

# An Introduction to Relational Support Plans

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# Key questions for this session

Why Relational Support Plans?

1



What is a relational support plan?

2

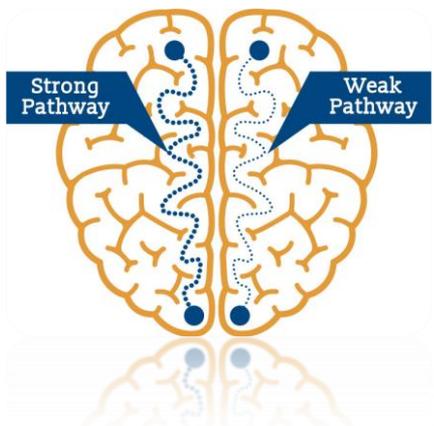
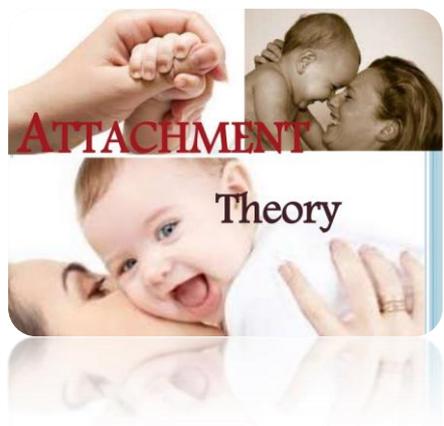


What does it look like in schools?

3



# 1 Why prioritise relational support?



What Zone Are You In?

Blue	Green	Yellow	Red
Sick Sad Tired Bored Moving Slowly	Happy Calm Feeling Okay Focused Ready to Learn	Frustrated Worried Silly/Wiggly Excited Loss of Some Control	Mad/Angry Mean Yelling/Hitting Disgusted Out of Control



# Attachment



John Bowlby, Margaret Ainsworth, Pat Crittenden

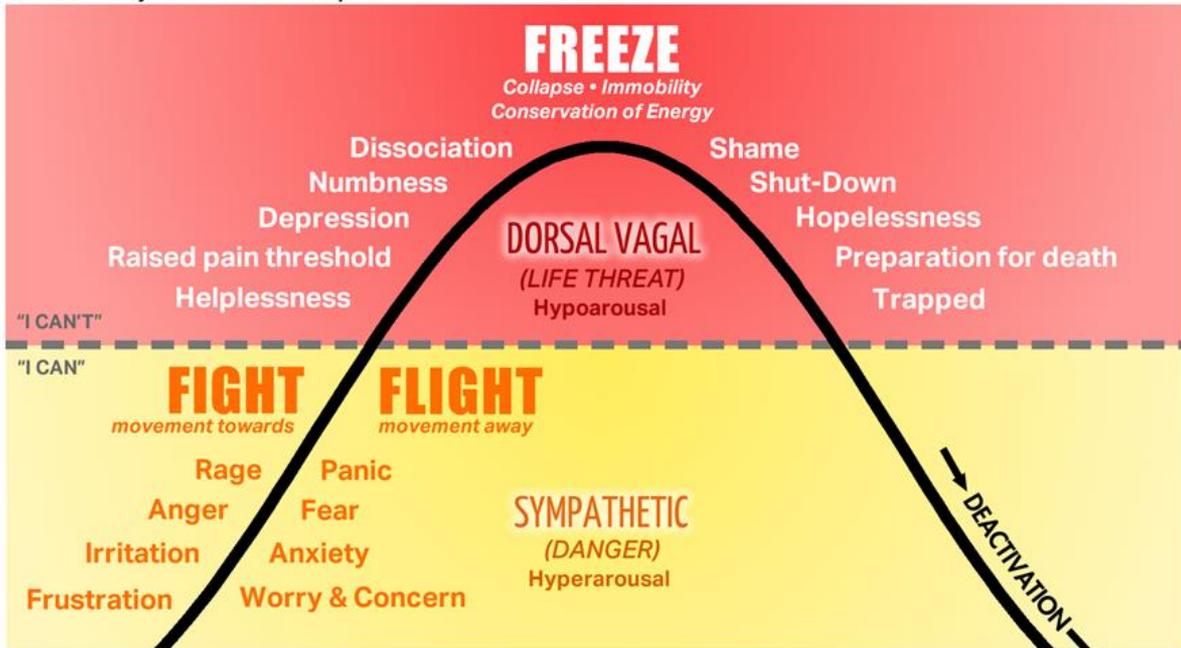
- Early relationships provide a model for future relationships
- A system to manage fear and danger to provide safety and security
- Poor attachment can lead to difficulties in relationships
- There is hope that Relational Support Plans can change a child's default relational model.

