate need for the use of both verbal and physical intervention. If a single or persistent incident requires a physical intervention such as physical handling from a staff member towards a child, then this is used intentionally to restrict a child's movement against their will. In most cases

this can be applied through the use of the adult's body gently and safely blocking the child from access to danger or to prevent danger.

To physically intervene, an educator may use "reasonable force" to protect a child from injuring themselves or others. Legally an educator may also use reasonable force to prevent a child from damaging property. However, we would expect that in instances of damaging physical property a child would only experience a physical intervention if the broken property presented a risk or is high value.

If a situation arises which requires urgent physical hands-on intervention this is best applied by the staff who knows the child well such as their key person who is more able to calm them or use other known methods for defusing situations without physical intervention.

Physical handling

We use the principle of applying reasonable minimal force and handling in proportion to the situation. Staff use as little force as necessary to maintain safety. This intervention should only be used for as short a period as possible to keep the child safe and maintain well-being by aiming for:

- keeping the child's safety and well-being paramount
- a calm, gentle but firm approach and application of the intervention
- never restricting the child's ability to breathe
- side-by-side contact with the child
- no gap between theirs or the child's body
- keeping the adults back as straight as possible
- avoiding close head-to-head positioning to avoid injury to the child and themselves (head butting)
- only holding the child by their 'long' bones to avoid grasping at the child's joints where pain and damage are most likely to occur
- avoiding lifting the child unless necessary
- reassuring the child and talking about what has happened
- only those who have received specific training from a reputable external source e.g. British Institute of Learning Disabilities www.bild.org.uk/may provide a physical intervention on a disabled child.

Risks

There are risks associated with any physical intervention and handling of a child. The younger and more vulnerable a child may be, the greater risk to the child of using physical intervention towards them. However, there are also risks to children associated with not intervening physically; for instance, if an educator did not take hold of a child by the wrist, they may have run into the path of a fast-moving car.

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Before intervening physically to protect a child from immediate harm an educator needs to decision make in a split second, considering the following factors. This is described as dynamic risk assessment.

- What is the immediate risk to this child if I do not intervene now?
- What might the risks be if I do intervene? If this was my child, what would I want someone looking after them to do in this situation?
- What is the minimum level of intervention that will be effective here? How can I do this as gently as possible for as short a time as possible and how am I going to manage myself to stay calm?

Recording

Any instance of physical intervention is fully recorded immediately and reported to the designated person as soon as possible on Appendix 2: Safeguarding incident reporting form, ensuring that it is clearly stated when and how parents were informed. Parents are asked to sign a copy of the form which is then kept on the child's file. The designated person decides who will notify the parent and when, ensuring that the parent signs to say they have been notified. An individual risk assessment should be completed after any physical intervention with a child which considers the risks and likelihood of such behaviour re-occurring and how this will be managed. The risk assessment should be agreed and signed by parents.

Challenging unwanted behaviour from adults in the setting

We do not tolerate behaviour demonstrating dislike, prejudice, discriminatory attitudes or action towards any individual/group. This includes those living outside the UK (xenophobia). This also applies to behaviour towards specific groups of people and individuals who are British Citizens residing in the UK.

Allegations of discriminatory remarks or behaviour made in the setting by any adult will be taken seriously. The perpetrator will be asked to stop the behaviour and failure to do so may result in the adult being asked to leave the premises. Where a parent makes discriminatory or prejudice remarks to staff at any time, or other persons while on the premises, this is recorded on the child's file and is reported to the setting manager. The procedure is explained and the parent is asked to comply while on the premises. An 'escalatory' approach will be taken with those who continue to exhibit this behaviour. The second stage comprises a letter to the parent requesting them to sign a written agreement not to make discriminatory remarks or behave in discriminatory or prejudice ways; the third stage may be considering withdrawing the child's place.

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SEN Support: Initial record of concern form

Name of child:		DOB:	
Name and role of person recording concern:		Date:	
Nature of concern:			
Observation notes			
(detail evidence here):			
Parents informed of cor	ncern and their views are known?	Yes No	
Notes:			
Curriculum differentiati	on applied?	Yes No	
Notes (detail when and how)			
Other adjustments mad	e?	Yes No	
Notes (detail when and how)			
Next steps			

Safeguarding incident reporting form (for concerns, child welfare, physical intervention,					
witness statement, fact-finding)					
Name of setting:					
Child's name:	Name of person reporting:	Name of designated person:			
Date of birth:	Job title:	Job title:			
Date of concern – when observation, e	vent, disclosure was made				
Nature of Concern. In the space below describe what was observed, using a body diagram, if necessary.					
Impact : what are your main concerns about how this might impact on the child physically or emotionally, please include the child's voice (as appropriate)?					
Response to allegation/complaint: Please advise in your words, what happened, when and where, what did you see or hear and where you were in relation to the alleged incident.					
Signature of person completing the form					

Appendix 2:

Outcome decisions/actions to be taken (Tick all that apply) No further action Offer support (provide details) Continue to monitor (detail what, who by and until when) Referral/signposting/advice/guidance to be offered by setting (provide details) Refer to social care for child protection. Liaise with social care to refer to CAF (Common Assessment Framework)/EHA (Early Help Assessment Date completed: Signature of designated person: **Physical intervention** If this form is used to record an incident of physical intervention being used on a child to prevent them from harming themselves or others, please ask the parent to sign here to confirm that they have been informed of the circumstances of the event as recorded here. Signature of parent: Date:

Hand this form to your setting's designated person; discuss your concerns and agree what action is to be taken

and when it will be reviewed.

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SEN Support - Action plan

Date:		
My name is:	This is Me!	IMAGE OF CHILD
My DOB is:		
I can:		
•		
•		
I would like to:		
•		
•		
This is what is important to me:		
•		
•		
I can't do everything I like becaus	se:	
•		
•		
My parents/carers think:		
•		
My key person thinks:		
•		
I receive help from:		
•		
•		
I already have this help from my s	setting:	

•
I would like to try this activity
•
When and where?
•
With whom?
•
With what?
•
The outcome should be:
•
I may also like to try to
•
When and where?
•
With whom?
•
With what?
•
The outcome should be:
•
My parents/carers will help me by:
•
We will look at my plan again on:

Name of child:	Key person:			
Planned objective:				
Date:	Activity:	Outcomes:	Persons present:	
Notes:				

Action plan - Recording Sheet

Action plan - Review sheet	
Name of child:	Date:
People present at this review:	
Planned objectives:	
Outcome (setting):	
Outcome (home):	
Name of an a	
Next steps:	