

R indicates legislation requirement, and should not be deleted					
Developing and implementing the <i>Behaviour Support Policy</i> in consultation with stakeholders, and ensuring that it reflects the philosophy, beliefs and values of the service	√	√	√		
Ensuring that all staff are aware of the service's expectations for positive, respectful, and appropriate behaviour, including acceptable responses and fostering warm, trusting, and reciprocal interactions when working with children and families (<i>refer to Code of Conduct and Interactions with Children Policy</i>)	√	√	√	√	√
Ensuring children are adequately supervised (<i>refer to Definitions</i>) and that educator-to-child ratios are maintained at all times (<i>refer to Supervision of Children Policy</i>)	R	R	√		√
Ensuring the environment at the service is safe, secure, free from any hazards (<i>National Law: Section 167</i>) (<i>refer to Child Safe Environment Policy, Occupational Health and Safety Policy and Supervision of Children Policy</i>) and promotes active participation of every child	R	√	√		√
Developing and implementing educational programs that are delivered in accordance with an approved learning framework (<i>refer to Definitions</i>), are based on the developmental needs, interests and experiences of each child, and take into account the individual differences and strengths of each child (<i>refer to Educational Program and Inclusion and Equity Policy</i>)	R	R	√		√
Implementing planned and spontaneous discussions about emotions, feelings and issues of inclusion and exclusion, fair and unfair behaviour, bias and prejudice		√	√		√
Maintaining the dignity and rights of each child at all times	√	√	√	√	√
Ensuring that no child is subjected to any form of corporal punishment or discipline that is unreasonable in the circumstances (<i>National Law: Section 166</i>)	R	R	R		R
Ensuring that frightening methods of control (<i>refer to Definitions</i>) and discipline are not used (e.g. timeout)	R	R	R		R
Ensuring the behaviour guidance is not be associated with food (never is a child or infant to be 'force fed', or refused food as a form of discipline), rest, toilet training or isolation	R	R	R		R
Applying a trauma informed lens when supporting children to self-regulate and manage behaviours		√	√		√
Providing each child with positive guidance and encouragement toward acceptable behaviour and encourage children to express themselves and their opinions		√	√		√
Modelling respectful behaviour and providing supportive language to enable children to vocalise their concerns		√	√	√	√
Talking with children about the consequences of their actions		√	√		√
Planning and implementing strategies to support individual children's behaviour		√	√		√
Discussing with and supporting children to identify their feelings, and providing a safe place for them to explore and build strategies to calm the body and mind		√	√		√

Listening empathetically to children when they express their emotions, acknowledging their feelings and reassuring children that it is normal to experience positive and negative emotions at times		√	√		√
Supporting children to negotiate their rights in relation to the rights of others and intervening sensitively when children have trouble resolving a disagreement. learn about and support individual children's relationships with other children		√	√		√
Assisting children to understand that others may not always want to engage in play with them		√	√		√
Pre-empting potential conflicts or challenging behaviours by monitoring children's play and supporting interactions		√	√		√
Using knowledge of individual children's personalities and friendship preferences to support children to manage their emotions and behaviour, and develop an understanding of the feelings and needs of others		√	√		√
Supporting children to negotiate and share ownership of responsible and respectful behaviours, and work with families and other professionals to appropriately support each child's emotional and social learning		√	√		√
Working with each child's family and, where applicable, other support services, to ensure an inclusive and consistent approach is used to support all children to regulate their behaviour and communicate effectively		√	√	√	√
Managing situations in which families have different views and expectations compared to those of the service about guiding children's behaviour		√	√	√	√
Managing situations in which a child may benefit from more support in managing their behaviour, including development in conjunction with families, and emotional support plan (<i>refer to Attachment 1</i>)		√	√		√
Collaborating with other professionals or support agencies that work with children who have diagnosed behavioural or social difficulties		√	√	√	√
Documenting communication with families that shows their views, ideas and preferences have been considered when planning appropriate strategies to support their child's positive inclusion in the program		√	√	√	√
Ensuring that there is a emotional support plan (<i>refer to Definitions and Attachment 1</i>) developed for a child if educators are concerned that the child's behaviour may put the child, other children, educators/staff and/or others at risk		√	√		√
Developing individual emotional support plans (<i>refer to Definitions and Attachment 1</i>) for children, including evidence of consultation with their families and if appropriate, input and suggestions from other professionals and support agencies		√	√	√	√

