



St Paul's Y.E.P. Behavioural Management Policy

& Therapeutic Crisis Intervention - Operational Policy

1 Introduction

St Paul's aims to ensure that all children who use its services and its staff are protected and kept safe from harm. The school recognises significant changes in the needs of young people in the school context. The characteristics of young people indicate a high level of aggression on occasions. The demands now placed on staff require a different emphasis and specialised level of knowledge, skill and competence in the prevention and management of aggressive behaviour.

In acknowledging these changes St Paul's has decided to fully implement Cornell University's Therapeutic Crisis Intervention (TCIS) programme as a means of ensuring that staff are sufficiently equipped to carry out aspects of their job that concerns crisis prevention and management.

TCIS was developed by and continues to be validated by the Residential Child Care Project in Cornell University New York. It has been adopted as a main stream programme in several countries including, USA, Canada, Russia, Israel, United Kingdom, Ireland and Australia.

TCIS is a child centred crisis prevention and intervention system that has been reported as both safe and effective for working with young people when they are potentially at their most destructive.

This policy document details all aspects of St Paul's TCIS policy.

2 Philosophy

2.1

Children and young people's physical, emotional, spiritual, educational and social well-being is paramount. All interactions and interventions between staff and children / young people or actions carried out on their behalf will be guided by this principle.

2.2

The spirit, intent and philosophy of TCIS is that crisis can be used as an opportunity for learning and development. TCIS is based on the premise that staff are important influences in the lives of children and young people and how they relate to the children and young people in crisis will affect the outcomes.

2.3

An important defining characteristic of staff working with troubled children and young people is to care about them even when they appear not to want help and support and when they are at their most destructive.



3 Aim

It is the aim of Cornell University's Therapeutic Crisis Intervention Programme to provide workers with the skills and knowledge so that they can become the catalyst through which the young person changes old habits, destructive responses and maladaptive behavioural patterns.

3.1 Objectives

The primary objective of the TCIS training programme is to train staff to help young people to develop new responses to their environment that will assist them in their social and emotional development. TCIS does this by training staff to:

- Convey a sense of caring and protection to the individual child or young person while maintaining the dignity of both young person and staff member.
- Apply principles, skills and techniques that are safe and effective methods of crisis prevention and management.
- Focus on prevention, de-escalation, management and resolution of crisis.

4 Policy

4.1 Use of TCIS

- 4.1.1 Therapeutic Crisis Intervention is a total system for preventing and managing challenging behaviour. St Paul's has chosen TCIS as its main crisis prevention and behavior management system and expects that all its staff & employees will fully embrace its spirit and values and implement its full range of specific skills, techniques, strategies and procedures in a consistent and caring manner.
- 4.1.2 Only physical intervention skills and decision-making processes that are taught in the TCIS Programme may be used in St. Paul's. All techniques must be applied according to the guidelines provided in the training and in this policy.
- 4.1.3 Physical restraint and holding interventions may only be undertaken by staff that have successfully completed a TCIS course as described in Appendix One to this document.
- 4.1.4 Physical interventions must only be employed for the minimum time necessary. They must cease when the child or young person is judged safe and no longer at risk of harm to him / herself or others.
- 4.1.5 Where possible, staff members must consult with peers and supervisors prior to initiating physical intervention. Where possible two or more staff members, but no more than recommended in TCIS training, should be involved in any physical intervention to help ensure safety and accountability.



- 4.1.6 Young people are not permitted to restrain or assist in the restraint of other young people.
- 4.1.7 Medical attention must be offered to any child / young person or adult who receives an injury. If in doubt medical attention should always be sought.

