

# BUILDING A SAFE AND FRIENDLY SCHOOL



**LIWARA**  
Catholic Primary School

## STUDENT BEHAVIOUR MANAGEMENT PROCEDURES

APPENDICES	
1A	Student Rights and Responsibilities
1B	Staff Rights and Responsibilities
1C	Parent Rights and Responsibilities
2A	Behaviour Journal – Junior Primary (P/P – 3)
2B	Behaviour Journal – Middle to Upper Primary (Years 4- 6)
3	Shared Concern Approach
4	Flow Chart – Steps for dealing with reported bullying
5	Student Reporting Sheet (to notify staff of bullying occurring)
6	Notification to Parent – Bullying behaviour
7	Bullying Incident Report – (for staff to complete)
8	Report of Bullying Form – (for Leadership Team)



# RIGHTS AND RESPONSIBILITIES

Students at Liwara have certain rights and responsibilities.

As a student you have the RIGHT to:	As a student you have the RESPONSIBILITY to:
LEARN WITHOUT BEING DISRUPTED	<ul style="list-style-type: none"> <li>● Make sure that your behaviour is not disrupting the learning of others.</li> <li>● Support the teacher and peers by listening, helping, cooperating and behaving responsibly.</li> </ul>
WORK AND PLAY IN A SAFE, FRIENDLY AND CLEAN ENVIRONMENT	<ul style="list-style-type: none"> <li>● Treat everyone in a safe and friendly way – <b>BULLYING WILL NOT BE TOLERATED AT LIWARA.</b></li> <li>● Help to keep classrooms and outdoor areas clean and tidy.</li> <li>● Walk on paved areas and around corners.</li> <li>● Line up safely – hands and feet kept to self.</li> <li>● Play fairly, include others, no rough play, no ‘put downs’.</li> <li>● Treat other students, staff and visitors in a friendly and respectful way</li> <li>● Think carefully about how you speak and act towards others.</li> </ul>
BE TREATED WITH RESPECT, COURTESY AND HONESTY	<ul style="list-style-type: none"> <li>● Treat everyone with respect.</li> <li>● Not gossip, tell secrets, or spread untruths about others.</li> <li>● Show good manners and courtesy toward others.</li> <li>● Include and welcome others.</li> <li>● Own up and tell the truth.</li> </ul>
BE PROUD OF YOUR ACHIEVEMENTS	<ul style="list-style-type: none"> <li>● Develop your potential and help others to do the same.</li> </ul>



# RIGHTS AND RESPONSIBILITIES

Staff at Liwara have certain rights and responsibilities.

As a staff member you have the RIGHT to:	As a staff member you have the RESPONSIBILITY to:
TEACH WITHOUT DISRUPTION	<ul style="list-style-type: none"> <li>● Be well organised and provide relevant and challenging educational programs.</li> <li>● Deal effectively with students whose behaviour disrupts the learning of others.</li> </ul>
WORK IN A CLEAN, SAFE ENVIRONMENT	<ul style="list-style-type: none"> <li>● Share responsibility for keeping classrooms and outdoor areas clean, tidy and secure.</li> <li>● Share responsibility for making sure that the school environment is safe.</li> </ul>
BE TREATED WITH RESPECT, COURTESY AND HONESTY	<ul style="list-style-type: none"> <li>● Treat others with respect, courtesy and honesty.</li> </ul>
BE SUPPORTED BY THE WHOLE SCHOOL COMMUNITY	<ul style="list-style-type: none"> <li>● Support the school's ethos, policies and procedures.</li> <li>● Communicate effectively and respectfully with other staff, students and parents.</li> </ul>



# RIGHTS AND RESPONSIBILITIES

Parents at Liwara have certain rights and responsibilities.