Developing links with and referral pathways to services and to support children experiencing social, emotional and behavioural difficulties and their families	√	√	√		√
Ensuring that parents/guardians and program support groups (<i>refer to Definitions</i>) (as appropriate) are consulted if an individual emotional support plan (<i>refer to Definitions</i>) has not resolved the challenging behaviour	√	√	√	√	
Setting clear timelines for review and evaluation of the emotional support plan	√	√	√		
Providing information, ideas and practical strategies to families, educators and staff on a regular basis to promote and support health and wellbeing in the service and at home	√	√	√		
Consulting with, and seeking advice from, DE if a suitable and mutually agreeable emotional support plan (<i>refer to Definitions</i>) cannot be developed	R	√	√		
Investigating the availability of extra assistance, such as Kindergarten Inclusion Support (<i>refer to Definitions</i>) or training, by contacting the regional Preschool Field Officer (<i>refer to Definitions</i>), specialist children's services officers from DE or other agencies working with the child	R	√	√		
Funded Kindergarten specific					
Investigating the availability of extra assistance, financial support such as Inclusion Support Program (<i>refer to Definitions</i>), School Readiness Funding (<i>refer to Definitions</i>), or training, by contacting their regional Inclusion Agency (<i>refer to Sources</i>)	R	√	√		
Long day care specific					
Ensuring that additional resources are sourced, if required, to implement an emotional support plan (<i>refer to Definitions</i>)	R	√			
Ensuring that educators/staff at the service are provided with appropriate training to guide the actions and their responses to a child/children with challenging behaviour	√	√			
Informing educators/staff of concerns, events or incidents that may impact on their child's behaviour at the service (e.g. moving house, relationship issues, a new sibling)				√	
Building and maintaining a workplace environment and culture that is committed to being free from behaviour aggression (<i>refer to Definitions</i>)	R	√	√		√
Providing and promoting a safe work environment where staff members are not exposed to hazards and can work without risk of injury or harm including behaviour aggression (<i>refer to Definition</i>)	R	R			
Identifying, assessing, and controlling environmental risks in each workplace to reduce the potential for harm to staff members, including behaviour aggression (<i>refer to Definition</i>) (<i>refer to Occupational Violence and Aggression Policy</i>)	R	R			

Commitment to staff safety, including removal of and/or minimisation of risk to any form of harm, including behaviour aggression (<i>refer to Definition</i>) against staff members	R	√			
Providing training programs specific to the needs of staff, relative to the degree of risk faced within the working environment	R	√			
Supporting staff members to actively report all incidents and hazards related to behaviour aggression (<i>refer to Definition</i>)	R	√			
Ensuring all incidents and near misses of behaviour aggression are reported via workplace incidents. External reporting to WorkSafe may also be required, in the case of notifiable incidents (<i>refer to Definitions</i>)	R	√	√		√
Taking appropriate action after any incidents of behaviour aggression, in terms of support, counselling and follow-up	R	√			
Maintaining confidentiality (<i>refer to Privacy and Confidentiality Policy</i>)	R	√	√	√	√

BACKGROUND AND LEGISLATION



BACKGROUND

From infancy, children embark on a journey to comprehend the workings of the social world, involving the intricate process of exploring and managing emotions, behaviour, rights, and responsibilities. Educators, through positive and respectful daily interactions, contribute significantly to supporting children in regulating their behaviour. These interactions serve as a foundation for instilling a sense of interdependence and nurturing considerate citizenship in children. As a result, children acquire the confidence and skills needed to autonomously manage their behaviour, make decisions, and foster positive and effective relationships with others.

