



TRAUMA SENSITIVE SCHOOLS



Workbook



Introduction



Tier 1 Team Trauma Sensitive Schools Implementation Plan

School(s)/Division		Date	
Division Coaches		Division Coordinator	
		School Coaches	

Module		Action Items	By Whom	By When
1.1 and 1.2	Team Composition and Team Operating Procedures <ul style="list-style-type: none"> ○ Develop an action plan to address any changes in membership that you need to make ○ Develop action plan to include student and family voice ○ Do you need to revise your norms and operating procedures based on the care values? ○ Do you need to change any changes you may want to consider with your mission and vision statements 			
	Introduction <ul style="list-style-type: none"> ○ Use the formal definition of trauma to define the impact that events and experiences may have on the students and adults in the educational setting ○ Understand the impact of trauma ○ How to align trauma sensitive practices into a multi-tiered systems of support and begin action 			
1.10	Culture of Wellness <ul style="list-style-type: none"> ○ Understand the importance of a culture of wellness that supports self-care and collective care ○ Develop a system to support a culture of wellness 			

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	<ul style="list-style-type: none"> ○ Create an action plan on how to introduce self-care and collective care to teams and colleagues 			
1.11	<p>Student/Family/Community Engagement:</p> <ul style="list-style-type: none"> ○ Explore current approaches to engaging families in schools, particularly those families impacted by trauma ○ Understand why family and community engagement is key to developing and fostering trauma-sensitive schools within a multi-tiered systems of supports ○ Identify strategies for implementation of empowering, trauma-sensitive strategies to foster positive school – family – community partnership ○ Create a plan to include and engage families impacted by trauma and traumatic stress within the VTSS framework and measure it 			
1.3 1.8	<p>Behavior Expectations & Classroom Procedures</p> <ul style="list-style-type: none"> ○ Understand social emotional competencies and how to embed those within the matrix. ○ Recognize the importance of relationships for students who have experienced trauma and identify strategies to connect. ○ Explore key classroom practices and understand how the practices support students impacted by trauma 			
1.4	<p>Teaching Expectations</p> <ul style="list-style-type: none"> ○ Understand and explain the rationale for teaching social-emotional competencies using a trauma sensitive approach ○ Explore and apply methods for teaching SEL 			

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	<ul style="list-style-type: none"> ○ Review lesson plans inclusive of social emotional competencies to teach your schoolwide expectations and non-classroom specific behaviors and procedures ○ Plan and schedule for lessons across school-wide, non-classroom and classroom settings ○ Discuss which data that will be used to monitor progress when teaching the lessons 			
1.9	<p>Feedback and Acknowledgement</p> <ul style="list-style-type: none"> ○ Understand the benefits of behavior specific praise, affirmations, and mantras ○ Understand why praise does not work for some students ○ Action Plan: School-Wide Acknowledgement Matrix to include acknowledging staff and students 			
1.5	<p>Problem Behavior Definitions</p> <p>Understand components of behavior to include:</p> <ul style="list-style-type: none"> ○ ABC's (antecedent, behavior, consequence) ○ Setting events ○ Function ○ How these components can manifest with 			
1.6	<p>Discipline Policies</p> <ul style="list-style-type: none"> ○ Define and identify personal vulnerable decision points in order to effectively respond ○ Incorporate a trauma sensitive lens into responses to interfering behavior 			