# Baby has a full conversation with daddy (2019)



# POLYVAGAL CHART

The nervous system with a neuroception of threat:



The nervous system with a neuroception of safety:



VVC is the beginning and end of stress response.  
When VVC is dominant, SNS and DVC are in transient blends which promote healthy physiological functioning.

## PARASYMPATHETIC NERVOUS SYSTEM

DORSAL VAGAL COMPLEX

### Increases

Fuel storage & insulin activity • Immobilization behavior (with fear)  
Endorphins that help numb and raise the pain threshold  
Conservation of metabolic resources

### Decreases

Heart Rate • Blood Pressure • Temperature • Muscle Tone  
Facial Expressions & Eye Contact • Depth of Breath • Social Behavior  
Attunement to Human Voice • Sexual Responses • Immune Response

## SYMPATHETIC NERVOUS SYSTEM

### Increases

Blood Pressure • Heart Rate • Fuel Availability • Adrenaline  
Oxygen Circulation to Vital Organs • Blood Clotting • Pupil Size  
Dilation of Bronchi • Defensive Responses

### Decreases

Fuel Storage • Insulin Activity • Digestion • Salivation  
Relational Ability • Immune Response

## PARASYMPATHETIC NERVOUS SYSTEM

VENTRAL VAGAL COMPLEX

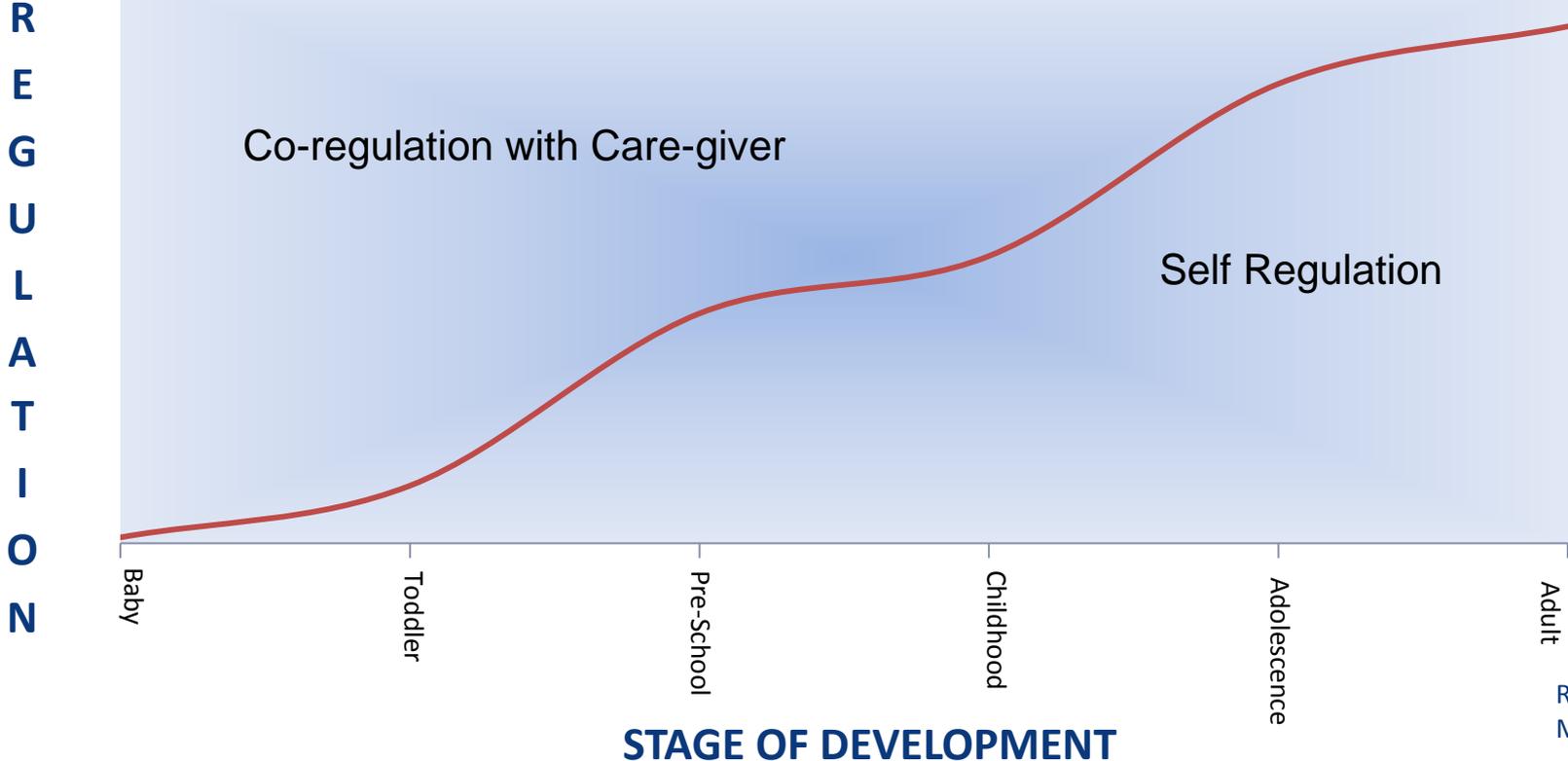
### Increases

Digestion • Intestinal Motility • Resistance to Infection  
Immune Response • Rest and Recuperation • Health & Vitality  
Circulation to non-vital organs (skin, extremities)  
Oxytocin (neuromodulator involved in social bonds that allows immobility without fear) • Ability to Relate and Connect  
Movement in eyes and head turning • Prosody in voice • Breath

### Decreases

Defensive Responses

# BALANCE OF SELF-REGULATION & CO-REGULATION



Rosanbalm, & Murray, (2017)

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Respect



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# Stage Not Age



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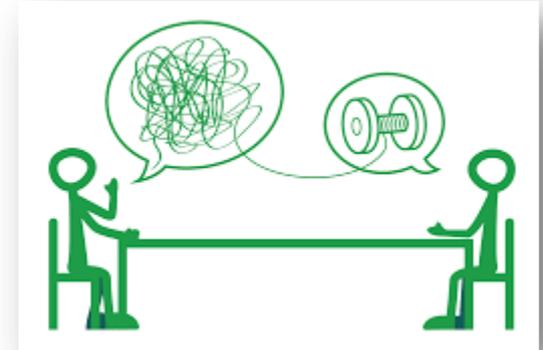