As a parent you have the <b>RIGHT</b> to:	As a parent you have the <b>RESPONSIBILITY</b> to:
<b>BE TREATED WITH RESPECT, COURTESY AND HONESTY</b>	<ul style="list-style-type: none"> <li>● Treat all members of our school community with respect, courtesy and honesty.</li> </ul>
<b>BE INFORMED ABOUT YOUR CHILD'S PROGRESS AND BEHAVIOUR</b>	<ul style="list-style-type: none"> <li>● Support your child's learning program at home by facilitating homework and communicate with the class teacher.</li> <li>● Regularly communicate any information that may affect your child's behaviour or performance at school.</li> <li>● Support the school in our efforts to build a safe and friendly school environment by acknowledging and working in partnership with the school -when your child has behaved inappropriately and affirming them for positive and cooperative behaviour.</li> </ul>
<b>EXPECT YOUR CHILD TO PARTICIPATE FULLY IN THEIR EDUCATIONAL PROGRAM</b>	<ul style="list-style-type: none"> <li>● Make student attendance and punctuality a priority.</li> <li>● Ensure that the child's physical and emotional needs are met at home.</li> </ul>
<b>COMMUNICATE ISSUES RELATED TO YOUR CHILD IN AN APPROPRIATE FORUM, AT AN APPROPRIATE TIME</b>	<ul style="list-style-type: none"> <li>● Contact the class teacher first, to communicate any concerns, questions or seek clarification.</li> <li>● Contact the Principal for further clarification if necessary.</li> </ul>



LIWARA CATHOLIC PRIMARY SCHOOL  
JUNIOR BEHAVIOUR JOURNAL SHEET  
(PP – YEAR 3)  
(staff member to fill in if necessary)

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
\_\_\_\_\_

What I did?

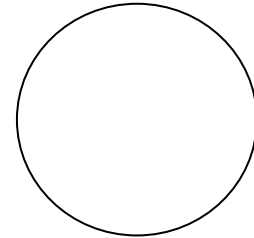
\_\_\_\_\_  
\_\_\_\_\_

How do you think it made \_\_\_\_\_ feel?

\_\_\_\_\_  
\_\_\_\_\_

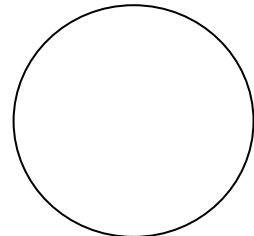
How did you feel when it happened?

\_\_\_\_\_  
\_\_\_\_\_



How do you feel now?

\_\_\_\_\_  
\_\_\_\_\_



How can I make this right?

\_\_\_\_\_  
\_\_\_\_\_

Action taken:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Teacher Signature:

\_\_\_\_\_

Leadership Team Member Signature:

\_\_\_\_\_



LIWARA CATHOLIC PRIMARY SCHOOL  
MIDDLE – UPPER (YEAR 4 – 6)  
BEHAVIOUR JOURNAL

My Name: \_\_\_\_\_

My Year Level: \_\_\_\_\_

Today's date: \_\_\_\_\_

Week: \_\_\_\_\_ Term: \_\_\_\_\_

What I did wrong:

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What 'right/s' did I ignore:

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What am I going to do to make things right:

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I agree to work hard on not repeating this kind of behaviour in the future:

Signature: \_\_\_\_\_

This reflection was reviewed by: \_\_\_\_\_

Comment: \_\_\_\_\_

\_\_\_\_\_



## STEPS OF SHARED CONCERN APPROACH – MEETING WITH THE STUDENT WHO HAS BEEN BULLYING

### Step 1

**“I have asked you to come and speak with me because I have heard that some things have been happening to ‘X’ that are making him/her very unhappy at school.”**

- Wait for the student to respond.
- If the student doesn’t respond ask, “Do you know anything about this that might help me?”
- Do not try to force the student to ‘own up’ or admit to his/her involvement: simply try to get him/her to acknowledge that there is a situation which is making ‘X’ unhappy.
- If the student complains about ‘x’, don’t question, just let the student explain the situation.

