



# Farnsfield Pre-School Policies

Section 12 - Relational Policy



Policy adopted by Danielle Jankiwsky  
JUNE 2026

I have read and understood the policies in this document. I understand it is within my job role to adhere to these policies at all times, and failure to do so can result in disciplinary action being taken.

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## Supporting Behaviour Through Co-Regulation

At Farnsfield Pre-School we understand that behaviour is communication of our emotions. As keyworkers it is our job to figure out what their behaviour is telling us and how we can support the child through these emotions. As key workers the team know and understand each child's individual level of personal social and emotional development, their personal characteristics and specific circumstances, this means we can support behaviour, well being and emotional development on an individual scale for each child. Strong relationships are at the heart of everything we do and everything we believe in at Farnsfield Pre-School. Children cannot learn to self-regulate/ self soothe without strong, healthy relationships and co-regulation from significant adults. Children can then begin to form peer relationships with support from safe, trusted adults. Relationships between both the staff and families and between staff members are also crucial, as the children are looking to those trusted adults to model healthy relationships, including how to deal with conflict in a positive manner.

Settling into a new environment is an emotional transition for young children, especially as they learn to master complex skills, needed to communicate, negotiate and socialise with their peers. Skills such as turn taking and sharing often instigate minor conflicts between children as they struggle to deal with powerful emotions and feelings. Hitting, snatching, biting, pushing, hair pulling, kicking and screaming, however undesirable are quite normal responses for children to have when navigating conflict. Simple cause and effect. For example-

'Child A wants the car child B has, Child A hits Child B, Child B drops the car = Child A takes the car.'

'Child A wants to play with Child B, however child A has not yet developed the play cues to know how to interact. Child A pulls Child B's hair=Child A has the attention of Child B.'

'Child A is feeling over stimulated in the load noisy environment, they are unable to communicate this. Child B is in Child A's personal space. Child A bites Child B = child B instantly moves away.'

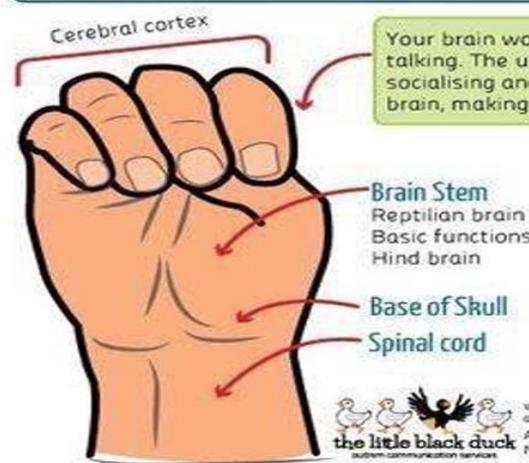
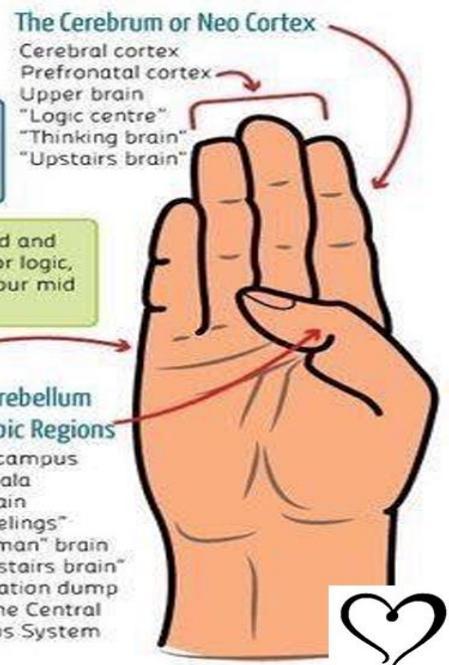
Our role as key trusted adults is to help teach the children to regulate these emotions and appropriate ways to react to them. Scientific studies show that when anyone of any age is in fight, flight or freeze mode the part of the brain required to make rational decisions quite literally goes offline (hence the term flipping the lid) The only way to re-connect the brain is when the person feels safe and secure. (The limbic system- which is the part of the brain that makes rational decisions is not fully developed until around 25) This is why the role of trusted adults is so significant in the early years, all positive interactions help to develop connections in the brain. **CONNECTION BEFORE CORRECTION** is a key mantra we follow at Farnsfield Pre-School. When children are struggling to express their emotions in a positive way we offer them some quality co-regulation time. Co- regulation is individual to each child, it may be having a cuddle and a chat with a grown up, it might be going for a run to burn some energy. Once the child is regulated the brain is then ready for us to teach- in developmentally appropriate ways we will chat about what happened and how we could deal with it better.