Challenging behaviours in children may stem from age-appropriate actions, attempting to meet needs, or expressing unmet desires. Environmental factors play a role, and supportive conditions contribute to children's well-being. Positive adult role models help children learn socially acceptable behaviour, and support is crucial for children to express needs appropriately. A positive learning environment minimises challenging behaviours.

To guide children in learning self-regulation, it is imperative for educators to recognise that these skills evolve gradually and exist on a continuum. The application of these developing skills in children can vary based on factors such as mood, health, family circumstances, and challenging situations they encounter.

The approved provider has a duty under the *Occupational Health and Safety Act 2004* to eliminate risks to health and safety of workers and other persons so far as is reasonably practicable. If it is not reasonably practicable to eliminate risks, they must be minimised so far as is reasonably practicable. This means approved providers must do all that they reasonably can to manage the risk of behaviour aggression (*refer to Definitions*) occurring at the workplace.

Behaviour aggression (*refer to Definitions*) can have significant short- and long- term impacts on a person's physical and psychological (mental) health. It's not just violent incidents like physical assault which can cause harm - being exposed to lower level but frequent forms of aggression, like yelling, name calling and challenging behaviours, can also have a lasting effect on a person's health.

LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

- Education and Care Services National Law Act 2010
- Education and Care Services National Regulations 2011
- Equal Opportunity Act 2010 (Vic)
- National Quality Standard, Quality Area 5: Relationships with Children
- Occupational Health and Safety Act 2004
- Occupational Health and Safety Regulations 2017

The most current amendments to listed legislation can be found at:

Victorian Legislation – Victorian Law Today: www.legislation.vic.gov.au

Commonwealth Legislation – Federal Register of Legislation: www.legislation.gov.au

DEFINITIONS



The terms defined in this section relate specifically to this policy. For regularly used terms e.g. Approved provider, Nominated supervisor, Notifiable complaints, Serious incidents, Duty of care, etc. refer to the Definitions file of the PolicyWorks catalogue.

Behaviour Aggression: involves incidents in which a staff member is physical or verbally abused or assaulted by a child in their care. This definition covers a broad range of actions and behaviours that can create a risk to the health and safety of employees and other persons in the workplace.

Examples of behaviour aggression can include, but not limited to:

- biting, spitting, scratching, hitting, kicking, choking
- pushing, shoving, tripping, grabbing, slapping
- screaming, punching, swearing
- throwing objects.

Behaviour guidance: a means of assisting children in positive and effective ways to help children gain understanding and learn skills that will help them learn to manage their own behaviour.

Emotional Support plan: A plan that documents strategies to assist an educator in guiding a child with diagnosed behavioural difficulties or challenging behaviours to self-manage their behaviour. The plan is developed in consultation with the nominated supervisor, early childhood teachers, educators, parents/guardians and families, and other professional support agencies as applicable.

Challenging behaviour: behaviour that can be described as:

- infringing on the rights of others
- disrupting others or causing disputes between children
- causing harm or risk to the child, other children, adults or living things
- is destructive to the environment and/or equipment
- inhibits the child's learning and relationship with others
- a child presenting as shy, withdrawn or excessively passive in a way which is inhibiting their learning and/or development
- is inappropriate relative to the child's developmental age and background.

Frightening methods of control: Disciplinary or authoritative techniques that instil fear, intimidation, or distress in individuals as a means of regulating their behaviour or actions. These methods often rely on threats, aggression, coercion, or the imposition of negative consequences that evoke fear or anxiety in the individual being controlled. Examples may include yelling, physical punishment, verbal abuse, humiliation, or any other form of coercion that induces fear or distress in order to manipulate behaviour. Such methods are generally considered harmful and ineffective in fostering healthy relationships and promoting positive behaviour development.