### Step 2

**“So it sounds like ‘X’ is having a bit of a tough time.”**

- Wait for the student to respond.
- As soon as the student agrees and acknowledges that ‘X’ is having a bad time and is unhappy, move to Step 3.
- If the student says that ‘X’ is to blame, accept the point but suggest that ‘X’ is still having a bad time and is unhappy.

### Step 3

**“Well, I was wondering what you could do to help improve the situation for ‘X’ to help him/her become happier at school?”**

- Accept any suggestion with positive feedback.
- Don’t question suggestions if they are positive.
- If the suggestions are negative, ask the student whether he/she thinks this would help ‘X’ feel happier.
- If the student can’t think of anything to do or is resistant to the idea, ask him/her to take some time to think about something he/she could do to help make ‘X’ feel happier, then move to Step 4.

### Step 4

**“Okay, I’ll see you next week to find out how you are getting on.”**

- If the student had an idea then say you will see him/her to “discuss how your idea went when you tried it.”
- If he/she didn’t have an idea then say you will see him/her to “discuss the idea you have come up with.”





## STEPS OF SHARED CONCERN – MEETING WITH THE STUDENT WHO HAS BEEN BULLIED

### Step 1

**“I have asked you to come and speak with me because I have heard that some things have been happening to you that are making you unhappy at school.”**

- Wait for the student to respond.
- Let the student explain his/her situation. Then simply acknowledge that there is a situation, which is making him or her unhappy.

### Step 2

**“So it sounds like you are having a bit of a tough time.”**

- Wait for the student to respond.
- As soon as the student agrees and acknowledges, go to Step 3.

### Step 3(a)

**“I have spoken to a few students about your situation and they have made some good suggestions to help you feel happier and safer at school.”**

- If the student is concerned about this reassure him/her that you will be keeping a close eye on what is happening.
- Let the student know that there may be a few changes in some of the students' behaviour towards him or her.
- If you feel the student could help the situation by changing some of his/her behaviours go to Step 3(b).

### Step 3(b)

**“I was wondering what you could do to help improve the situation for yourself and help you to become happier at school.”**

- Accept any suggestions with positive feedback
- Don't question suggestions if they are positive.
- If the suggestions are negative, ask the student whether he/she thinks this would help him/her feel happier.
- If the student can't think of anything to do or is resistant to the idea, ask him/her to take some time to think about something he or she could do help to feel happier, then move to Step 4.

