Response to Child Biting

Policy
Biting is normal for toddlers and young children but is not allowed at Head Start.

Procedure
• Staff calmly intervene immediately when a child bites someone else:
  o Use a clear, firm, and calm voice to tell the child biting is not acceptable in a short and simple way.
  o The child is removed from the person bitten.
  o Attention is shifted to the person bitten, showing concern and sympathy.
  o Staff show and explain the effect of the bite on the other person.
  o Appropriate first aid is administered.
  o The child who bit is encouraged to help the other person by getting an ice pack.
  o Staff teach the child other ways to express feelings.
  o Everyone moves on with the day.
• An Accident and Incident Report (AIR) is completed for each child involved and sent to the Head Start Health Professional.
• Parents of the child who bit and was bitten are given an AIR. Confidentiality is maintained at all times, with no identifying information about the other child given.
• If a bite breaks the skin, staff contact the Head Start Health Professional immediately.
  o If a child is bitten, the parent is offered an exam by a health provider. The exam is paid for by Arrowhead Head Start. Signs of infection are also shared.
  o If a staff or volunteer is bitten, they must contact their Program Manager and complete and submit the “AEOA Accident Report” to the Program Manager within 24 hours of the incident.
• If a child repeatedly bites others, staff observe the child to try to identify certain patterns or triggers causing the behavior and strategies to avoid them.
• When needed, staff meet with the parents to develop a plan to address the behavior. The Head Start Disabilities and Mental Health Manager and/or Health Professional may be involved in these meetings.
• Families are referred to their health provider if the biting does not decrease over time.

This policy complies with Head Start Performance Standard 45CFR Section 1304.22
Approved by Policy Council on February 16, 1999.
Updated on 3-22-2005.
Revision approved by Policy Council on 8-10-2016.