# Flipping your lid (Dan Siegal)

## The Hand Model of the Brain

### What happens when we “flip our lid”

When our brain is working efficiently both the upper and mid brain are communicating effectively. Information comes in and is processed logically. Sometimes too much information is coming in for the Upper brain to process and it disconnects. We “flip our lid” and can no longer access the functions provided by the upper brain.



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## Things we can do to co-regulate a child who has ‘flipped their lid’

**The lowest part of the brain needs to be regulated first:**

Way to do this is through rhythm: Patterned, repetitive rhythmic activities or somatosensory activities :

**Fight impulse:**

pushing, deep touch pressure activities

**Flight impulse :**

running, jumping, walking, running, dancing, singing, deep breathing, colouring trampolining, swinging, drumming, tug of war, bouncing on a fitness ball, walking along balance beam, balance board, measuring heart rate



# Things we can do to co-regulate a child who has 'flipped their lid'

## Grounding and calming strategies

Grounding helps keep someone in the present. It works by focusing outward on the external world. You can think of it as distraction, centering, a safe place or looking outward.

Strategies include:

- Counting breaths in and out
- Watching clouds
- Counting backwards from 20
- Counting how many steps he can walk with a beanbag on his head
- Placing a cool cloth to their face
- Playing 54321 game



I can see you and I'm going to stay near you to make sure you stay safe

Let child know they are safe and secure

# Things we can do to co-regulate a child who has 'flipped their lid'

## Establish and maintain attunement by:

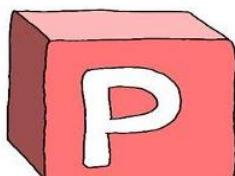
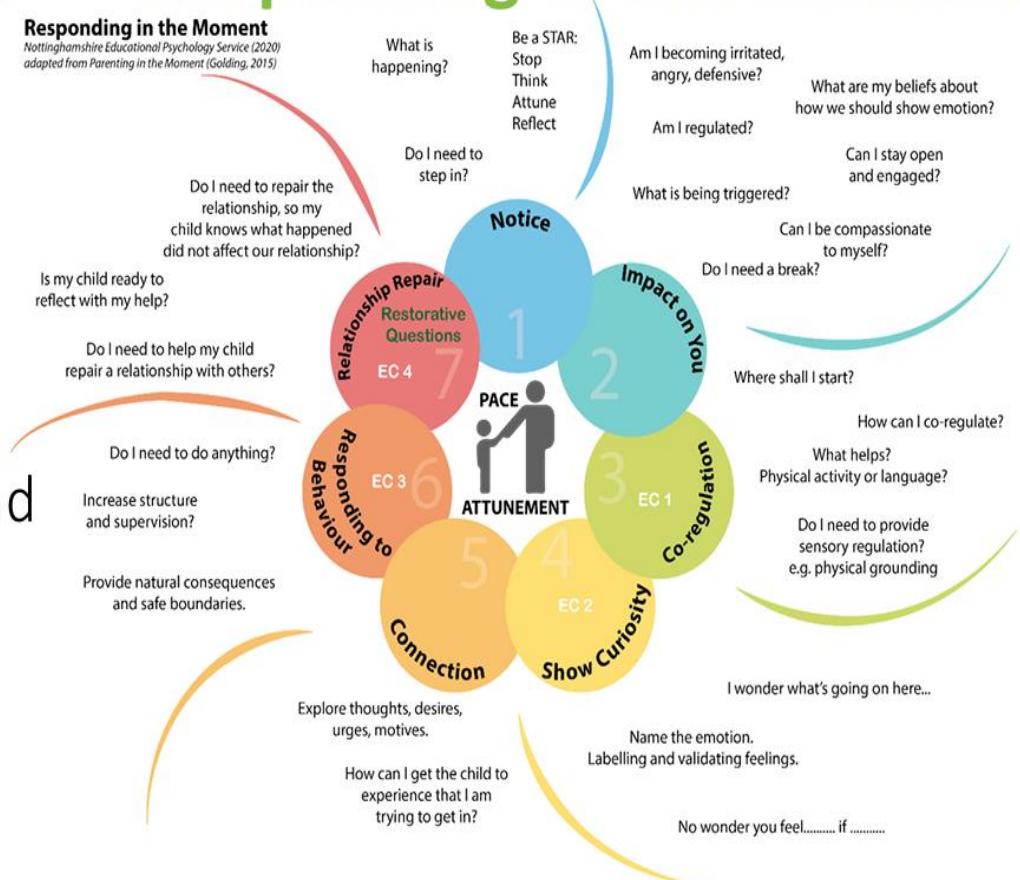
- Recognising the emotion
- Empathising
- Validating
- (letting them know the emotion is okay)
- Labelling



