



A RELATIONSHIP PROTOCOL (FOR ALL SCHOOL STAFF)

Our school is invested in supporting the very best possible relational health between:

**Parent and Child
Child and Child
Child and School Staff
School Staff
School Staff and Senior Leads
School Staff and External Agencies**

**To this end our school is committed to educational practises, which
Protect, Relate, Regulate and Reflect**

Protect

- Increased 'safety cues' in all aspects of the school day, eg, in primary schools meet and greet at the school entrance and in secondary schools at the classroom door.
- School staff trained in 'PACE' models of interaction (Hughes 2015): being warm, empathic, playful and curious (proven to shift children out of flight/fight/freeze positions).
- School staff to ensure that interactions with children are socially engaging not socially defensive, in order to decrease chances of children relating defensively (flight/fight/freeze).
- A whole school commitment to cease using harsh voices, shouting, put-downs, criticisms, shaming (proven to be damaging psychologically and neurologically)
- School staff will interactively repair the occasions when they themselves move in to defensiveness.
- The implementation of pedagogic interventions that help staff to get to know children better on an individual basis eg 'I wish my teacher knew' (what matters to them, who matters to them, their dreams, hopes) This is key to enabling children to feel safe enough to want to talk, if they so wish, about painful life experiences, which are interfering with their ability to learn and quality of life.
- All vulnerable children to have easy access on a daily basis to at least one names emotionally available adult, and these children know when and where to find that adult. If the child does not wish to connect with this adult, an alternative person is found.
- School staff adjusting expectations around vulnerable children to correspond with their developmental capabilities and experience of traumatic stress This

will include removing vulnerable and traumatised children in a kind and non-judgemental way from situations they are not managing well. (eg children who keep 'triggering' in to alarm states in the main playground given access to a separate calmer smaller playground).

- Provision for children of a clear, confidential and non-shaming system of self-referral for help/talk time.
- The nurturing of school staff in such a way that they feel truly valued and emotionally regulated enough to be able to interact throughout the school day with social engagement rather than defensiveness.

Relate

- All school staff trained in emotional coaching and in relating to children in terms of the four key rational needs for secure attachment: affect attunement, empathy, soothing and containment.
- A whole school commitment to enabling children to see themselves, their relationships and the world more positively, rather than through a lens of threat, danger or self-blame.
- Relational opportunities for vulnerable children with emotionally available adults at school to enable them to make the shift from 'blocked trust' (not feeling psychologically safe with anyone) to trust, and from self-help to 'help seeking'

Regulate

- The implementation of interventions designed to bring down the stress hormone levels (eg from toxic to tolerable) in vulnerable children, enabling them to feel calm, soothed and safe. This is to support learning, quality of life and protect against stress-induced physical and mental illness, now and in later life.
- Evidences based nurturing and regulatory interventions that aim to repair psychological damage and brain damage caused by traumatic life experiences, through emotionally regulating and playful, enriched adult-child interactions.
- The emotional well-being and regulating of staff is treated as high priority in order to prevent burn-out, stress related absence or leaving the profession, through stress related illness, secondary trauma and or/feeling undervalued, blamed or shamed.
- Designated staff only spaces, which are specifically designed to support the release of natural anti-stress, pro-social neurochemicals (opioids and oxytocin)

Reflect

- Staff educated in the art of good listening, dialogue, empathy and understanding (instead of asking lots of questions/giving lectures)
- The provision of skills and resources to support parents and staff to have meaningful empathic conversations with vulnerable children who want to talk

about their lives in order to empower children to better manage their home situations and life in general.

- Within the context of an established and trusted relationship with a member of staff (working alliance) children are to be provided with the means to symbolise painful life experiences through images rather than solely everyday words, should they wish to do so, as a key part of 'working through' and memory re-consolidation. To this end, there is the provision of different modes of expression for children eg art/play/drama/music/sand play/emotion worksheets.)
- PSHE (personal, social and health education) informed by current research (psychology and neuroscience) on mental health, mental ill health (full range of specific conditions) relationship health: family, parenting, intimate relationships, and tools for how to do life well. Curriculum content to enable children to make informed choices about how they relate to others and how they choose to treat their brains, bodies and minds, now and in to the future.
- Staff trained to help children move from 'behaving' their trauma/painful life experiences through empathic conversation in order to address negative self-referencing and help them to develop coherent narratives about their lives.
- A behaviour policy, which is based not on punishment, sanctions and isolation, but one that models enquiry, resolution and interactive repair. (eg restorative conversations)

(Please note that the term children refers to both children and teenagers)