

## SECTION 4 STAFFING POLICIES

### 5.4 Child Biting Policy

#### **Introduction:**

Biting is one of the most undesirable but unfortunately normal behaviours that some young children engage in, especially during the second and third years of life. Having a biter in a group of young children causes stress and tension, and being the parent of a biter or a child who has been bitten is very distressing.

Biting is a way of hurting that does not depend on size and physical strength. That is, a baby, waddler or toddler can inflict a bite that breaks the skin and is extremely painful.

Biting is a behaviour that adults are eager to find a “quick fix” or sure-fire way to eliminate. Unfortunately, there isn’t one. However, biting does demand our most effective and powerful disapproval. At the same time, it is important not to react to biting as we would if an older child or adult bit. Although we would expect an over three year old to have enough self control and understanding to avoid biting, babies, waddlers and toddlers may not.

#### **Aim:**

1. To minimise incidences of children biting.
2. To educate families that biting is a normal behaviour in the development of most children, usually caused by a need to express emotions and a lack of verbal communication skills.
3. To educate children that biting is not an acceptable behaviour.
3. To establish procedures in the occurrence of a child biting.

#### **Process:**

If a child bites or another child the following procedures will apply:

1. Staff will attend first to the victim to comfort the child and assess their injuries. First aid will be applied in accordance with the Centre’s Accident Policy.
2. If the bite does not break the skin a cold flannel or ice pack will be applied to the bite to reduce swelling.
3. If the bite breaks the skin, the skin will be disinfected before an icepack is applied. The child’s parent will be contacted and informed of the incident.
4. While attending to the victim (or immediately afterwards) the staff member will talk about the incident with the biter, explaining the consequences of his/her action, in words they will understand.
5. The staff member will show their disapproval for the child’s actions using tone of voice and facial expressions, and encourage the child to “help” make the victim feel better through positive and gentle touching.
6. The staff member will suggest an alternative action to biting i.e. tell the child to say “My turn please”, and will follow this up by encouraging the biter to ask for a turn and making sure he/she does have a turn.
7. An accident report will be written in the Accident, Medication and Illness folder in the child’s room. Parents of victims do not need to know who bit their child. Refer to the biter as the second child.

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Date of Implementation: October 2013

Date of Last Review: February 2017

Date of Next Review: February 2020

8. A record of what happened will be made including: how the situation arose and why the child bit. This information will help staff to prevent a repeat incident.

9. If biting or hitting is an on going concern with a particular child his/her parents should be informed and strategies developed that are consistent between home and the Centre.

10. Staff will try to figure out the cause of biting. Such as if the child is biting because of:

- tiredness
- frustration caused by too much structure or too many challenges
- over stimulation from too much noise, too much going on
- teething, causing a need to bite down on something
- the powerful and strong reaction it causes
- boredom
- excessive excitement, the child being out of control
- the child experimenting with various ways of getting what she wants, and not knowing this is a hurtful and inappropriate way.

11. Once staff have an idea of what might be causing the biting, efforts can be made to reduce or eliminate it. Possible strategies staff will use include:

- Ensuring that there is sufficient space so that children can spread out and have opportunities to be safely alone or with one other child.
- Making available a rich variety of appropriate materials and equipment for children to choose from.
- Ensuring that there are enough sensitive and skilled adults to help children get along with each other.
- Being close by when there is a child in the group who is biting.
- Making sure that there are “moments of peace and quiet” during the day.
- Offering choices and try to avoid forcing all children to do the same thing at the same time.
- Never modeling “pretend biting”, even in playfulness.
- Being consistent in showing strong disapproval of biting.
- Ensuring that you have teething toys for babies who are getting teeth.
- Remembering that the child who is biting needs our support and good will as much as the child who has been bitten.
- Working in a supportive collaborative way with parents to minimise biting.

SOURCE: *No Biting: Policy and Practice for Toddler Programs* by Gretchen Kinnell  
Staying Healthy in Child Care