"I can see you're really angry because you've had to stop doing your favourite activity. I can see you have screwed up your face really tight, your face is red and you're breathing really fast. I'd be frustrated and annoyed too if I had to interrupt doing something I really enjoyed and was in the middle of doing".

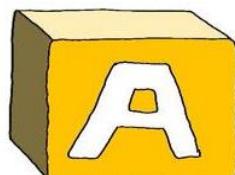
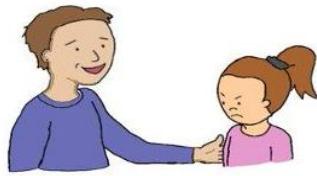
# Responding in the Moment

1. Check-In
2. Connect
3. Correct and Repair



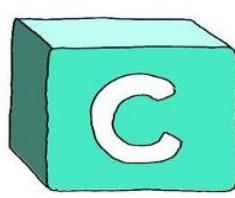
## Playfulness

- Playfulness in interactions can diffuse conflict and promote connection e.g. Maintaining a relaxed 'lightness' and can involve making a joke (though this has to be done carefully)



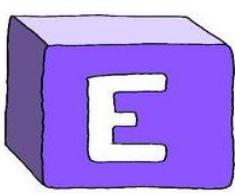
## Acceptance

- Accepting needs and emotions that drive behaviour (not necessarily the behaviour) without judgement



## Curiosity

- Being curious to where a behaviour has come from (in your head or out loud...)



## Empathy

- Really connecting with how they are feeling and showing compassion



P.A.C.E is an approach developed by Dr Dan Hughes aimed at supporting recovery from developmental trauma. However, it can be a useful attitude to adopt with anyone who is emotionally dysregulated

## Rewards and Sanctions

Rewards such as excessive praise and stickers may provide immediate results for the adult but do not teach a child how to act when a 'prize' is not being given or provide the skills to manage situations and emotions themselves. Instead, a child is taught to be 'compliant' and respond to meet adult expectations to obtain a reward (or for fear of a sanction). If used the type of rewards and their functions must be carefully considered.

Children are never labelled, criticised, humiliated, punished, shouted at or isolated by removing them from the group to be left in 'time out' or on a 'naughty chair.' If a child is distressed or causing harm to others it may help to encourage them away from the immediate environment where the incident occurred. They should be taken to a quite area by an adult for a few minutes to regulate. Physical punishment of any kind is NEVER used or threatened which could adversely effect a child's well- being. If a staff member became aware of another person giving corporal punishment of any kind would follow the whistle blowing policy, (see safeguarding procedures.)

Sometimes children may display behaviours that can be related to other ongoing developmental needs. Staff will liaise with the SENCO if they are concerned about a child's ongoing behaviours. The SENCO will in turn liaise with parents to ensure we are offering consistent support to the child. Any personalised support offered to a child is shared with all the team to ensure a consistent approach.

## Emotion Coaching

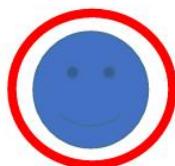


# What is Emotion Coaching?

- Emotion Coaching is a relational approach which develops internal regulation
- Emotion coaching promotes healthy brain development while dealing with behaviour in the moment. It provides a narrative for connecting feeling, thinking and behaving.

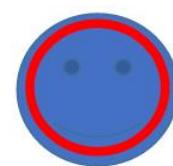
Rewards and sanctions provide:

External frameworks and regulation



Emotion Coaching provides:

Internal frameworks and regulation



# Why do emotion coaching?

Emotion Coaching is an Evidence-based Strategy based upon the work of John Gottman

### Children are better able to:

- Control their impulses
- Delay gratification
- Self soothe when upset
- Pay attention



### Emotion Coached Children:

- ✓ Achieve more academically in school
- ✓ Are more popular
- ✓ Have fewer behavioural problems
- ✓ Have fewer infectious illnesses
- ✓ Are more emotionally stable
- ✓ Are more resilient

Gottman et al.(1996, 1997)

# Emotion Coaching teaches children to regulate their emotions.

## 1. Recognise the child's feelings and empathise with them

- Recognising, empathising, soothing to calm
- e.g. 'I can see you are upset; I'm here'.