5 Training of Staff

- 5.1.1 All staff working directly with children and young people in St Paul's will receive TCIS training including training in the use of physical intervention skills, with the exception of the Bean an Tí and the part time cleaner whose roles do not include responsibility for behaviour management. All staff are expected to **participate fully** in the training provided on site and during school time. In St. Paul's this includes direct training in TCIS, refresher updates and physical intervention skills training.
- 5.1.2 All staff involved in an incident of physical intervention must have successfully completed the same training programme, been assessed as competent in the use of recognised TCIS skills and have successfully completed regular skill review updates. The Principal will maintain a log of all staff's training and of testing of TCIS competencies.
- 5.1.3 Staff must achieve the standards as set down in St. Paul's *Therapeutic Crisis Intervention – Implementation and Training Policy* (see 5.2)
- 5.1.4 Three core competencies and accompanying elements form the foundation of the Therapeutic Crisis Intervention Crisis Prevention and Management System. St. Paul's expects its staff to demonstrate competence in these Therapeutic Crisis Intervention skills during training and consistently in the work place. These competencies and skills are contained in Appendix Two of this document.

5.2 Training Standards

- 5.2.1 St. Paul's is committed to the full implementation of TCIS and will work to the following standards as determined by the Residential Child Care Project in Cornell University. This requires:
- A minimum of twenty four hours of direct training time.
 - Refresher training for all staff within a 3 to 6 month pattern and re-certification at least once a year.
 - Testing of staff competence in the Life Space Interview, Physical Intervention skills and Knowledge of TCIS content. Individual staff test results will be shared with the Board of Management and the Principal is responsible for supervision so that performance during training and application of knowledge to work become part of supervision and monitoring of job performance.
 - All staff of St Paul's must show full commitment to the full implementation of TCIS as the school's behavioural management system.
 - Provision of clinical oversight is provided through referral meetings, the on- going development of the Individual Student Profile, updating the students' files, ICMP reviews and staff meetings.



- Application of TCIS includes supervision with the Principal, team de-briefings and staff meetings.
- Critical Incident Review and Monitoring should take place through supervision with the Principal, team de-briefings and staff meetings.

5.2.2 TCIS trainers must be accredited by Cornell University. They are required to attend a Cornell University sponsored TCIS Update and pass testing requirements at least every year in order to maintain their certification and BILD recognition. In the event of St Paul's deciding to create internal trainers they will be appointed on the basis of ability to train, on qualification, on experience and on their competence in TCIS testing and application.

Accountability and Information

- 5.2.3 The Principal is responsible for ensuring the development of a culture / climate in which children and young people understand that the physical restraint component of TCIS is a caring intervention.
- 5.2.4 The Principal and staff are responsible for advising / informing children and young people about TCIS as an approach used by staff.
- 5.2.5 St Paul's through its policies and procedures as a school provides a mechanism in place to facilitate the reporting of complaints.
- 5.2.6 Any use of physical intervention should be reported to the young person's parent/s.

5.3 Decision Process (In relation to physical intervention)

5.3.1 Physical interventions to contain and/or control the behaviour of children and young people should only be used as a safety response to acute physical behaviour and their use is restricted to the following circumstances:

the child/young person, other clients members of staff or others are at imminent risk of physical harm.

- 5.3.2 As any physical intervention involves some risk of injury to the young person or staff, staff must weigh this risk against the risks involved in failing to physically intervene when it may be warranted.
- 5.3.3 Physical interventions must never be used as (1) punishments (2) consequences or (3) for "demonstrating who is in charge".
- 5.3.4 Physical interventions should only be employed after other less intrusive approaches (such as diversions, problem solving, active listening, Behaviour Support Techniques, Emotional First



Aid, Crisis Co-regulation, and other verbal interventions) have been attempted unsuccessfully, or where there is no time to try such approaches.

- 5.3.5 There must be no deviation from this process unless specified in an Individual Crisis Management Plan (I.C.M.P).
- 5.3.6 The I.C.M.P. should be part of each child's individual student profile (ISP) and the young person should be consulted and informed in respect of this Plan.
- 5.3.7 The I.C.M.P. should include a strategy for intervening that includes specific physical interventions, if appropriate, or alternative strategies if physical intervention is not an option.
- 5.3.8 In creating an I.C.M.P. the following must be considered:
- When is the young person likely to engage in crisis type behaviour? What function does it serve for the young person? What is the young person trying to communicate through the behaviour? What other factors are contributing?
 - Pre-existing medical conditions that would be exacerbated if the child were involved in physical restraint?
 - Medications that the child may be taking which would affect the respiratory system should be noted
 - If there is history of physical or sexual abuse this should be considered as it could contribute to the child experiencing emotional trauma during a physical restraint.
 - There should be on-going reviews of the child's progress towards goals on eliminating the need for external controls.

