



BITING POLICY

Biting is a common behaviour that some young children go through. This is part of some children's development stage and where they do not yet have the words to communicate their anger, frustration or need. At St Paul's Walden Nursery we follow our positive behaviour policy to promote positive behaviour at all times.

Strategies to prevent biting include; sensory activities, biting rings, adequate resources and a stimulating exciting environment. However in the event of a child being bitten the following procedure will be followed:

The child who has been bitten will be comforted and checked for any visual injury. First aid will be administered where necessary. An accident form will be completed and the parents will be informed via

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telephone as soon as possible. The bitten area will be continued to be observed for signs of infection.

For confidentiality purposes and possible conflict the name of the child who has bitten will not be disclosed to the parents.

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 be shown that it makes staff and the child who has been bitten sad. The child will be asked to say sorry if developmentally appropriate or show they are sorry, e.g. through hugging. An incident form will be completed and shared with the parents at the end of the child's session.

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.

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In the event of a bite breaking the skin, this can present a risk of infection from bacteria such as *Staphylococcus aureus* and tetanus-causing bacteria and viruses such as hepatitis B, hepatitis C and HIV. To reduce the risk of infection, prompt treatment may be needed for both the 'biter' and the 'bitten'. This may include antibiotics, tetanus immunisations and/or immunoglobulin, hepatitis B vaccination and/or immunoglobulin and HIV prophylaxis treatment.

If a child or member of staff sustains a human bite wound where the skin has been broken they will require urgent medical attention in A&E after initial first aid is carried out (Box 1), this is so the bite can be assessed to identify the severity of it, provide antibiotics and assess the risk of exposure to a blood borne virus and if treatment is needed.

Box 1: First aid before attending A&E

- Encourage the wound to bleed (unless bleeding freely) with gentle pressure
- Never suck the wound
- Irrigate with warm running water and liquid soap
- Remove any foreign body (including teeth)

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- Cover the wound with a waterproof dressing
- If the biter has blood in their mouth they should swill it out several times with tap water (don't swallow the water).

Where a child may repeated 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 setting may recommend immunisation with hepatitis B vaccine for all staff and children.

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