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# Co-regulation involves three types of caregiver support:



Developing self-regulation requires predictable, responsive, and supportive caregivers and environments



“...growing evidence that self-regulation plays an important foundational role in development and maintenance of physical health and well-being in childhood and across the lifespan...associated with positive outcomes on a range of attributes, including ...healthy behaviour, physical health, and mental health”

(Pandey et al 2018)



# Belonging Vs Rejection

*“Most children fail in school not because they lack the necessary cognitive skills, but because they feel detached, alienated, and isolated from others and from the educational process...”*

Beck & Malley (1998)



# Belonging Vs Disconnection

*“Belonging is not just about membership, rights, and duties... Nor can it be reduced to identities and identifications, which are about individual and collective narratives of self and other, presentation and labelling, myths of origin and destiny.”*

(Nira Yuval-Davis, 2004. p.215).

**Belonging is a deep emotional need of people**



# Comfort Break



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# Reflective Exercise



Think about a child that you have worked with who shows challenging behaviours.

1. What are the behaviours that you see?
2. Using the theories explored so far, what early experiences are likely to explain their behaviours?





# Children communicate fear by...



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# Communicate protection by...



WARM	THE FOUR F's
W - WHAT happened?	F - 'FESS up
A - Who's AFFECTED?	F - Who's AFFECTED?
R - How can we REPAIR?	F - How can we FIX this?
M - MAKE a follow-up plan	F - FOLLOW up plan



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# 6 Children communicate insecurity by...



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# Communicate understanding and care by...