5.4 **Recording**

- 5.4.1 All incidents of physical restraint must be recorded on the school's Serious Incident Report Sheet & Physical Intervention sheet.
- 5.4.1 The Principal and parents should be made aware of any injury to a child that arises because of physical intervention.
- 5.4.2 The Principal should be informed of any injuries to staff.
- 5.4.3 Any injuries to young people or staff must be recorded within St. Paul's Accident Recording procedures.

5.5 **Debriefing**

- 5.5.1 Following any incident of physical restraint, the Principal must ensure that debriefing and support is offered to the child, the staff members and any other people involved in or witness to the episode.



Appendix One

Therapeutic Crisis Intervention Overview

The Therapeutic Crisis Intervention System was developed by the Family Life Development Centre in Cornell University, New York in the early 1980s. It is used extensively in the USA, Canada, United Kingdom, Russia, Israel, Ireland and Australia.

Anyone implementing TCIS or aspects of it should do so with particular regard to promoting the dignity and well-being of the young people in their care.

The TCIS programme provides

- A structure to make sense of young people's difficult behaviour
- Provide workers with the tools to do their job in preventing and managing crisis situations
- Present a therapeutic approach to crisis prevention and intervention.

The TCIS course covers

- Crisis definition and theory
- The use of de-escalation techniques
- Crisis management
- Anger management
- Passive physical intervention techniques
- The legal ethical and policy aspects of their use
- Decisions making related to physical interventions
- Debriefing strategies
- Sign of distress and effect on the child / young person.

The TCIS rationale states that in our work with children the most important tool we possess in helping children and young people change, grow and develop into well-adjusted members of society, is ourselves. Our ability to relate to the young people we care for an open, sensitive, consistent, and caring way is perhaps the single most important contribution we make. It is a fundamental assumption that the adults who spend the most time with a young person, regardless of who they are, can directly reflect their behaviour and learning, and hence growth.



Appendix Two

6 Outline of TCIS Competencies

- 6.1 After training all staff will be expected to be competent in the following areas which include competencies 1 to 3.

7 Competency 1

Be able to proactively prevent and/or de-escalate a potential crisis situation with a child or young person.

- 1) Identify the stages of a crisis
- 2) Assess the situation accurately in terms of what the child or young person needs, the programme requires, the influence of the environment, and personal strengths and weaknesses
- 3) Develop appropriate intervention strategies based on an accurate assessment
- 2) Intervene in the situation in a manner that decreases the risk of injury or damage to the staff, children and young people and property.

7.1 *Learning Objectives*

Definition

The capacity to identify the stage of a potential crisis, to assess the situation in terms of personal strengths and weaknesses, the young person's needs, the programme requirements, and additional environmental factors, to develop an intervention strategy, and to apply an intervention that decreases risk of harm.

7.2 *Procedural knowledge*

- Classify behaviours according to the concepts of agitation, aggression and violence
- Describe the young person's perspective and feelings
- Analyse a crisis situation to determine the stage
- Describe the importance of self-awareness in crisis situations
- Describe the importance and use of the individual crisis management plan
- Identify environmental and organisational stresses and triggers
- Identify ways to structure the environment to prevent and reduce crises
- Identify how the adult's feelings, attitudes and experiences effect intervention choices
- Identify how developmental, situational, and cultural factors relate to a child's behaviour and response
- Assess a situation and select an appropriate intervention strategy
- Explain the goals of active listening
- Describe the concept of and sequence of the four questions before responding to crises
- Describe the crises cycle and how it leads to power struggles
- Identify a variety of verbal techniques
- Identify a variety of non-verbal techniques
- Apply the appropriate behaviour management technique based on the child and the situation
- Discriminate between non-aggressive and aggressive body language