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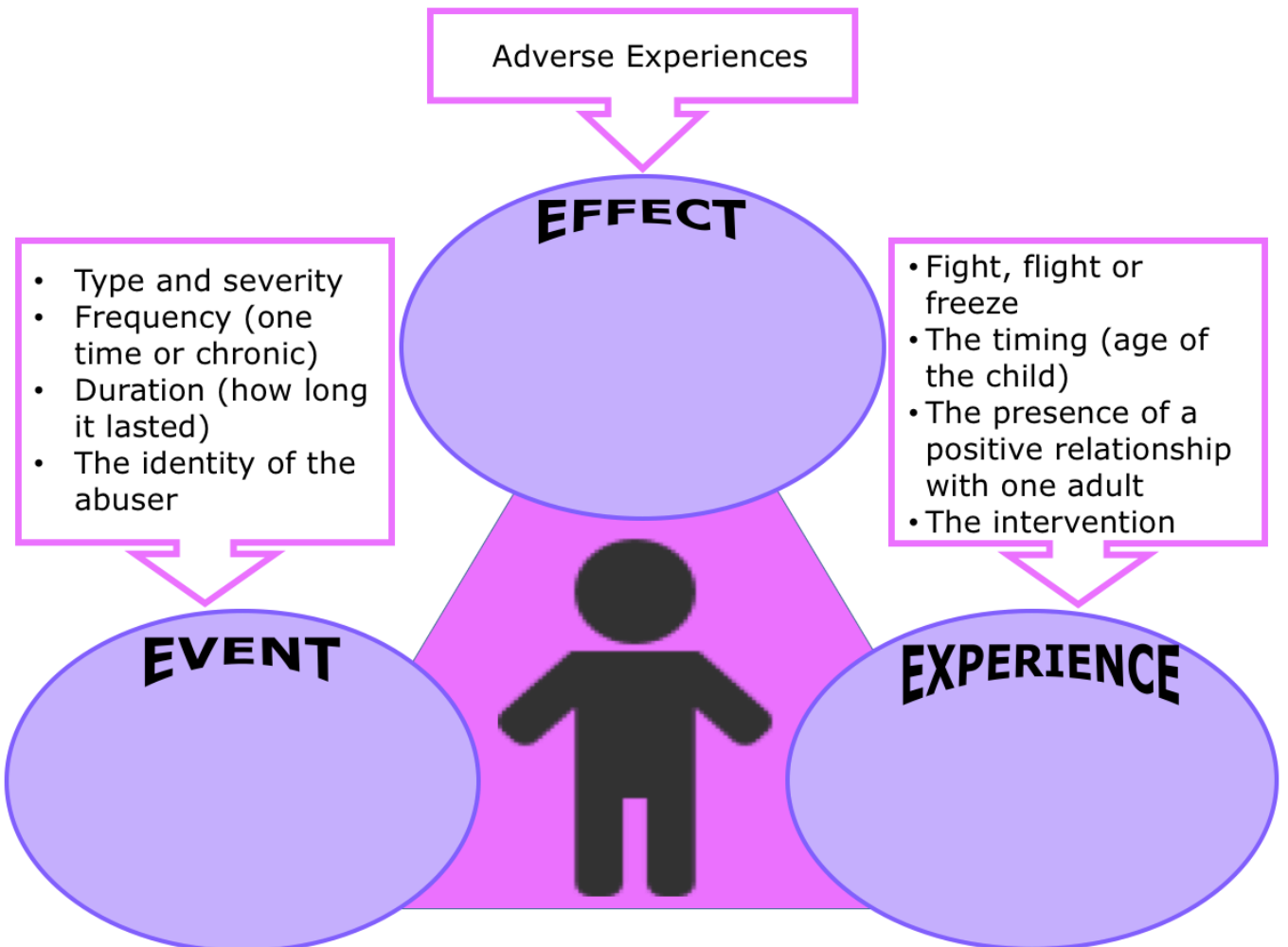
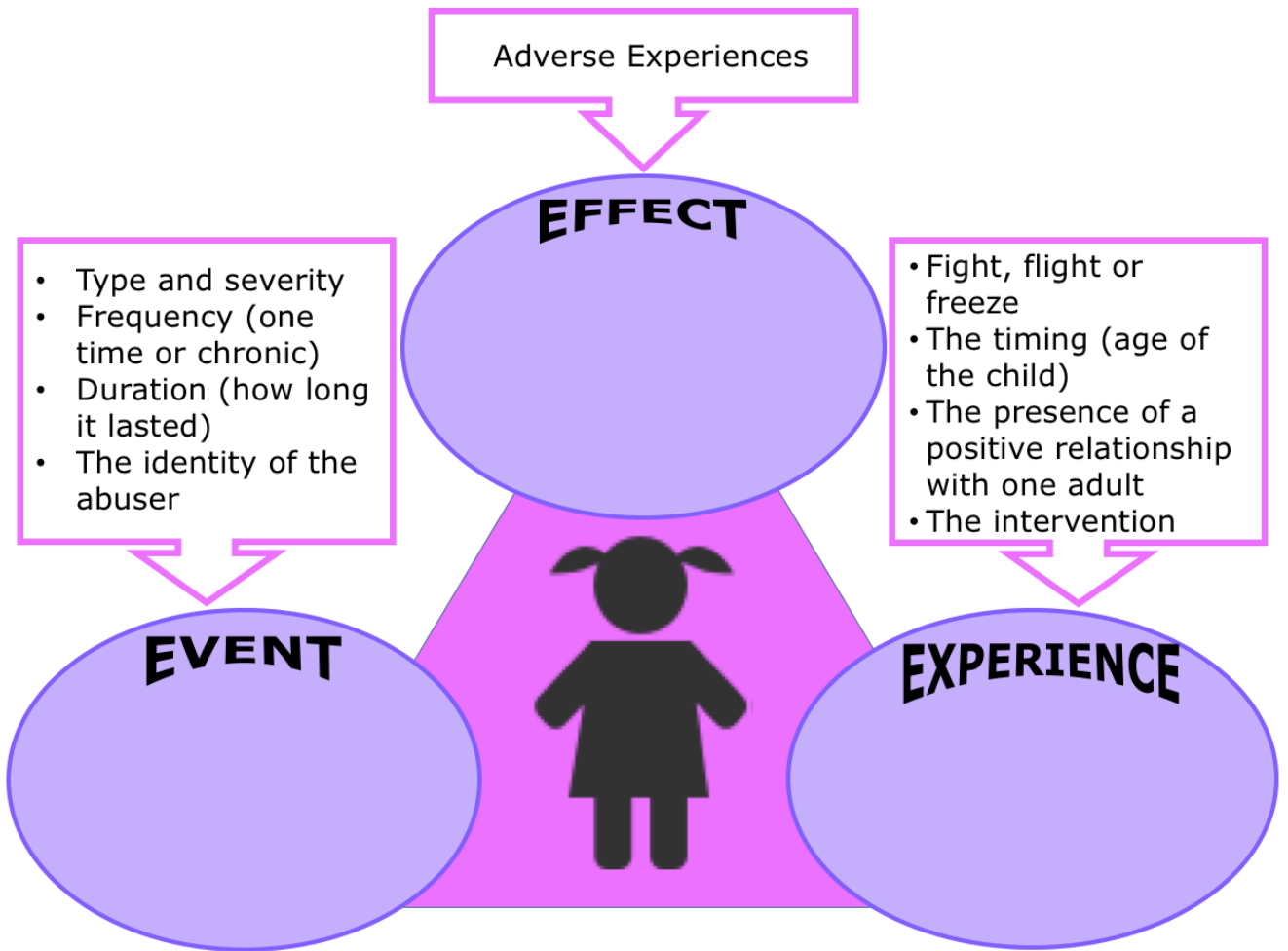
1.7, Wrap Up	Professional Development & Wrap-up <ul style="list-style-type: none"> ○ Apply a trauma sensitive lens to our system of professional learning ○ Develop a outline of a professional learning plan ○ Understand the components of resilience & hope ○ Learn the importance of relationships in building resilience to mitigate the effects of adverse childhood experiences 			
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VIGNETTE: Johnny and Josie