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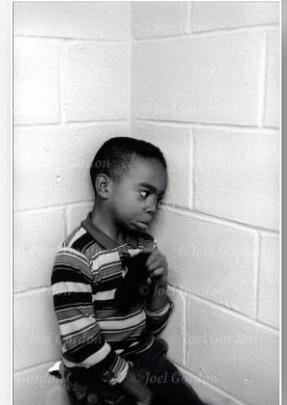
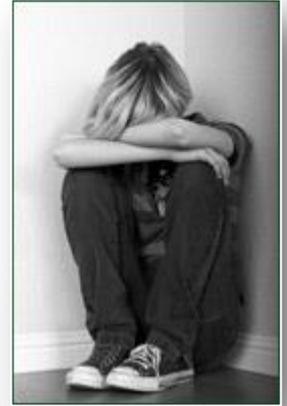


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# Children withdraw by...



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# Reconnect with children by...



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*“The relationship you develop with the child has the potential to enable them, not only to survive or cope at school but to engage with everything the school experience has to offer, to enjoy their experience and to flourish”*

Dunnett & Jones (2017)



# 2 What is a Relational Support Plan?

Protection 

Connection 

Understanding 

Care 

(Babcock/Devon - Catherine Dunnnett and Matt Jones)



# Protection

- Provide safety and security
- Be predictable, reliable, trustworthy
- Give structure, routines, boundaries and containment
- Consider how the environment can help children feel safe
- Plan for situations which may be triggers for defence mechanisms





# Connection

- Be physically and emotionally available
- Be responsive, expressive and interactive
- Do things together
- Attune and connect physically and emotionally
- Show them you like and are interested in them
- Have fun, play, enjoy it



**P** - Playfulness  
**A** - Acceptance  
**C** - Curiosity  
**E** - Empathy

(Bomber & Hughes, 2013)



# Understanding

- Be curious about thoughts, feelings and behaviours
- Think for them – try to work it out
- Accept their feelings and experience, empathise, wonder aloud, validate, show them you get it
- Help them to process feelings
- Help others to understand them



<b>W</b>	I Wonder
<b>I</b>	I Imagine
<b>N</b>	I Notice
<b>E</b>	Empathy



# Care

- Be loving and compassionate
- Show them you care about them
- Look after basic needs
- Soothe and comfort them
- Hold them in mind



# Break-out Activity

## Identifying and responding to needs

- Thinking of your child...
- Discuss what you think their underlying feelings might be?
- What are their needs in relation to protection, connection, understanding and care?
- What are the implications for key staff and wider support in school?
- What are the key things staff should know?
- How could you use Relational Support Plans in your school?



# 3 Case example – Introducing Lucy



# Case example - Lucy



## Typical behaviours displayed during the school day

- Not staying in her seat or carpet space
- Calls out / Answers back
- Avoids learning activities
- Uses distraction to avoid tasks
- Started wetting herself daily
- When playing with a small number of children she will initiate games but then wants to take control of the game.
- Finds transitions very challenging (e.g. break, lunch assembly, particularly morning and end of day)
- Finds changes in routine distressing
- Pushes in the line if not at the front
- Plans her escapes throughout the day
- Hides
- Climbs on tables, window sills, on the peg troughs, dinner hatch.
- Attempts to climb through windows
- Running into areas of school that she shouldn't be in during learning time and lunchtimes
- Pushes the external door release when her aim is to go home.



# Case example - Lucy



## Main barriers to learning

- Lucy wants to do what she wants in the moment, so if this involves not wanting to learn, she won't do so.
- Lucy struggles to work independent of an adult; she will not produce any work, even when very clear and explicit expectations are made (with scaffolds, supports and visuals)
- She is not always motivated by rewards, but will tidy away when the consequence is no further Continuous Provision or something that she wants to do.
- Low self esteem with her ability to write.
- Easily distracted when in any classroom environment, whether it be busy and noisy or calm and quiet



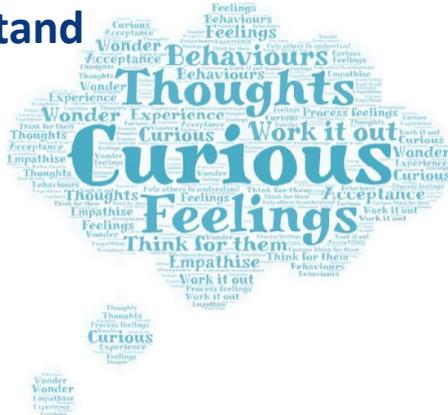
# 1. Protect



# 2. Connect



# 3. Understand



# 4. Care



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# Useful documents

**Babcock** a joint venture with **Devon County Council**

Planning for Success: A Relational Support Plan

Name of Pupil:	School:	Date:
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Who is best placed to be the significant adult?

