

M.I.S.D. CHILD CARE CENTER – BITING POLICY

Explanations, policies and procedures regarding biting in the child care center.

Children biting other children is one of the most common and most difficult behaviors in group child care. It can occur without warning, is difficult to defend against, and provokes strong emotional responses in the biter, the victim, the parents, and the caregivers involved.

For many toddlers, the biting stage is just a passing problem. Toddlers try it out as a way to get what they want from another toddler. They are in the process of learning what is socially acceptable and what is not. They discover that biting is a sure-fire way to cause another child to drop what they are holding so the biter can pick it up. However, they experience the disapproval of the adults nearby and eventually learn other ways of gaining possession of objects or expressing difficult feelings.

For other children, biting is a persistent and chronic problem. They may bite for a variety of reasons: teething, frustration, boredom, inadequate language skills, stress or change in the environment, feeling threatened, or to feel a sense of power.

No matter what the cause, biting in a group situation causes strong feelings in all involved. It does help, however, to be aware of the potential problem before it happens, and to form a plan of action if it does occur.

MISD Child Care Center has developed the following plan of action to be used if and when biting occurs in any of our rooms.

Before biting occurs:

1. Discuss the issue of biting with parents at open house.
2. Distribute written policy to all families and include in the enrollment packet (under Discipline in our parent handbook)

When a child is bitten:

For the biter:

1. The biter is immediately removed with no emotion, using words such as “biting is not okay – it hurts.” Avoid any immediate response that reinforces the biting or calls attention to the biter. Attention is focused on the victim.
2. The biter is not allowed to return to the play area and is talked to on a level that the child can understand. “I can see that you want that truck, but I can’t let you hurt him. We don’t put our teeth on people.”
3. Redirect the child to other play.
4. Fill out report of biting and notify the director, who will notify both parents.

For the victim:

1. Separate the victim from the biter.
2. Comfort the child
3. Administer first aid
4. Fill out report of biting and notify the director, who will notify parents of both children.

If biting continues:

1. Staff will meet with director on a routine basis for advice, support and strategy planning.
2. Chart every occurrence, including *attempted* bites and indicate location, time, participants, behaviors, staff present and circumstances.
3. Let all parents know that there is a problem and the procedures that will be followed to deal with it.
4. Shadow children who indicate a tendency to bite:
 - a. As much as possible, Plan to Head off biting situations before they occur.
 - b. Teach non-biting responses to situations and reinforce appropriate behavior.
 - c. Adapt the program to better fit the individual child's needs.
5. Shadow children who have a tendency to be bitten:
 - a. Head off biting situations as much as possible.
 - b. Teach responses to potential biting situations:
"NO! or "Don't hurt me!"
6. Work together as partners with the parents of both children and frequent victims to keep all informed and develop a joint strategy for change.
7. Consider early transition of a child "stuck" in a biting behavior pattern for a change of environment, *if developmentally appropriate*.
8. It may be necessary to remove the biter from the classroom, or from the center if biting persists.

If it is deemed in the best interest of the child, center, and other children, terminate the child from Center enrollment for the duration of the biting stage. Written warning will be given to the parents before the action will be taken.