Johnny and Josie are siblings and attend a local elementary school together. Their parents often argue, and some nights the arguing gets out of control to the point of domestic violence. One night, the parents began to argue, and the father became physically aggressive. As he became more violent, they feared for their mother's life. As the father began to scream at Johnny and Josie, they feared for their lives, too. Johnny decided to run to his grandmother's house who lives next door. Their grandmother has told them to always come to her home if they needed help. She has a strong relationship with her grandchildren. He fled the situation to be safe and get help for his mother. Josie, did not like to leave. She was always the helper, and she decided to stay in the current situation, as she believed she may eventually be able to help her mother and save her life. In that moment, Josie was unable to move (freeze) because she became overwhelmed with fear. The domestic violence continued to occur in which Johnny would always escape to the refuge of his Grandmother's and Josie would stay at the house, believing she could help but would freeze in her response to the traumatic events.

IMPACT VS. EXPOSURE

Directions: Fill in the bubbles with the information that will be presented to you regarding the brother and sister involved in an adverse experience.



Common Responses to High Stress and/or Trauma

Self Test: Put a check beside the responses that describe you.

After experiencing a traumatic event, or in response to cumulative stressors, it is common -- and normal -- to experience a wide range of emotional, cognitive, physical, and spiritual reactions. These responses may appear immediately after the event(s) *or some time later*. **These are normal reactions to abnormal situations.** The following are some of the most common responses:

Emotional	Cognitive (Thinking)	Behavioral (doing)	Physical	Spiritual	Societal Effects
<ul style="list-style-type: none"> • Fear • Terror • Anxiety • Panic / Paranoia • Anger / Rage • Apprehension • Depression • Vengefulness • Shame • Guilt • Sadness • Grief • Emotional shock • Emotional outbursts • Loss of emotional control • Feelings of hopelessness or helplessness • Feeling numb • Irritability • COURAGE 	<ul style="list-style-type: none"> • Confusion • Nightmares • Hyper-vigilance • Suspiciousness • Flashbacks • Overly sensitive • Difficulty making decisions, spacey • Poor concentration • Memory problems • Shortened attention span • Critical, blaming • Poor problem solving and abstract thinking • Preoccupied with the event(s): inability to recall all or parts of the event • Disoriented to person, place or time • Heightened or lowered awareness 	<ul style="list-style-type: none"> • Withdrawal • Self harm • Overwork • Antisocial acts • Inability to rest, pacing • Hyper-alertness • Erratic movement • Suspiciousness • Emotional outbursts • Change in speech patterns • Increased alcohol/drug use • Avoiding places related to the event • Difficulty writing or talking • Impaired sexual functioning • Loss or increase of appetite • Feeling clumsy • Domestic Violence • CARING FOR OTHERS 	<ul style="list-style-type: none"> • Thirst/dry mouth • Twitches • Vomiting • Weakness • Chest pain • High BP • Rapid heart rate • Muscle tremors • Visual difficulties • Nausea/diarrhea • Shallow breathing • Dizziness or faintness • Chills or sweating • Easily startled • Fatigue • Changes in appetite • Sleep disturbances • Headaches • Grinding teeth • Inability to rest 	<ul style="list-style-type: none"> • Emptiness • Loss of meaning • Doubt • Feeling unforgiven • Martyrdom, feeling punished • Looking for magic • Loss of direction • Cynicism • Apathy • Needing to “prove” self • Alienated • Mistrust • Crisis of faith • GROWTH 	<ul style="list-style-type: none"> • Apathy • Silence/impaired communication • Aggressive behavior • Isolation • Lack of empathy • Denial • Low energy/low productivity • Inflexibility • High rates of alcoholism, drug abuse • High rates of (untreated) mental health issues (depression, sexual dysfunction, etc) • High rates of stress-related health issues (and medication use) • Intergenerational transmission of pain • SPIRITUAL GROWTH, WISDOM

STRESS & EARLY BRAIN GROWTH

Understanding Adverse Childhood Experiences (ACEs)

What are ACEs?

ACEs are serious childhood traumas -- a list is shown below -- that result in toxic stress that can harm a child's brain. This toxic stress may prevent child from learning, from playing in a healthy way with other children, and can result in long-term health problems.

Adverse Childhood Experiences can include:

1. Emotional abuse
2. Physical abuse
3. Sexual abuse
4. Emotional neglect
5. Physical neglect
6. Mother treated violently
7. Household substance abuse
8. Household mental illness
9. Parental separation or divorce
10. Incarcerated household member
11. Bullying (by another child or adult)
12. Witnessing violence outside the home
13. Witness a brother or sister being abused
14. Racism, sexism, or any other form of discrimination
15. Being homeless
16. Natural disasters and war

Exposure to childhood ACEs can increase the risk of:

- Adolescent pregnancy
- Alcoholism and alcohol abuse
- Depression
- Illicit drug use
- Heart disease
- Liver disease
- Multiple sexual partners
- Intimate partner violence
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies

How do ACEs affect health?

Through stress. Frequent or prolonged exposure to ACEs can create toxic stress which can damage the developing brain of a child and affect overall health.

Reduces the ability to respond, learn, or figure things out, which can result in problems in school.