7.3 **Factual knowledge**

- Identify the concepts of agitation, aggression and violence
- State the stages of a crisis
- State the reasons that awareness of self, the young person, the programme the agency, the group, and the environment is important
- Describe the strategies of Emotional First Aid and Crisis Co-regulation.
- Describe ways in which responses to children can damage or enhance their self-esteem
- Describe the range of behaviour management techniques available to de-escalate potential crises
- State the components of active listening
- Identify alternative ways to express anger and respond appropriately
- State and describe the components of the crisis cycle
- Describe the relationship between feelings and behaviours
- Describe the concept of agitation, aggression and violence
- Describe how their personal values and experiences influence their interactions with children and young people
- List and describe a range of behaviour management techniques
- Describe the effect personal space, body language, eye contact and height differences can have in a stressful situation

7.4 **Strategic knowledge**

- Assess another's perspective and feelings and communicate the understanding
- Select crisis prevention and intervention strategies that are congruent with child's developmental level, coping strategies, and situational needs
- Select crisis prevention and intervention strategies that are congruent with their agency's policies and procedures
- Identify when and when not to use selected intervention techniques
- Describe how thoughts and beliefs feed anger
- Choose when and when not to use active listening with an upset child or young person
- Develop a plan to reduce environmental causes and triggers
- Differentiate as to whether a child's behaviour is a state of agitation, aggression or violence
- Select intervention approaches appropriate to level of arousal
- Select behaviour management techniques that de-escalate a potential crisis situation
- Select intervention techniques to avoid the crisis cycle
- Select non-verbal behaviours that de-escalate potential crisis situations

7.5 **Attitudes**

- Choose to use crisis prevention and intervention strategies that will provide the least amount of stress and trauma to the child or young person
- Choose to use the least intrusive appropriate intervention in a potential crisis situation
- Choose to actively listen to children and young people whenever appropriate
- Choose to control their own emotions when dealing with a child or young person's crisis
- Avoid getting into a crisis cycle
- Consider the child or young person's perspective when intervening



- Choose appropriate non-verbal behaviours and avoid aggressive non-verbal behaviours in stressful situations

7.6 **Skills**

- Demonstrate different approaches to children based on an assessment of the situation
- Demonstrate verbal and non-verbal behaviour management techniques appropriate for the designated situation
- Demonstrate active listening skills
- Demonstrate verbal and non-verbal listening techniques that de-escalate an upset child or young person
- Be able to control their emotions when intervening in a crisis situation
- Demonstrate techniques to avoid power struggles and enlist a young person's co-operation
- Adjust intervention techniques based on response from child or young person
- Use behaviour management techniques based on the needs of the child or young person
- Use verbal and non-verbal listening techniques based on the needs of the child or young person
- De-escalate a simulated potential crisis situation by using the appropriate behaviour management techniques
- De-escalate a simulated potential crisis situation by using the appropriate verbal and non-verbal listening techniques
- Demonstrate the ability to understand the young person's perspective and communicate that understanding.
- Use non-aggressive non-verbal behaviours when approaching an upset person

8 **Competency 2**

Be able to safely and therapeutically manage a crisis situation.

8.1 **Elements**

- 1) Assess the safety risk in a crisis
- 2) Engage a young person who is in crisis
- 3) Manage the crisis according to the individual crisis management plan
- 4) Stay in control of self and situation
- 5) Intervene physically in a manner that reduces risk of harm

8.1 **Learning Objectives**

Definition

The capacity to assess the safety risk in a crisis, to engage the young person in crisis, to manage the crisis according to the ICMP, to stay in control of self and the situation, and to intervene physically in a manner that reduces the risk of harm.