## 2. Labelling feelings and validating them

- e.g. 'Sounds like you might be feeling angry about that'. 'I might be feeling angry if that had happened to me.'

## 3. Setting expectations of behaviour

- If needed
- e.g. 'We can't always get what we want'.

## 4. Problem-Solving

- With the young person.
- e.g. 'We can sort this out'.

# Emotion Coaching teaches children to regulate their emotions.

## 1. Recognise the child's feelings and empathise with them

- Recognising, empathising, soothing to calm
- Notice and empathise- accepting the behaviour will help to de-escalate the behaviour
- e.g. 'I can see you are upset; I'm here'.
- Be aware of the different emotions a child may feel
- Observe, listen and learn how the child expresses different emotions
- Look for facial expressions, body language, posture, gestures, tone of voice and speech of speech
- BE CURIOUS RATHER THAN FURIOUS
- Look beneath the behaviour (ice-berg analogy)

### BE A 'STAR' FOR YOUR CHILD

**S**TOP - Don't react straight away. Notice how you are feeling.



**T**HINK - What feeling might lie beneath the child's behaviour?

**A**TTUNE yourself with the feeling by putting yourself in the child's shoes.

**R**EFLCT - What would be an equivalent situation for you, as an adult, to feel that way?

# Curiosity: Step 2 Label and Validate Emotions

- Use words to reflect back child's emotion and help child to label emotion

*'I can see that you get angry when that happens. I would feel angry if my work had been lost. It's OK to feel like that'*

- Simply observe – saying what you see rather than asking probing questions to which young people might not know answer

*'I've noticed you're looking around at the others who are working on their projects. I wonder if you might be feeling nervous right now about whether your work will be ok.'*

- Telling the emotional person that you understand their emotional situation and that you don't blame them helps soothe their emotional brain

## Step 3: Setting expectations (...if needed)

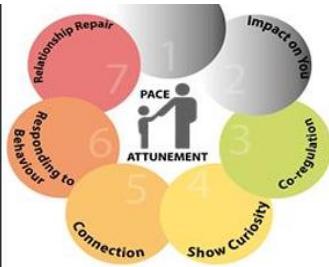


- State the boundary limits of acceptable behaviour (positive limit setting)
- Make it clear certain behaviours cannot be accepted.
- ALWAYS retain child's self-dignity



*'You're angry that I've taken away your phone... but these are the rules everyone has to follow ... I will keep it safe for you'*  
(Rose, 2014)





## Step 4: Problem Solving with the Child

When the child is calm and in a relaxed, rational state:

- Explore the feelings that give rise to the behaviour/problem/incident
- Scaffold alternative ideas and actions that could lead to more appropriate and productive outcomes
- Empower the pupil to believe s/he can overcome difficulties and manage feelings/behaviour.



*"Can you think of a different way to deal with your feelings"*

*"Let's see if we can think together about new ways to do this"*

*"I can help you to think of a different way to cope"*

*"Can you remember what we said before?"*

Nottinghamshire

Professional Services



## Repairing relationships



Do I need to repair the relationship, so that my child knows what happened did not affect our relationship?

Do I need to help my child repair a relationship with others?



# Restorative Scripts

## Restorative Questions

What happened?

What were you thinking about at the time?

What have your thoughts been since?

Who has been affected by what you did?

In what way have they been affected?

What do you think needs to happen next?



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County Council**

## Restorative Questions (Early Years)

What's happened?

How is everyone feeling?

What do we need to do to make it better?



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## Use of physical intervention

Staff will already use different elements of physical contact with a child as part of their interaction in the setting especially when they are comforting a child or giving first aid. However, physical intervention to keep a child or other children safe is different and should only be applied in exceptional circumstances.

The EYFS states that physical intervention from a staff member towards a child may be used for the purposes of “averting immediate danger of personal injury to any person (including the child) or to manage a child’s behaviour if it is absolutely necessary.”

Staff must do all they can to avoid using a physical intervention because this is not the preferred way of addressing children’s behaviour.

