

# Biting

## Policy and Procedure

Welfare Standards: Safeguarding and Promoting Children's Welfare

The Green Umbrella Day Nursery recognises that small children, for a variety of reasons and from time to time attempt to bite other children. Children bite other children for many different reasons. A child might be teething or be overly tired or frustrated with something. He or she might be experimenting or trying to get the attention of another child or staff member. Babies and toddlers have no or limited verbal skills and are sometimes impulsive without a measured degree of self-control. Biting can occur for no apparent reason at all.

Due to the speed and randomness with which biting incidents occur, it is not always possible to be quick enough to intervene to prevent these from happening.

While the motivation or attempt to bite is not seen as particularly worrying within a child's development, their success in doing so could bring with it distress to the bitten child and to the parents/carers along with health concerns.

The nursery recognises that a human bite that breaks the skin brings risks of possible infection including Tetanus and Hepatitis to the victims. Therefore, it is the responsibility of all parents/carers to make sure their child's Tetanus and other immunisations are up to date. The nursery takes no responsibility regarding immunisations for children or staff alike.

Biting is a part of a normal developmental stage for young children who are teething and are still developing their language skills and is usually a temporary condition. The higher risk children would be in the age group of between thirteen and twenty four months of age and means that it is a particular concern for the staff in our Little Owls Unit.

Biting is not "abnormal" for infants and toddlers since one in ten toddlers bite. However, because of the danger this behaviour represents to other children, repeated biting in a group childcare setting cannot be tolerated and requires positive intervention on the part of both the staff and parents/carers.

The nursery will encourage the children to use alternative methods to biting if they become angry or frustrated and the staff, particularly in our Little Owls Unit will maintain a close and constant supervision of the children at all times especially for those children that have bitten another child on a previous occasion. Unfortunately identification of a child who is susceptible to biting usually means they have already bitten at least once before. The good news is that all the children usually stop this action quickly although it can take a little more time with others. It may be deemed necessary to carry out a risk assessment and this would normally be carried out by the nursery's nominated SENCO to further reduce the risk of a child who has previously bitten another child biting again.

The safety of the children and staff at the nursery is our primary concern. The following actions will be taken by staff when a biting incident occurs.

### **Procedure to be followed if the bite is witnessed:**

1. The biting will be interrupted immediately with a firm "we do not bite other people – biting hurts".
2. The bitten child will be comforted by a qualified member of staff.

3. One of the remaining staff will remove the child who has bitten from the situation at which time our Behaviour Policy will be followed which may involve either a time-out or a distraction depending on the age of the child.
4. The wound of the bitten child will be assessed immediately by one of our Paediatric First Aiders.
  - a. **If the skin is NOT broken**  
A cold compress should be administered to reduce the swelling and the child should be comforted until they are ready to re-join the group.
  - b. **If the skin IS broken**  
The wound should be cleaned using cooled boiled water and covered with gauze to keep the area clean. The Operations Director must also be informed immediately.

**In both cases**, the most senior person on site should be informed of the incident without unnecessary delay. It is the responsibility of the Room Leader (or in their absence the Office Manager) to telephone the parents/carers of the bitten child informing them of the incident thus giving them the choice whether they wish to seek further medical assistance.
5. An accident form should be completed for the child who has received the bite and an incident form should be completed for the child who bit. Both forms should include a detailed account of the incident and be accompanied by a copy of this Policy and Procedure for parents/carers information and be signed by the parents/carers on the day. If the parents/carers consider that their child requires medical treatment, a copy of the accident/incident report can be given to them to pass on to their GP or other medical advisor if requested.
6. Confidentiality of all children involved will be maintained throughout.
7. The bitten area should continue to be observed by staff and parents/carers for signs of infection.
8. The Room Leader must then create a plan for the child to identify the triggers that cause the child to bite and preventative steps must be taken to avoid the child biting again. Children who have bitten more than once will be identified on a list **for staff use only** which will be displayed confidentially in the nursery's office. This list will be updated as and when changes are made by the Office Manager and should include the child's name, the unit they attend and the sessions they attend. This will bring awareness to staff for preventative measures only. This will also be added to the agenda for every staff meeting stating updates verbally.

**Procedure to be followed if the bite is NOT witnessed:**

1. Once the bite has been identified the bitten child will be comforted by a qualified member of staff.
2. The wound of the bitten child will be assessed immediately by one of our Paediatric First Aiders.
  - a. **If the skin is NOT broken**  
A cold compress should be administered to reduce the swelling and the child should be comforted until they are ready to re-join the group.

**b. If the skin IS broken**

The wound should be cleaned using cooled boiled water and covered with gauze to keep the area clean. The Operations Director must also be informed immediately.

**In both cases**, the most senior person on site should be informed of the incident without unnecessary delay. It is the responsibility of the Room Leader (or in their absence the Office Manager) to telephone the parents/carers of the bitten child informing them of the incident thus giving them the choice whether they wish to seek further medical assistance.

3. An un-witnessed incident form must be completed for the child who has received the bite. This should include as much detail as possible and be accompanied by a copy of this Policy and Procedure for the parents/carers information and be signed by the parents/carers on the day.
4. In addition to the un-witnessed incident form, the Early Years Manager or in their absence the Office Manager or Deputy Manager must carry out a thorough investigation on the un-witnessed incident by interviewing all staff to try to establish why the incident was un-witnessed, who carried out the biting and how the bite was treated and monitored. The Early Years Manager or in their absence the Office Manager or Deputy Manager must then write a full report on the findings of their investigation and email this to the Operations Director on the same day.
5. The Operations Director will then assess the report, writing their own conclusions and take over all contact with the parent/carer at this time if required.
6. Confidentiality of all children involved will be maintained throughout.
7. The bitten area should continue to be observed by staff and parents/carers for signs of infection.
8. If the identity of the child is established, the Room Leader must then create a plan for the child to identify the triggers that cause the child to bite and preventative steps to be taken to avoid the child biting again. If the child is not established after the investigation, all staff must be aware and on their guard and monitor the children's behaviours.

Although we have not yet had a child who did not respond to our behavioural methods, we must reserve the right to ultimately exclude a child if we feel this is the best course of action for all concerned. However, prior to excluding the child, we would seek further information or advice from outside agencies (i.e. our regional SENCO Officer from North Somerset Council) to ensure this is the best course of action to be taken. If it is decided that exclusion is the only appropriate action to be taken, this exclusion may be a temporary one whilst a risk assessment is developed. This is to assist the staff in the future control of situations where biting cannot be dissuaded. However, in more serious cases, or where additional measures have been unsuccessful, the nursery may regretfully make the exclusion a permanent one for the safety of staff and other children. This decision will only be taken by the Nursery Owner/Director.

**All procedures are subject to regular review**

**This Policy/Procedure was reviewed June 2015**

**This Policy/Procedure should be included with the Registration Pack**