8.2 **Procedural knowledge**



- Describe the sequence of steps to use releases from grabs, chokes, hair pulls and bites
- Identify the key concepts of avoiding counter-aggressive behaviours and using self-protective interventions
- Classify behaviours according to the concepts of aggression and violence
- Describe verbal strategies that minimise stress and promote compliance
- Describe how counter aggression can escalate a crisis
- Describe basic principles of physical intervention
- Describe the sequence of steps when breaking up a fight and of a standing restraint
- Describe the steps to a team restrain, approach from the front and back
- Describe the steps to move a young person and complete a team restraint
- Describe the sequence of steps of moving a small child and completing a small child restraint
- Describe the concept of the letting go process in the context of physical restraint
- Describe how to successfully and therapeutically end a physical restraint
- Describe the young person's feelings during a crisis
- Describe the steps in a three person restraint and transferring control
- Describe safety issues associated with physical restraint

8.3 ***Factual Knowledge***

- Describe the importance of balance
- State the principles of protective releases
- Describe the effect personal space, body language, eye contact and height differences can have in a stressful situation
- Describe the strategies of Emotional First Aid and Crisis Co-regulation
- List circumstances when restraint should be avoided, even though it may be justified
- List and describe alternatives to using physical restraint
- Describe the elements of a potentially violent situation
- List situations when physical restraint is appropriate
- State the principles of a standing restraint and breaking up a fight
- State the principles of a team restraint, a small child restraint
- Identify the steps of the letting go process
- Identify the importance of the adult's response to a young person in crisis
- Identify information which should be included in documenting the physical restraint incident
- Identify signs of distress a young person might exhibit during a restraint

8.4 ***Strategic Knowledge***

- Choose appropriate physical responses to young people when they are aggressive and challenging
- Select physical intervention approaches appropriate to the level of risk
- Choose the appropriate time to use the strategies of Emotional First Aid and Crisis Co-regulation
- Select the appropriate element of a potentially violent situation to remove in order to de-escalate the situation
- Select intervention approaches appropriate to level of arousal
- Analyse a crisis situation to determine if a protective stance is appropriate
- Analyse a situation to determine if it is appropriate to use a technique to break up a fight and/or use a standing restraint
- Analyse a situation to determine if it is appropriate to use a team restraint
- Analyse a situation to determine if it is appropriate to move the young person and use a team restraint



- Analyse a situation to determine if it is appropriate to use a small child restraint
- Analyse a situation to determine if it is appropriate to move the small child
- Analyse a crisis situation and decide an appropriate strategy
- Describe how letting go sets the tone for the recovery phase
- Select when to transfer control and/or add a third person

8.5 **Attitude**

- Choose to avoid a physical restraint by using protective physical interventions whenever safe
- Choose to use the strategies of Emotional First Aid and Crisis Co-regulation to avoid physical restraint
- Consider the need to respond to the young person's behaviour and underlying emotions during a crisis situation
- Choose to use the letting go process when ending a restraint
- Choose to avoid physical restraint whenever possible

8.6 **Skills**

- Demonstrate using a protective stance when talking to an aggressive and physically threatening person
- Execute releases from grabs, chokes, bites, and hair pulls without inflicting pain or injury
- Demonstrate using the strategies of Emotional First Aid and Crisis Co-regulation with an upset person
- Demonstrate removing the elements of a potentially violent situation
- Demonstrate breaking up a fight, using active listening skills, protective stances and releases
- Perform a standing restraint
- Perform a team restraint, approach from the front and back and moving the young person
- Perform the technique of moving the small child and using a small child restraint
- Perform the letting go process
- Demonstrate using three people when restraining a large adolescent
- Demonstrate transferring control to a third person



9 Competency 3

Be able to process with children and young people to help improve their coping strategies.

9.1 *Elements*

- 1) Establish positive relationships with children and young people
- 2) Identify precipitating factors of an incident
- 3) Conduct a Life Space Interview
- 4) Teach children and young people better coping skills
- 5) Learn from crisis situations

9.1 *Learning Objectives*

Definition

The capacity to establish positive relationship with children and young people, to identify precipitating factors of incidents, to conduct a Life Space Interview, to teach children better coping skills, and to learn from crisis situations.