To offer protection to children a range of appropriate graded interventions may be needed before physical intervention is applied. Most single incidents such as a child throwing a book on the floor or kicking a chair usually only require a verbal intervention from a member of staff. In other situations, an intervention can be applied through mechanical and environmental means such as locking doors and stair gates. This usually stops a situation escalating. However, there will be some situations where a child places themselves or others in danger which requires an immediate need for the use of both verbal and physical intervention. If a single or persistent incident requires a physical intervention such as physical handling from a staff member towards a child, then this is used intentionally to restrict a child’s movement against their will.

In most cases this can be applied using the adult's body gently and safely blocking the child from access to danger or to prevent danger.

To physically intervene, an educator may use "reasonable force" to protect a child from injuring themselves or others. Legally an educator may also use reasonable force to prevent a child from damaging property. However, we would expect that in instances of damaging physical property a child would only experience a physical intervention if the broken property presented a risk or is high value.

If a situation arises which requires urgent physical hands-on intervention this is best applied by the staff who knows the child well such as their key person who is more able to calm them or use other known methods for defusing situations without physical intervention.

### **Physical handling**

We use the principle of applying reasonable minimal force and handling in proportion to the situation. Staff use as little force as necessary to maintain safety. This intervention should only be used for as short a period as possible to keep the child safe and maintain well-being by aiming for:

- keeping the child's safety and well-being paramount
- a calm, gentle but firm approach and application of the intervention
- never restricting the child's ability to breathe
- side-by-side contact with the child
- no gap between theirs or the child's body
- keeping the adults back as straight as possible
- avoiding close head-to-head positioning to avoid injury to the child and themselves (head butting)
- only holding the child by their 'long' bones to avoid grasping at the child's joints where pain and damage are most likely to occur
- avoiding lifting the child unless necessary
- reassuring the child and talking about what has happened
- only applying a physical intervention on a disabled child if training or preferred method is provided from a reputable external source e.g. British Institute of Learning Disabilities [www.bild.org.uk/](http://www.bild.org.uk/)

### **Risks**

There are risks associated with any physical intervention and handling of a child. The younger and more vulnerable a child may be, the greater risk to the child of using physical intervention towards them. However, there are also risks to children associated with not intervening physically; for instance, if an educator did not take hold of a child by the wrist, they may have run into the path of a fast-moving car.

Before intervening physically to protect a child from immediate harm an educator needs to decision make in a split second, considering the following factors. This is described as dynamic risk assessment.

- What is the immediate risk to this child if I do not intervene now?
- What might the risks be if I do intervene? If this were my child, what would I want someone looking after them to do in this situation?
- What is the minimum level of intervention that will be effective here? How can I do this as gently as possible for as short a time as possible and how am I going to manage myself to stay calm?

## **Recording**

Any instance of physical intervention is fully recorded immediately and reported to the designated person as soon as possible on Safeguarding incident reporting form, ensuring that it is clearly stated when and how parents were informed. Parents/carers are asked to sign a copy of the form which is then kept on the child's file. The designated person decides who will notify the parent/carer and when, ensuring that the parent/carer signs to say they have been notified. An individual risk assessment should be completed after any physical intervention with a child which considers the risks and likelihood of such behaviour re-occurring and how this will be managed. The risk assessment should be agreed and signed by parents.

## **Expulsion**

In some exceptional circumstances a child may be expelled due to:

- a termination of their childcare and early education agreement as explained in 9.1d Childcare and early education terms and conditions
- if despite applying a range of interventions (including reasonable adjustments), the setting has been unable to adequately meet the child's needs or cannot protect the health, safety and well-being of the child and/or others.

## **Challenging unwanted behaviour from adults in the setting**

We do not tolerate behaviour demonstrating dislike, prejudice, discriminatory attitudes, or action towards any individual/group. This includes those living outside the UK (xenophobia). This also applies to behaviour towards specific groups of people and individuals who are British Citizens residing in the UK.

Allegations of discriminatory remarks or behaviour made in the setting by any adult will be taken seriously. The perpetrator will be asked to stop the behaviour and failure to do so may result in the adult being asked to leave the premises. Where a parent/carer makes discriminatory or prejudice remarks to staff at any time, or other persons while on the premises, this is recorded on the child's file and is reported to the setting manager. The procedure is explained, and the parent/carer is asked to comply while on the premises. An 'escalatory' approach will be taken with those who continue to exhibit this behaviour. The second stage comprises a letter to the parent/carer requesting them to sign a written agreement not to make discriminatory remarks or behave in discriminatory or prejudice ways; the third stage may be considering withdrawing the child's place.