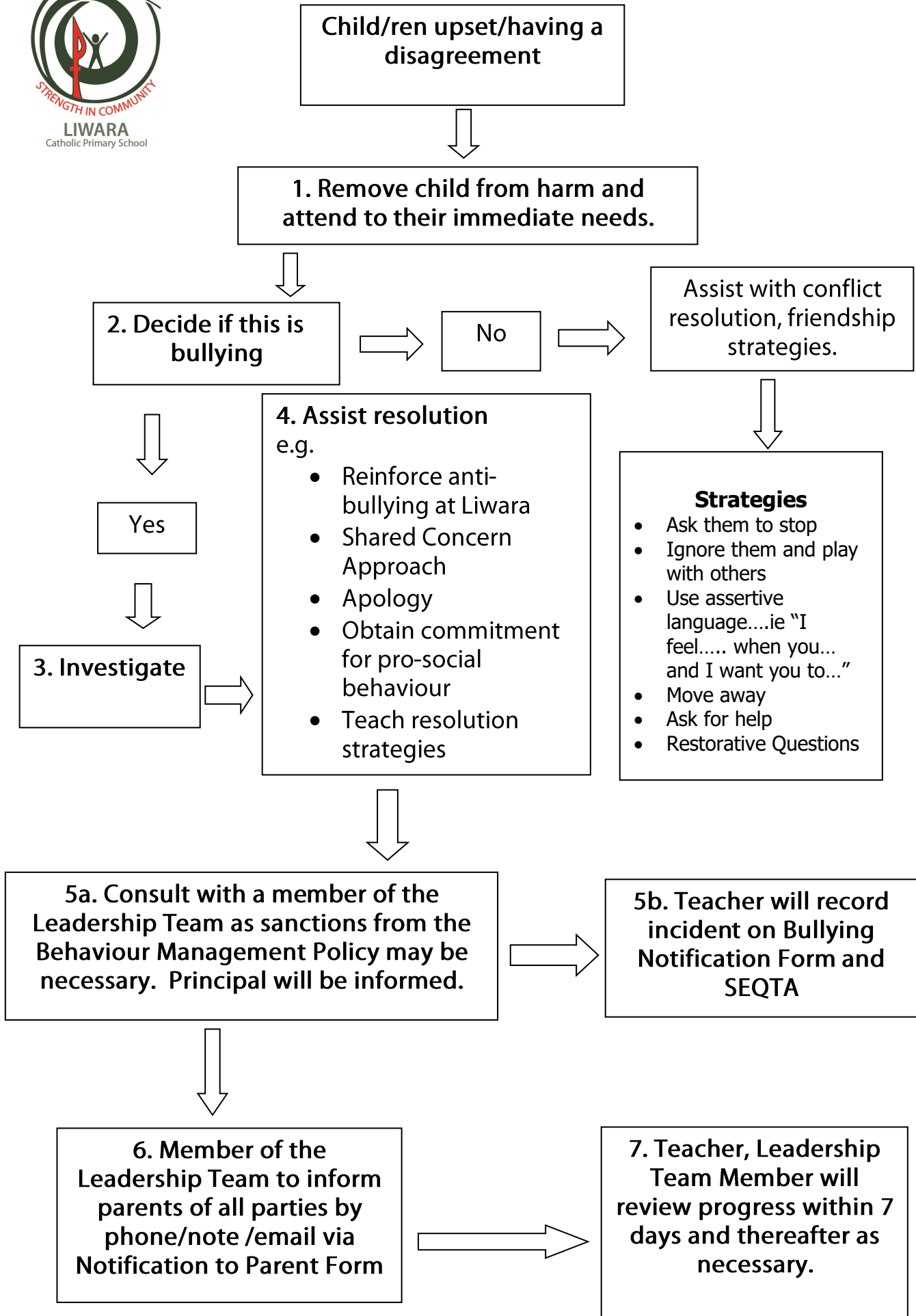
### Step 4

**“Okay, I'll see you next week to find out how you are getting on.”**

- If the student had an idea then say you will see him/her to “discuss how your idea went when you tried it.”



## STEPS FOR DEALING WITH REPORTED BULLYING





# STUDENT REPORTING SHEET – BULLYING BEHAVIOUR

Year Level: \_\_\_\_\_

Everyone at Liwara School has the right to feel safe and be respected.

By reporting any bullying that may be happening to you, the problem can be dealt with and solved and you will feel happy and safe at school once more.

Keeping it a secret, not doing anything about it or not asking for help can make it worse.

## Who fills out this form?

Anyone who is being bullied or a bystander who wants to help stop bullying can fill out this form. The information will be kept private.

Please fill in the information below and a staff member will make some time to talk to you.

1. Are you filling out this form because you are being bullied? Yes /No
2. Are you filling out this form because someone you know is being bullied? Yes/No
3. What type of bullying is happening?

### PHYSICAL

- Hitting, punching
- Kicking
- Pinching
- Scratching
- Damaging or stealing property
- Throwing things at someone
- Other

### VERBAL

- Teasing
- Name calling
- Insulting someone
- Threatening remarks
- Discriminatory remarks
- Lies or nasty stories
- Offensive language
- Other

### EMOTIONAL

- Exclusion from friends
- Ignoring someone
- Making fun of someone
- Stopping someone from joining in
- Disrupting someone's game
- Other

4. How many people are doing this?

\_\_\_\_\_

5. How long has this been happening?

\_\_\_\_\_

6. How do you feel about the bullying/teasing?

\_\_\_\_\_

7. What have you tried to do to solve this?

\_\_\_\_\_

8. Have you told anyone about this problem?

\_\_\_\_\_

-Hand this form in at the front office. -Do not tell the people who are bullying about this.  
-We want to help you. A teacher, Mrs Millar, Jane Evans, Mr Dols or Miss Leddin will arrange to speak with you very soon.