9.2 *Procedural knowledge*

- Identify the key concepts of the Life Space Interview
- Describe the importance of the sequence of steps to the Life Space Interview
- Describe the young person's perspective and feelings of the event being discussed
- Identify the targeted inappropriate coping behaviour to discuss in the Life Space Interview
- Identify triggers and underlying issues that led to the use of inappropriate behaviours

9.3 *Factual Knowledge*

- State the steps of the Life Space Interview
- List and describe the goals of the Life Space Interview
- Describe the importance of establishing a positive relationship with the young people in care
- Describe importance of the LSI as a tool for teaching children and young people new ways of dealing with difficult situations

9.4 *Strategic Knowledge*

- Choose when and when not to conduct a life space interview with a child or young person
- Develop a plan with a young person to use more appropriate coping skills when faced with a similar stressful situation
- Select the appropriate time to conduct a Life Space Interview

9.5 **Attitude**

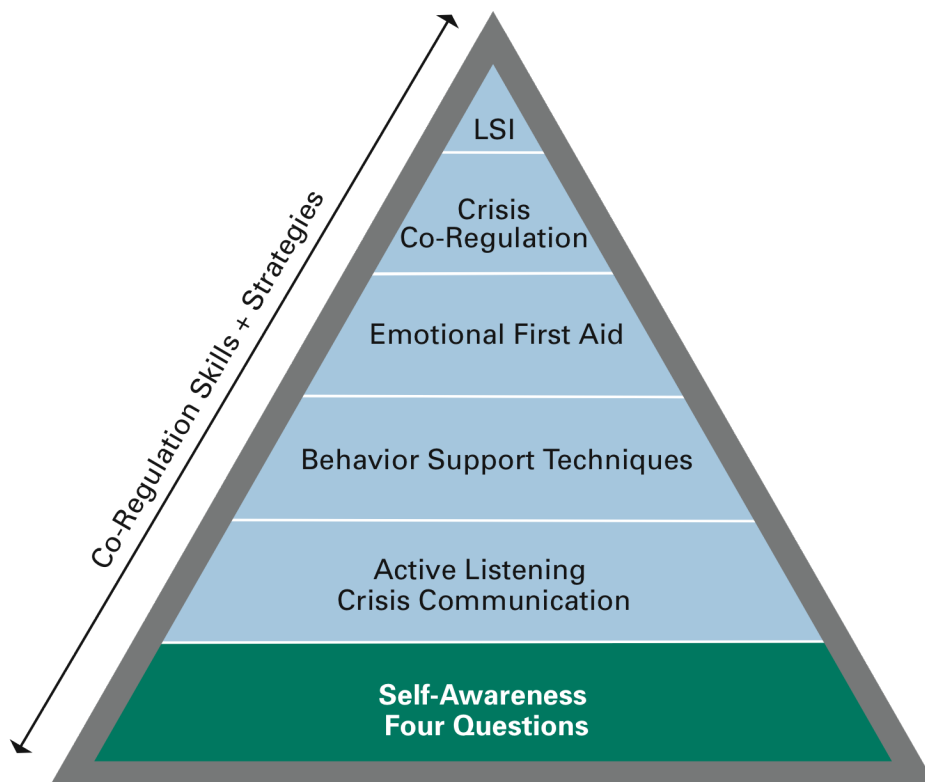
- Choose to conduct a Life Space Interview with a young person after events when inappropriate coping behaviours have been used
- Listen to the young person’s point of view without challenging their perspective

9.6 **Skills**

- Use active listening skills to fully understand the young person’s perspective of the event
- Engage the young person in a practice session, rehearsing the use of the plan developed in the LSI
- Demonstrate the seven steps of the Life Space Interview in sequence
- Connect the young person’s feelings and behaviour

In summary all staff must be aware of and use the following skills & strategies:

SKILLS BUILDING FOR CO-REGULATION STRATEGIES IN TCI



Appendix 3: See the school’s Serious incident Report Form and Physical Intervention Form in staff copy of Discipline and Behaviour policies

Appendix 4: See TCIS Manual in staff copy of Discipline and Behaviour policies for guidelines and more details of approaches and strategies to be used.