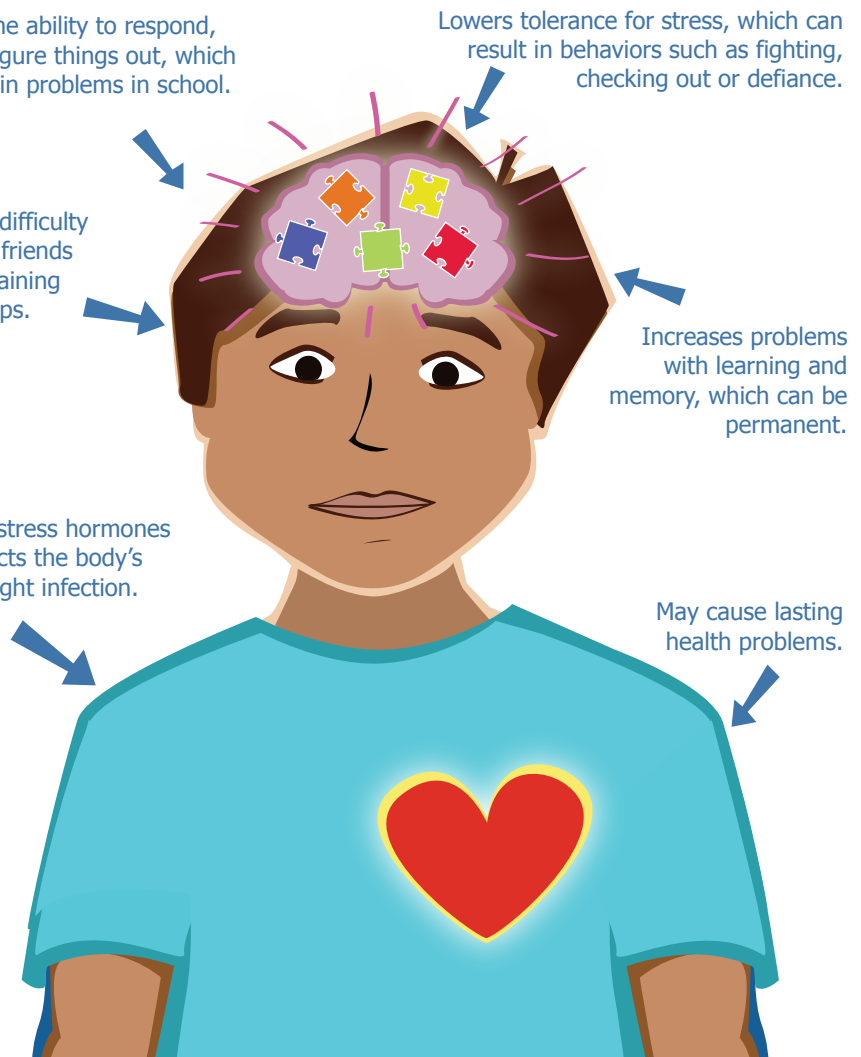
Lowers tolerance for stress, which can result in behaviors such as fighting, checking out or defiance.

Increases difficulty in making friends and maintaining relationships.

Increases problems with learning and memory, which can be permanent.

Increases stress hormones which affects the body's ability to fight infection.

May cause lasting health problems.



A Survival Mode Response to toxic stress increases a child's heart rate, blood pressure, breathing and muscle tension. Their thinking brain is knocked off-line. Self-protection is their priority. In other words:
"I can't hear you! I can't respond to you! I am just trying to be safe!"

The good news is resilience can bring back health and hope!

What is Resilience?

Resilience is the ability to return to being healthy and hopeful after bad things happen. Research shows that if parents provide a safe environment for their children and teach them how to be resilient, that helps reduce the effects of ACEs.

Resilience trumps ACEs!

Parents, teachers and caregivers can help children by:

- Gaining an understanding of ACEs
- Helping children identify feelings and manage emotions
- Creating safe physical and emotional environments at home, in school, and in neighborhoods

What does resilience look like?

1. Having resilient parents

Parents who know how to solve problems, who have healthy relationships with other adults, and who build healthy relationships with their children.

2. Building attachment and nurturing relationships

Adults who listen and respond patiently to a child in a supportive way, and pay attention to a child's physical and emotional needs.

3. Building social connections

Having family, friends and/or neighbors who support, help and listen to children.

4. Meeting basic needs

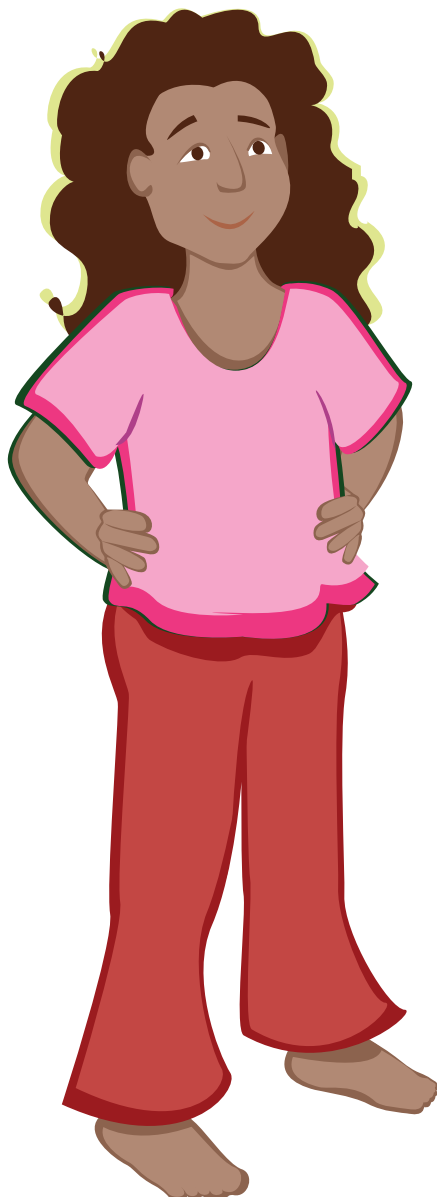
Providing children with safe housing, nutritious food, appropriate clothing, and access to health care and good education.