# NOTIFICATION TO A PARENT OF BULLYING BEHAVIOUR

Date: \_\_\_\_\_

Week: \_\_\_\_\_ Term: \_\_\_\_\_

Dear \_\_\_\_\_

This letter is to inform you that your child \_\_\_\_\_ has been involved in a recent bullying incident/s here at school on \_\_\_\_\_.

Your child was involved by:

Physical	Verbal	Emotional
<input type="checkbox"/> Hitting <input type="checkbox"/> Punching <input type="checkbox"/> Kicking <input type="checkbox"/> Scratching <input type="checkbox"/> Damaging or stealing <input type="checkbox"/> Stopping someone from joining in <input type="checkbox"/> Disrupting someone's game <input type="checkbox"/> Throwing things at someone <input type="checkbox"/> Other	<input type="checkbox"/> Name calling <input type="checkbox"/> Teasing <input type="checkbox"/> Insulting someone <input type="checkbox"/> Threatening remarks <input type="checkbox"/> Discriminatory remarks <input type="checkbox"/> Lies or nasty stories <input type="checkbox"/> Offensive language <input type="checkbox"/> Other	<input type="checkbox"/> Being the student who was bullied <input type="checkbox"/> Using bullying behaviour <input type="checkbox"/> Being a bystander to bullying behaviour <input type="checkbox"/> Exclusion from friends <input type="checkbox"/> Making fun of someone <input type="checkbox"/> Ignoring someone <input type="checkbox"/> Other

Liwara's philosophy in regard to any alleged bullying incident is that of consultation with all parties involved.

With support, all parties are responsible for improving peer relationships, finding solutions to relationship problems, seeking a commitment to resolve a negative situation and change behaviour choices for the future.

This matter has been acted upon and all children involved will be contacted again no later than one week from this incident to monitor the situation and intervene again, if necessary.

Your child's 'Behaviour Reflection Sheet' has been attached.

**On this occasion, behavioural consequences:**

- have been applied
- have not been applied

**Details of behavioural consequences (if applicable):**

Reflection Sheet  Apology  Detention  Other: \_\_\_\_\_

This letter is *not* intended to result in extra punishment at home. It is for your information any may be useful in promoting discussion with your child about their behaviour choices. You are encouraged however to discuss the importance of:

- taking responsibility for our own choices
- being sorry and making amends through positive behaviour choices in the future

We appreciate your support and consultation with the school. Please do not hesitate to contact me via the school office if you require any further clarification.

Yours sincerely

\_\_\_\_\_  
The Leadership Team



# BULLYING INCIDENT REPORT

(To be filled out by a teacher)

Student's Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_ Week: \_\_\_\_\_ Term: \_\_\_\_\_

Date of Incident: \_\_\_\_\_

Recorder: \_\_\_\_\_

**PERSON reporting the incident is:**

- The person being bullied \_\_\_\_\_
- A bystander \_\_\_\_\_
- Involved but not main offender \_\_\_\_\_
- Parent \_\_\_\_\_
- Staff Member \_\_\_\_\_
- Other \_\_\_\_\_

