



## Unsettled Child and Settling-In Policy

### 1. Introduction and Aim

At little stars childminding, we understand that starting a new early year's setting or transitioning between other settings can be an emotionally challenging time for both children and parents. We aim to ensure this transition is as smooth, reassuring, and positive as possible. This policy outlines our structured approach to settling new children and managing periods of distress.

### 2. The Key Person Approach

When a child starts their settling in sessions, they will be able to go to who they feel safe with and then this will then determine who the key person will be for the child.

**This practitioner will then:**

- \* Help and lead the child's induction.
- \* Create a secure attachment with the child.
- \* Act as the primary point of contact for the parents to share information about the child's routines, preferences, and comfort triggers.

### 3. Standard Settling-In Procedure

We offer a flexible, phased settling-in process tailored to each individual child.

A typical schedule consists of:

Session 1 (Show around) - Parent/carer remains in the room with the child to explore the environment together.

Session 2 (1 hour) - Parent/carer leaves the room/building for a short period. Staff monitor how the child accepts comfort from their Key Person.

Session 3 (2 hours) - Child stays for an extended period, incorporating a core routine such as a snack time, circle time, or garden play.

#### 3A. Tailored Inductions for Under 3s

Home-to-Setting Routine: Before the first session, the Key Person will map out the child's exact nap schedules, milk preferences, and specific soothing techniques used at home - Normally via an All about me form.

#### Object Permanence & Comforters :

Parents must provide unwashed items from home (like a blanket or a parent's t-shirt) so the child has a familiar scent. Transitional objects and pacifiers will always be accessible to the child, not just during sleep.

The settling-in period will be extended if the Key Person and parents agree the child requires more time to build confidence.

#### 4. Procedures for Managing an Unsettled Child

If a child becomes distressed during a session, staff will implement the following emotional regulation strategies:

**Immediate Comfort:** The Key Person (or a secondary familiar adult) will offer physical comfort (if accepted), reassuring words, and proximity.

**Home Connections:** Use of the child's personal comforter (pacifier, blanket, soft toy) and references to family pictures or familiar home routines.

**Distraction and Engagement:** Guiding the child toward high-interest sensory play, outdoor spaces, or quiet reading corners.

#### 4A. Co-Regulation and Distress Response for Under 3s

If an infant or toddler becomes inconsolable, staff will prioritize physical and emotional co-regulation:

**Physical Proximity:** Offering close physical contact, skin-to-skin reassurance (where appropriate for infants), or holding the child while walking.

**Environmental Management:** Moving an overwhelmed child away from high-noise areas to a quiet, dimly lit sensory space or cozy corner.

**Hydration and Comfort Checks:** Constantly checking for physical triggers of distress, such as teething pain, gas, a wet diaper, or overtiredness.

**Safeguarding Against Sickness:** If a baby cries to the point of gagging or vomiting, the parent must be contacted immediately, overriding any standard time thresholds.

**Staff Rotation:** If a practitioner becomes overwhelmed by prolonged crying, they must signal another staff member to temporarily rotate staff to ensure calm, patient care is maintained.

#### 5. Explicit 20-Minute Threshold for Contacting Parents

While brief periods of crying are expected during transitions, we strictly adhere to a **20-minute maximum distress threshold** to prevent emotional trauma and toxic stress in infants and toddlers.

##### The 20-Minute Rule:

If a baby or toddler exhibits continuous, intense distress (inconsolable crying, screaming, or physical panic) and cannot be calmed or distracted by their Key Person they will contact the parents exactly **20 minutes** after the intense distress began.

### Immediate Escalation:

This 20-minute window is immediately bypassed, and parents are called instantly, if the child vomits, gags, chokes, or shows signs of extreme physical exhaustion from crying.

### Parental Action Plan:

Upon receiving the call, parents are expected to either return to the room to co-regulate with their child or collect them early. Early collection is documented as a positive, protective measure for the child's long-term attachment security.

### 6. Documentation and Review

All instances where a child requires an early collection due to distress will be noted in their daily communication log. The Key Person and Manager will review these logs weekly to adjust the child's transition plan.

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Signed: A.Mcpherson