

With Kids Play Therapy Service for Counselling in Schools/Full Day Play Therapy Service

PLAY THERAPY

Play Therapy is a way of helping children to explore and express difficult feelings and adverse experiences. Children can often struggle to understand or put words to their experiences and this can impact on their ability to manage their emotions, and on their mental well-being. The play therapist recognises the importance of understanding the child's world from their perspective, and will help the child to make sense of and understand their feelings, this enables them to cope better.

WHAT IS PLAY THERAPY?

Play Therapy is a child centred and non-directive therapy using play & creative materials. Children are free to communicate their thoughts, feelings and behaviours in their own way, at their own pace. For children words can be too difficult to find, so there is no pressure to talk about their difficulties. The therapist supports the child to explore and resolve some of the themes that come up in their play. Play Therapy supports positive change and helps the child to:

- Act out and release pent up feelings of tension, frustration, insecurity, aggression, fear and/or confusion**
- Build self-esteem and self-confidence**
- Improve ways of relating to others**
- Imagine other ways of being**
- Process life events**
- Develop self regulation**
- Concentrate in school**

WHO IS IT FOR?

Play Therapy is particularly useful for children aged 3yrs to 12yrs who have experienced trauma or who display emotional or behavioural difficulties, including:

Emotional	Behavioural	Situational
Anxiety	Withdrawn	Bereavement
Low Self-Esteem	Aggression	Family Breakdown
Anger	Relationship Difficulties	Abuse
Sadness	Defiance	Trauma
Confused	Acting out	Parental Addiction
Unhappy	Poor Impulse Control	Domestic Violence

WHAT HAPPENS?

Our therapy sessions take place in dedicated play rooms in partner nurseries and schools or at our office bases, on the same day and same time. During the 50 min session the child is allowed to use their time in the room however they want. Therapists do not question or direct the child to do anything, giving them space to play or act at their own pace. Over the weeks the child will be helped to process any difficulties that they're experiencing which helps them to manage more easily at school and home.

FIRST STEPS

Our CEO/Clinical Manager will:

Communicate with the Headteacher to

1. Discuss referrals
2. Gain background information
3. Establish reasons for referral
4. Ensure appropriateness of referrals for the intervention.

Once established, the head teacher will gain consent from parents/carers for referral to be made for Play Therapy.

Prior to the start of therapeutic work **the allocated therapist** will:

1. Meet with parent/carer to outline the work, gain background information and seek their agreement on the support going ahead.
2. Meet with the class teacher - main areas of concern are noted. These become the basis of the outcome goals which are monitored and reviewed regularly.

NEXT STEPS

ASSESSMENT if more than 15 sessions being offered (**Counselling Service**)

1. 3 x Play Therapy assessment sessions will take place,
2. Feedback to parent and relevant teaching staff.

ASSESSMENT (Full Day Play Therapy Service Only)

1. Classroom Observation
2. 4- 10 x Play Therapy assessment sessions will take place,
3. Feedback to parent and relevant teaching staff.

This assessment will support the understanding of the difficulties the child is experiencing and provide strategies needed to support the child.

MONITORING AND EVALUATION

Our therapists will monitor progress made in therapy through consultation with parents/carers and school staff, through the use of the With Kids Progress Monitoring form.

ONGOING WORK (Counselling Service)

If recommended, individual play therapy will be offered.
This is arranged in 10 weekly blocks of 50 minutes per session.

We offer a flexible model of Play Therapy delivery offering open-ended sessions depending on the child's needs – agreed in consultation with the child, teaching staff and parents, and based on the child's level of engagement and progress in the therapeutic sessions, reviewed after each block of 10 sessions. Interim reports are provided every 10 sessions, and a final report with recommendations will be made at the end of input.

Termly contact, or more often as appropriate, will be made with the class teacher to support understanding of the child's emotional communications and to consider ways of responding to this in the classroom environment.

Termly contact will also be made with parents/carers. Through this contact parents are helped to understand the nature of the child's emotional difficulties) and are supported to consider ways of supporting their child. Recognising that parents are vital partners in this will ensure that parents are better able to meet their child's emotional needs.

ONGOING WORK (Full Day Play Therapy Service Only)

As above, but with increased informal contact with teaching staff, and increased contact with parents as required.

CONFIDENTIALITY

The therapist would not divulge detail of the content of the child's play in order to maintain confidentiality, and thereby trust in the therapeutic relationship. However in the event of any child protection concerns these will be raised in line with Glasgow City Council Child Protection Policy.

REQUIREMENTS

For play therapy to take place the therapist and child will need access to the same room each week at the same time. The room MUST be free from interruptions. Time will be required to set up and pack up play equipment. All play equipment will be provided by With Kids.

FULL DAY PLAY THERAPY SERVICE ONLY

Therapist available for whole school day
4 x individual play therapy sessions per day
Therapist embedded in school culture
Regular opportunities for staff consultations on *all* children in school
Staff support
Development of trauma informed practice/culture
Range of training opportunities

SESSION NUMBERS

Session numbers likely to be needed by children is dependent on a number of factors, but most notably on the complexity of early life experiences and level of stability of home life. The following information below serves as a ***guide*** only.

MINOR DIFFICULTIES

The minimum number of sessions we would offer a child is **10**. This would be for a child who is experiencing minor emotional and/or behavioural difficulties. They may present with the following issues and experience:

- A child who is slightly anxious
- A child who struggles slightly with relating to peers
- A child who is slightly withdrawn
- A child who has experienced a few minor changes
- A child who slightly struggles to be part of group in class
- A child who goes between feeling happy and sad
- A child who says they are lonely

MODERATE DIFFICULTIES

In the region of **15** sessions would be appropriate for a child presenting with moderate emotional and/or behavioural issues. They may present with, for example, the following:

- Bereavement outside immediate family
- Parents who are divorced, separated or there has been family breakdown of some sort
- Experience of ill health or a parent with minor ill health
- Experience of bullying
- A child who has experienced changes of home/school
- A child who is anxious
- A child who struggles with making peer relationships
- A child who has outbursts at times
- A child who can be withdrawn at times

SIGNIFICANT DIFFICULTIES

In the region of **20** sessions would be appropriate for a child experiencing significant emotional and/or behavioural difficulties. They may present with the following issues and experience:

- Bereavement of a close family member
- Adopted or in foster care
- Experienced an acrimonious divorce/separation of parents
- Experienced short term domestic abuse
- Experienced a single traumatic event
- A child who struggles to communicate with peers
- A child who finds it difficult to focus in class
- A child who has experienced some significant changes
- A child who struggles to relate to adults
- A child who has aggressive outbursts
- A child who is withdrawn a great deal of the time
- A child who has experienced some loss

COMPLEX AND SIGNIFICANT DIFFICULTIES

In the region of a **minimum of 30** sessions would be appropriate for a child experiencing complex and significant emotional and/or behavioural difficulties. They may present with the following issues and experience:

- Bereavement of a close family member
- Adopted or in foster care
- Experienced an acrimonious divorce/separation of parents
- Experienced severe domestic abuse
- Experienced complex trauma
- A child who struggles to manage in class
- A child who struggles to relate to peers and adults
- A child who has severe outbursts which may be aggressive
- A child who has experience early neglect
- A child who has experienced abuse
- A child who has experienced significant loss
- A child who has had many and significant changes