Does an adult need to be available through the day? Is more than one adult needed? Who will be in the core team?

The Relational Support Plan provides a framework for exploring the needs of vulnerable children and young people, including those in care. It draws upon evidence showing that feeling secure and having positive relationships are essential to wellbeing, behaviour and learning.

*Early Development and Life Experiences*

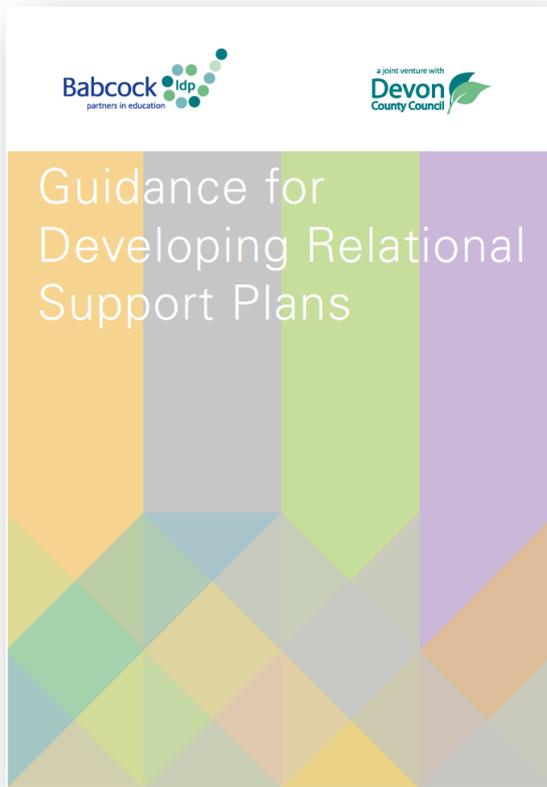
The student's behaviour and communication will have been influenced by their life experiences. It is important to remember that young people will present in different ways – some may show challenging behaviours and have a need to control, others can be overly-compliant, attempt to avoid interaction and appear withdrawn.

In the next section, consider the key prompts for discussion and note down actions under the 4 headings: Protection, Connection, Understanding and Care.

The significant adult/adults

Who is best placed to be the significant adult?

Does the child need a team of adults supporting them with someone available to them at all times throughout the day? If so, who will form this team?



**Guidance for Developing Relational Support Plans**

Guide to supporting regulation through responsive co-regulation plans.

State of Regulation	Potential displayed behaviours	Responsive co-regulation
<b>Calm</b> Safe/socially engaged	Steady heart/breathing rate. Calm state of arousal. Open to social engagement. Expressive facial expression and voice prosody. Able to listen, process language and engage in thinking to learn.	Maximise expressive social engagement. Fully engage and connect using the face, voice, movement. Encourage listening and expressive responses. Engage thinking skills to reflect and make connections. Introduce gentle challenge through play/activity.
<b>Mild Stress</b> Alert/Agitated/Withdrawn	Slightly raised heart/breathing rate. Signs of agitation, frustration, anxiety. Raised hypervigilance. Lack of focus, easily distracted. Increased mobilisation. Early signs of needing to take control or helplessness.	Connect through eye contact, movement and facial expression. Express calmness through storytelling prosody and open facial expression. Attune to mood, intensity and energy of the child. Respond by being more animated to attune to agitation, increase intensity to attune to anger, be gentle and delicate to attune to sadness. Respond empathically and validate feelings. Use calming, soothing and regulatory activities.
<b>Dysregulated</b> Mobilised	High levels of arousal/distress. Hyper vigilant. Difficulty listening and focusing. Mobilised – fidgeting, jumping, running, climbing etc. Raised voice with lack of prosody. Decreased expressivity. Threatening behaviour. Oppositional behaviour.	Reduce social demands whilst remaining present. Provide individual attention. Convey adult containment. Let them know you are able to 'hold' their dysregulation by remaining regulated. Convey your calm and regulated state by being confident and contained. Use quiet, calm sounds and tones which are expressive and confident. Reduce language, give short clear directions. Avoid questions and choices. Use predictable routine. Reduce sensory input, lights, noise. Use sensory soothing.
<b>Dysregulated</b> Immobilsed	Lowered heart/breathing rate. Reduced energy. Shuts off from surroundings/dissociates. Depressed state. Immobilised/frozen. May feel faint.	Gentle, soft and delicate manner of coming close, making them aware of your presence and support. Use comforting and predictable voice. Use invited touch to soothe. Singing, humming, music. Use sensory soothing. Calm and gentle reassurance.
<b>Crisis</b>	The child's behaviour means that they or other people are not safe.	An individualised plan of action which outlines action to be taken in the event of unsafe behaviour. This may include advice from outside agencies. The plan should be shared with the child and include their views as to what helps and with all staff working with the child. Roles and responsibilities should be clear. If the plan includes physical intervention staff should have had the appropriate training. Devon LA recommends PIPS training. Adults need to provide high levels of containment through their way of being – having a plan can help.

