Behaviour Management October 2025 (No Updates)

This policy defines the methods used, and those which may NOT be used, in respect of encouraging positive behaviour.

The setting has adopted the therapeutic view to behaviour management to support all children to learn behaviours through a consistent, positive and pro-active approach.

The Therapeutic view:

Negative experiences create negative feelings. Negative feelings create negative behaviour. Positive experiences create positive feelings. Positive feelings create positive behaviour.

Therapeutically healthy actions:

- Are based on research, analysis and careful planning.
- Provide a protective and educational consequence for anti-social behaviour.
- Provide positive experiences and so drive positive feelings.
- Over time develop internal motivation to repeat pro-social behaviour.

Therapeutically lazy or harmful actions:

- Using punishment, threat, fear, shame, extrinsic reward as bribery (behaviourism).
- Drive negative feelings and or anti-social behaviour.
- They don't protect, educate or prevent the behaviour happening again and drive negative
- feelings in individuals or groups.

Staff at Tiny Toes aim to promote pro-social behaviour with consideration and understanding of the needs of all individual children, in the following ways:

- Providing age-appropriate reward, recognition and feedback, celebrating all achievements and positive behaviours.
- Openly and appropriately discussing considerate behaviours and supporting older children to develop their own guidelines for behaviour.
- Supporting children in developing self-esteem, confidence, competence and feelings of belonging.
- Modelling appropriate and pro-social interactions.
- Providing a stimulating and varied environment, including space for rest and relaxation.
- Effectively planning stimulating and varied activities, including calming activities and those which promote pro-social behaviour and develop an understanding of feelings and emotions.
- Providing children with clear routines including what is to come next by ongoing conversations, visual timelines and consistency.
- Using positive phrasing and language (staff: child/ staff: staff/ staff: parent).
- Building strong bonds and relationships between the family and child.
- Giving all children the same access to learning, with consideration of developmental stage, age, experiences and abilities, there is to be clear equity.
- Encouraging positive behaviour by positive consequences (as opposed to "stop that, or no garden time".
- Set clear boundaries and expectations and make consistent responses in addressing incidences where children's behaviour is not appropriate.

Where difficult/ unsocial behaviour occurs, staff will intervene ensuring that they treat the behaviour as unacceptable as opposed to the child. Interventions can include the following:

- Working in partnership with parents to promote consistency.
- Distracting children by directing them to more positive, appropriate activities that have opportunity to challenge
- Getting child to a calming area, adult will remain with the child, the child may feel overwhelmed by adult interaction so the child will need space, staff to stay local to the child, allow time for emotional recovery.
- Where behaviour has caused injury to another child an Incident Form will be completed.
- One to one support for the child, external help may be required if available.
- Rationalising the child's subconscious behaviour; analysing what is going on around that child, and what is leading to the behaviour in question.
- Considering what feelings and emotions the child may be enduring. Using signs/emotion cards/ prompts that represent feelings, dependant on the age of the chid, if necessary.
- Using a 'de-escalating script' to reduce antagonism such as the example found on: https://www.odessa.edu/employees/behavioral-intervention-team/Deescalation-script.pdf
- Use of de-escalating language and phrases i.e. "you can listen from there", "come for a walk with me".
- Limiting choice; too much choice may cause anxiety. Freedom of choice can escalate difficult or reluctant behaviour by the child feeling empowered and in control
- Only if the child is at risk of harming themselves or others around him/ her, will an adult calmly remove them from the situation/area, using the methods in the Touch Policy**.**
- At a convenient time, negotiate a solution using effective restorative questions to reflect, repair and restore the situation. This will teach behaviour and increase internal discipline.
- Once a situation has been resolved, it is to be forgiven, a child is to continue with the day with positive interactions and not to be reminded of previous behaviour.
- In extreme cases, where a child remains in heightened distress or is persistently acting destructively and unsafely, the manager will contact parents/carers to ask for arrangements to be made for the child to be collected from nursery as soon as is practically possible.

Staff should avoid judging children negatively because of their behaviour. Staff should instead facilitate children's learning by helping them to recognise and manage their emotions and give them strategies to help them deal with situations assertively. Where children are in dispute with each-other, staff should avoid imposing solutions on children to end squabbling quickly, such as removing toys, or reprimanding the perceived aggressor. Instead, staff should recognise the learning opportunity that could be on offer and encourage children to resolve disputes through communicating and empathising with each other. Staff should on occasion fight their instinct to rush to a child crying out to give them time to observe and assess the situation and work out how they can help children to resolve for themselves. In this way children are encouraged to express themselves in a positive way to each other and reduces competition for adult approval.

Where difficult or unsociable behaviour is deemed to be persistent, the key worker is to inform the Behaviour Management Lead and/or Nursery Manager, for the following assessments to be made:

- Risk calculator/ conscious vs subconscious behaviour; can be carried out with parents.
- Anxiety mapping- one to be completed with parents, analysis to establish patterns at different times or different environments.
- The Hertfordshire Steps 'Roots and Fruits' exercise which supports staff in identifying the underlying influences on behaviour.
- A risk reduction plan may be necessary.

Parents must openly be involved in the process to determine the best outcome and support for the child. If the above assessments have been made and strategies to teach the child pro-social behaviour have not been effective, the nursery will seek external support from the district inclusion officer to work with the Nursery's Behaviour Management Lead and SENCo if necessary.

The following actions are NOT permitted under any circumstances at the Nursery. External Discipline imposed by staff through rules, punishment, bribery and suppression will only achieve a short-term change in behaviour. Any of the below would be subject to disciplinary action:

- Smacking, slapping, shaking or in any other way roughly treating the child.
- Deprivation of food, drink, sleep or medical attention.
- A requirement to wear inappropriate or distinctive clothing.
- Shouting at, or in any way frightening or humiliating a child.
- Isolating a child by leaving him / her alone in a room.
- Any other actions likely to instil feelings of guilt, shame or inferiority into the child.
- Using labelling words such as “naughty,” “stupid,” or similar.
- Threatening language and use of intimidating body language.

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If a child reacts in particularly volatile, physical intervention may be needed, management are to immediately attend and support where necessary. If restraint has been used an Incident Log will be completed and shared with the parent/carer. Please see The Touch Policy for what is deemed as acceptable physical restraint.

Tiny Toes recognises that behaviour norms across ages will vary, and managing this behaviour will need to be consistent with the child’s age and stage of development. Staff are to be provided with team training regarding consistent approaches for inappropriate behaviour.