Inclusion Support Program (ISP): assists children with additional needs to participate in early childhood education and care (ECEC). It does this through tailored support and funding to ECEC services.

ISP supports services to:

- address barriers to inclusion
- build capacity and capability to include children with additional needs
- implement quality, inclusive and equitable practices.

The program aims to:

- provide children with additional needs the opportunity to learn and develop next to their typically developing peers
- ensure all children have genuine opportunities to access, participate and achieve positive learning outcomes. For more information visit: <https://www.education.gov.au>

Kindergarten Inclusion Support Program (KIS): Supports funded kindergartens to plan and implement a program that is responsive to the individual abilities, interests and needs of children with a disability, developmental delay or complex medical needs. Long Day Care services can apply for the KIS program for their Victorian Government-funded kindergarten programs. If a KIS funded additional assistant is allocated to the kindergarten as the result of a KIS application, they will work as a member of the team delivering a kindergarten program that is inclusive of all children in the group. The KIS funded additional assistant should not work exclusively with the child identified in the KIS package application and is above ratio requirements. Not used to meet ratio requirements.

Program Support Groups (PSG): A program support group brings together key people to support the inclusion of children with disability or developmental delay, or complex medical needs, from the time of enrolment at kindergarten until they move to school. The group may include:

- the early childhood teacher
- the child's parent/guardian(s)
- early childhood intervention professionals
- a preschool field officer
- medical practitioners, therapists or other allied health professionals
- a support person – if the child's parent/guardian(s) chooses to use one.

Preschool Field Officer (PSFO) Program: supports the access and participation of children with additional needs in their kindergarten program. For more information visit: www.education.vic.gov.au

School Readiness Funding (SRF): Integrated within the Victorian kindergarten funding structure, SRF allocates resources to various programs and assistance measures aimed at bolstering the capabilities of services, educators, and families in fostering children's learning and development. Designed to provide supplementary support for kindergarten services, SRF endeavours to enrich kindergarten programs and offer tailored assistance to children, particularly those facing educational disadvantage, ensuring they start school developmentally on track. Educational disadvantage describes the challenges faced by children due to economic, cultural or social circumstances that limits their access to, or engagement with, education. Within the framework of SRF, kindergarten services are empowered to utilise allocated funds across three principal outcome domains: Communication (fostering language development), Wellbeing (enhancing social and emotional aspects), and Access and Inclusion.

SOURCES AND RELATED POLICIES

SOURCES

- Australian Children's Education and Care Quality Authority - Planning and Strategies to Promote Positive Behaviour (Babies - 5 years): www.acecqa.gov.au
- Australian Children's Education and Care Quality Authority: Supporting children to regulate their own behaviour: www.acecqa.gov.au



- Belonging, Being & Becoming – The Early Years Learning Framework for Australia: www.acecqa.gov.au
- Child Safe Standards: www.cryp.vic.gov.au
- Department of Education - Supporting children’s behaviour in early childhood services: www.vic.gov.au
- Early Childhood Australia Code of Ethics: www.earlychildhoodaustralia.org.au
- Emerging Minds - Supporting children in families with complex needs: Nine tips for practitioners who feel out of their depth: www.emergingminds.com.au
- Guide to the National Quality Framework, ACECQA: www.acecqa.gov.au
- Inclusion Support Program: www.dese.gov.au
- The Kindergarten Funding Guide: www.education.vic.gov.au
- United Nations Convention on the Rights of the Child: www.unicef.org
- Victorian Early Years Learning and Development Framework: www.acecqa.gov.au
- Victorian Inclusion Agency (VIA): www.viac.com.au

RELATED POLICIES

- Child Safe Environment and Wellbeing
- Code of Conduct
- Compliments and Complaints
- Educational Program
- Inclusion and Equity
- Interactions with Children
- Occupational Health and Safety
- Occupational Violence and Aggression
- Privacy and Confidentiality
- Staff Grievances and Dispute Resolutions
- Supervision of Children

EVALUATION



In order to assess whether the values and purposes of the policy have been achieved, the approved provider will:

- regularly seek feedback from everyone affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service’s policy review cycle, or as required
- notifying all stakeholders affected by this policy at least 14 days before making any significant changes to this policy or its procedures, unless a lesser period is necessary due to risk (*Regulation 172 (2)*).