**WHERE the incident is reported to have taken place:**

- Classroom
- Bitumen
- Oval
- Junior Playground
- Toilets
- Other \_\_\_\_\_

**WHEN the incident is reported to have taken place:**

- Before school
- Recess
- Lunch
- Class
- Other \_\_\_\_\_

**TYPE OF BULLYING involved:**

Physical	Verbal	Emotional
<input type="checkbox"/> Hitting <input type="checkbox"/> Punching <input type="checkbox"/> Kicking <input type="checkbox"/> Shoving <input type="checkbox"/> Biting <input type="checkbox"/> Scratching <input type="checkbox"/> Spitting <input type="checkbox"/> Pinching <input type="checkbox"/> Tripping <input type="checkbox"/> Damaging/ stealing property <input type="checkbox"/> Hiding/taking belongings <input type="checkbox"/> Disrupting someone's game <input type="checkbox"/> Throwing things at someone <input type="checkbox"/> Other	<input type="checkbox"/> Exclusion <input type="checkbox"/> Put downs <input type="checkbox"/> Sexist/Racist/Offensive remarks <input type="checkbox"/> Name calling <input type="checkbox"/> Teasing <input type="checkbox"/> Insults <input type="checkbox"/> Offensive language <input type="checkbox"/> Threatening remarks <input type="checkbox"/> Discriminatory remarks <input type="checkbox"/> Lies or nasty stories <input type="checkbox"/> Offensive language <input type="checkbox"/> Intimidation <input type="checkbox"/> Other	<input type="checkbox"/> Leaving others out <input type="checkbox"/> Spreading rumours <input type="checkbox"/> Excluding someone <input type="checkbox"/> Stopping others from being someone's friend <input type="checkbox"/> Ignoring someone <input type="checkbox"/> Making fun of someone <input type="checkbox"/> Using bullying behaviour <input type="checkbox"/> Being a bystander to bullying behaviour <input type="checkbox"/> Stopping someone from joining in <input type="checkbox"/> Other

**WHO was involved (those being bullied, those bullying, those bystanders or helpers)**



LIWARA  
Catholic Primary School

**DESCRIPTION OF WHAT HAPPENED (or is still happening)**

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**Injury to student who was bullied:**

- None
- Graze/bruise
- Laceration
- Distress
- Other \_\_\_\_\_

**Action taken with those reported to be bullying:**

- Shared Concern Approach
- Taught/revised Strategies
- Commitment to stop negative behaviour
- Stated anti-bullying position of the school
- Other \_\_\_\_\_

**People Notified:**

- Class teacher
- Parent (Form: 'Notification To A Parent of Bullying Incident')
- Social Worker
- Assistant Principal
- Principal
- Other \_\_\_\_\_

**Review Date:** \_\_\_\_\_ (in one week)

**Follow Up Action:**

**Review with:**

- The student who was bullied
- The student/s who bullied
- The bystanders

**Outcome: *The bullying***

- Has stopped
- Is reduced
- Has been referred to the Leadership Team for further action.

**Important Note: This form is to be filed in the Register of 'Bullying Incidents' File kept in the Principal's Office**



## REPORT OF BULLYING FORM

(Completed by Leadership Team)

Date: \_\_\_\_\_

1. Name of the student who has been reported as being bullied \_\_\_\_\_ Year \_\_\_\_
2. Name of student/s who have been reported as bullying: (names and year levels)

\_\_\_\_\_  
(If more than one student is involved, please photocopy and file this form separately under each child's surname)

3. Name/s of the person/s who reported the bullying:

- The student being bullied \_\_\_\_\_
- Parent \_\_\_\_\_
- Other student(s) \_\_\_\_\_
- Teacher/s \_\_\_\_\_

4. Has there been previous notification of this situation? Yes  No   
 A bullying incident report has been completed and filed.

5. Description of the incident/s according to: \_\_\_\_\_

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6. Result of Interview with Person Accused of Bullying:

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**7. Response of Witnesses/Bystanders:**

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**8. Action Taken (consequences)**

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**9. Record of Interview with Parent (if required):**

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**10. Follow Up report – One Week Following** Date: \_\_\_\_\_

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**11. Follow Up report – One Month (if Required)** Date: \_\_\_\_\_

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Matter Resolved: Yes  No

Signed \_\_\_\_\_ Date: \_\_\_\_\_  
Principal/ Assistant Principal



Signed \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Student (if required)