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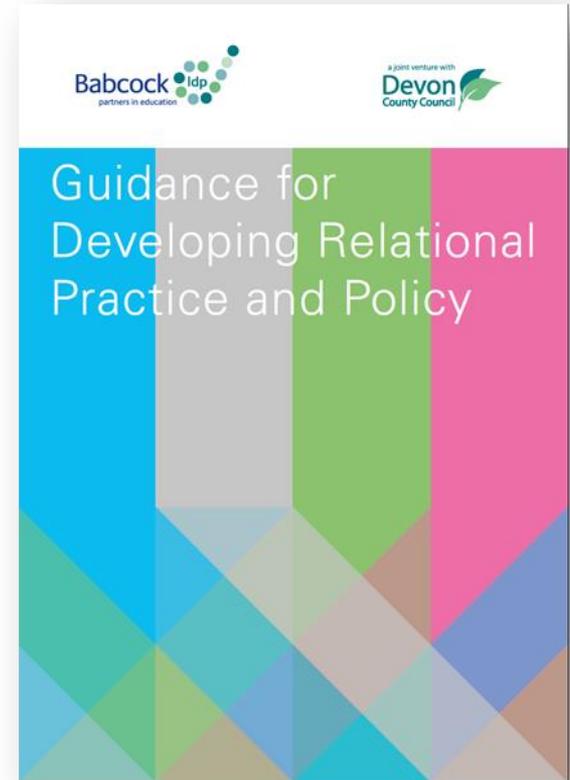


# Next steps...

- Identify students who would benefit from planned relational support



- Explore how these principles can be used throughout your school community as a Whole School Approach.



“

Schools and Colleges  
truly can be... guiding lighthouses and safe  
havens in a sea of uncertainty

”

With acknowledgement to  
Catherine Dunnnett and Matt Jones, Devon

*(Whole School SEND 2020)*

## Further support

- **Education Support** – UK charity dedicated to supporting the mental health and wellbeing of education staff. Contact 08000 562 561 (24 hours a day, 7 days a week)
- **CALM** - Confidential helpline providing a listening, information and support service for men. Contact 0800 58 58 58 (17:00 – 00:00 7 days a week)
- **Mind Infoline** – Offering advice and support information on a range of topics including, types of mental health problem, where to get help, medication and alternative treatments and advocacy. Contact 0300 123 3393 (09:00 – 18:00 Mon – Fri, except for bank holidays) **SMS** 86463
- **Papyrus HOPEline** – This is a specialist telephone service staffed by trained professionals who give non-judgmental support, practical advice and information to, children, teenagers and young people up to the age of 35 who are worried about how they are feeling and to anyone who is concerned about a young person. Contact 0800068 4141 (Mon – Fri 10:00 – 22:00, Weekends 14:00 – 22:00 and Bank holidays 14:00 – 17:00) Email [pat@papyrus-uk.org](mailto:pat@papyrus-uk.org) SMS 07786 209697
- **Samaritans** – A confidential support service for helping people to explore their options, understand their problems better, or just be there to listen. **Contact** 116 123 (24 hours a day 7 days a week) Email [jo@samaritans.org](mailto:jo@samaritans.org)
- **SANE** – SANE runs a national, out-of-hours mental health helpline offering specialist emotional support and information to anyone affected by mental illness, including family, friends and carers. Contact 0300 304 7000 (16:30 – 22:30, 7 days a week).