ATTACHMENTS



- Attachment 1: Emotional Support Plan Template
- Attachment 2: Polyvagal Theory Infographic Resource

Authorisation



This policy was adopted by the approved provider ECKA on 7/10/2024

REVIEW DATE: 30/3/2026

ATTACHMENT 1. BEHAVIOUR SUPPORT PLAN TEMPLATE

Date:

Name of Child:

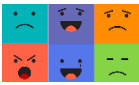


D.O.B:

Meeting Attendees:

What are the child's strengths and interests?

How does the child's parents/caregivers report the child's behaviour at home?

What triggers if any have been identified?

<p>What can I see, hear and sense? Describe the Behaviour/s being observed</p>	<p>What lies beneath the child's behaviour?</p> <p>Feelings </p> <p>Trauma </p> <p>Body Response </p>	<p>What can we do to meet the child's needs?</p> <p><i>List strategies</i></p>
1.		
2.		
3.		
4.		
5.		

Has a copy of "The Interactions with Children policy" been provided to parent / caregiver

YES Date:

NO

Emotional support Plan Review Date: //20.....

Procedure for parents to provide current information and status of the child's needs.
(What is the procedure for parents to keep us informed of the most current status of the child's wellbeing and needs and how often do we want parents to provide updates?)

Procedure for staff to provide information and status of the child's specific needs to parents
(What is the procedure for staff to keep parents informed of any issue or incident at kinder relating to the child's wellbeing and needs – what, how and when will such information be communicated?)

Teacher's Name:

Signature: Date:/...../20.....

Parent/Guardian Name:

Signature: Date:/...../20.....

Parent/Guardian Name:

Signature: Date:/...../20.....

Nominated Supervisors Name:

Signature: Date:/...../20.....

ATTACHMENT 2: POLYVAGAL THEORY INFOGRAPHIC RESOURCE (PAGE 1 OF 2)



Polyvagal Theory

An infographic resource for professionals to explain the PolyVagal Theory hierarchy



Purpose:

This resource has been developed for professionals to provide a summary of the Polyvagal Theory hierarchy of states and how that might present in children and young people with whom they work. This infographic can be used as a summary for reflection or provided to care team members and those who are also supporting the child or young person. It seeks to summarise the experience of states of social engagement, mobilization and immobilization. This may also link to discussions professionals might have regarding the Window of Tolerance. It outlines how children might present in each state, what might be happening for them and provides a starting point for responding in ways that meet their needs.



Audience:

This resource can be used with all of those working with the child or young person – either to present this information or as a reminder. Equally, it could also be used as a discussion point with the child or young person to help them to understand these different states, and to perhaps add the unique experiences and responses of that child or young person.



What you could do:

- Print and display this infographic in your office as a reminder of Polyvagal Theory and its application in practice
- Provide this infographic to those within a child's care team or broader relational network to support their understanding of the child's presentation and some beginning points for responding
- Expand the 'I need you to...'' section for each state with your own ideas of ways of responding that best meet the child's needs
- Discuss the content of this infographic with the child or young person and add in additional ideas based on their own unique story.

ATTACHMENT 2: POLYVAGAL THEORY INFOGRAPHIC RESOURCE (PAGE 2 OF 2)



Polyvagal Theory



Grounded in the work of Dr Dan Siegel, Dr Stephen Porges and Dr Bruce Perry

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