

5.2 Biting policy



Policy Statement

Biting is a common behaviour that occurs more often amongst children under the age of five and in group situations. Biting can be a concern for parents and staff, and can often be painful and frightening for the child who has been bitten as well as for the child who bites. Biting happens for different reasons with different children and under different circumstances. The need or motivation for one child to bite another is just part of some children's development journey, where they do not yet have the words to sufficiently communicate common emotions such as anger, frustration or need. While biting is more common at nursery or in other group situations than at home, a biting incident is not a negative reflection on the biter, the staff, or the nursery. We have clear behavioural expectations at the nursery and children are taught and encouraged to share, wait their turn, be respectful and play happily together.

Why does biting happen?

Young children often do not have the coping mechanisms, nor the self-regulation skills which adults and older children have that help us to diffuse and express our emotions in socially acceptable ways. As children mature, gain self-control, and develop problem-solving skills, they usually outgrow this type of behaviour. Young children may resort to hair pulling, hitting, and biting which is upsetting for everyone, but at the same time, developmentally normal. The most common reasons for a child to bite include:

- To relieve pain from teething.
- To explore cause and effect ("What happens when I bite?").
- To experience the sensation of biting.
- To satisfy a need for oral-motor stimulation.
- To imitate other children and adults.
- To feel strong and in control.
- To get attention.
- To act in self-defence.
- To communicate needs and desires, such as hunger or fatigue.
- To communicate or express difficult feelings, such as frustration, anger, confusion, or fear ("There are too many people here and I feel cramped").

Our aim

We understand that biting incidents can be really stressful for parents, whether it is their child that has been bitten or their child that has been responsible for biting others. Children bite for many reasons and we aim to act quickly and efficiently when dealing with any case of biting. We will deal with each biting incident on a case-by-case basis, ensuring that parents/ carers involved are kept up to date with what is happening, but at the same time respecting the confidentiality of the children involved. This ultimately means that we are not able to disclose the identity of any child involved in a biting incident.

Procedures

In the event of a biting incident:

- We will first attend to the child who has been bitten and we will comfort him/her and give reassurance.
- Once the child is calm our staff will check for any visual injury. If there is a bite mark, this will then be wiped with an antiseptic wipe. Staff will explain to the child what is happening and support the child as this process may be painful.
- If the skin is broken and the wound is bleeding, we will allow it to bleed as covering the wound can increase the risk of infection. Staff must wear PPE when dealing with bodily fluids. In cases where the bite has broken the child's skin, a senior member of staff must contact the parent/carer of the child immediately. This phone call should be sensitive and give reassurance to the parent/carer and offer an explanation of the procedure which has been followed. Staff may need to advise the parents/carers to contact the child's GP.
- If the skin has been severely broken the child should be taken to Accident and Emergency immediately by senior member of staff and the parents/carers must be informed immediately too.
- If the skin is not broken staff will wait 45/60 minutes and then check if there is bruising or a bite mark still present. If there is no obvious mark or bruising this can then be discussed with the parents/carers at collection time. If after 45/60 mins the bite has left the child with a bite mark or bruising, then a senior member of staff will contact the parents of the child to inform them of the incident.
- The staff member who witnessed the incident **MUST** complete an Incident Form for all children involved.
- The Nursery Manager **MUST BE** informed of all biting incidents.
- Wherever possible the child who has bitten should have their behaviour managed by their key person and the consequence of this behaviour should be explained in a way which is appropriate to the child's age and stage of development.
- The child who has caused the bite will be told in terms that they understand that biting (the behaviour and not the child) is unkind and will be shown that it makes staff and the child who has been bitten sad. The child will be asked to give the child who has been bitten a favourite book/toy or comforter to help them develop their empathy skills.
- If a child continues to bite, observations will be carried out to try to distinguish a cause, e.g. tiredness or frustration. Meetings will be held with the child's parents to develop strategies to prevent the biting behaviour. Parents will be reassured that it is part of a child's development and not made to feel that it is their fault.
- The parents/carers of the child who has bitten another person will be informed of the incident too; this must be handled in a sensitive and confidential manner and not discussed openly in front of other parents/carers and children. Parents/carers may ask staff members the name of the child who has bitten or been bit. Staff **MUST** explain that they cannot disclose this information as confidentiality must be maintained.
- Where a child may repeatedly bite and/or if they have a particular special educational need or disability that lends itself to increased biting, e.g. in some cases of autism where a child doesn't have the communication skills, the nursery will carry out a risk assessment.

Strategies we will use to support the management of biting incidents:

- We may need to increase the supervision of a child who is biting; this does not necessarily need to be one to one. It could be during particular times of the day, or by simply reducing the number of large group activities provided.
- We will use the ABCCD Model. ABCCD Behaviour recording is a way of collecting information to help determine the function of a child's behaviour. It does this by breaking down your observations into three elements:
 - **Antecedents (A):** what happened directly before the behaviour occurred.
 - **Behaviour (B):** the specific action(s) or behaviour of interest.
 - **Consequences (C):** what happened directly after the behaviour occurred.
 - **Communication (C):** what might be the child trying to communicate?
 - **Do's and Don'ts (D):** reflection on the actions taken; did the help or did they hinder; what would we do differently next time?
- Our staff will make sure a child who is biting received significant encouragement when displaying positive behaviour, and avoid excessive attention following an incident.
- Our staff will evaluate the routine and judge whether it is meeting the needs of the child. A good quality routine should provide experiences and activities both indoors and outdoors that have no waiting times. Whilst group activities should be for the benefit of the children and not as a holding exercise.
 - Staff will plan activities which help release frustration such as physical outdoor play and malleable experiences like play dough, gloop etc.
 - Staff will also provide cosy areas for children to relax in and activities which release tension such as splashing in water, digging in sand and using sensory equipment.