5. Learning about parenting and how children grow

Understanding how parents can help their children grow in a healthy way, and what to expect from children as they grow.

6. Building social and emotional skills

Helping children interact in a healthy way with others, manage their emotions and communicate their feelings and needs.



Resources:

ACES 101

<http://acestoohigh.com/aces-101/>

Triple-P Parenting

www.triplep-parenting.net/glo-en/home/

Resilience Trumps ACEs

www.resiliencetrumpsACEs.com

CDC-Kaiser Adverse Childhood Experiences Study

www.cdc.gov/violenceprevention/acestudy/

Zero to Three Guides for Parents

<http://www.zerotothree.org/about-us/areas-of-expertise/free-parent-brochures-and-guides/>

Thanks to the people in the Community & Family Services Division at the Spokane (WA) Regional Health District for developing this handout for parents in Washington State, and sharing it with others around the world.

Worldview Observations

CARE VALUE	DESCRIPTION	OPTIMAL DEVELOPMENT	DEVELOPMENTAL TRAUMA	CONSIDERATIONS
SAFETY	This includes creating spaces where people feel culturally, emotionally, and physically safe as well as an awareness of individual's discomfort or unease.	<i>Belief in a predictable and benevolent world/ generally good things will happen to me.</i>	<i>The world is unsafe/ bad things will happen and they are usually my fault.</i>	<ul style="list-style-type: none"> • Are our actions as well as our environments predictable?
EMPOWERMENT	This includes the recognition of an individual's strengths. These strengths are built on and validated.	<i>Feeling of positive self-worth/ others will see my strengths.</i>	<i>Assumption that others will not like me.</i>	<ul style="list-style-type: none"> • To what extent do we provide opportunities for students and school staff to build skills and practice them in the context in which they will occur?
COLLABORATION	This includes the recognition that collaboration happens in relationships and partnerships with shared decision-making.	<i>Optimism about the future.</i>	<i>Fear and pessimism about the future.</i>	<ul style="list-style-type: none"> • Do we use student voice to solve our problems: student led, vocabulary/comprehension/native language? • Do our solutions to problems involve ALL of the individuals that will be impacted: the school staff, the student, the family, the community?
TRUST	This includes the recognition of the need for an approach that honors the individual's dignity.	<i>Nurturing and stable attachments with adults.</i>	<i>Basic mistrust of adults/ inability to depend on others.</i>	<ul style="list-style-type: none"> • Even when things are not going well, do our actions seek to keep the child, and in many cases our colleagues working with these students, safe and treat them with dignity and respect?
CHOICE	This includes the meaningful sharing of power and decision-making. Transparent operations and decisions maintain trust. Ensure trustworthiness through clarity and consistency in all actions.	<i>Feelings that I can have a positive impact on the world.</i>	<i>Feelings of hopelessness and lack of control.</i>	<ul style="list-style-type: none"> • Do we embed choice whenever we can? • Even when more intense and challenging behavior occurs, do we still encourage choice versus making decisions <i>for</i> the child?

Implementation Activity: *Using the chart provided on the opposite page, this activity is designed to help educators see the school environment through the worldview of a student who has experienced trauma.*

Directions:

1. Experience a typical school day from the vantage point of a student who sees the world as a dangerous place, where people cannot be trusted, and you are not safe.
2. What do you notice in each of the environments listed below that confirms your belief?
 - a. **Observation Area:** Take notes on what you may observe in these areas.
 - b. **Sample Questions:** These are provided, but are not meant to be the only questions that may be made based on experiences in the areas of observation.
 - c. **Experiences:** What may occur at school that may confirm a student’s negative worldview?
 - d. **Care Values:** How may Care Values contradict negative worldviews to lead to optimal development of the student as reflected in the chart provided on the first page?
3. Finally, on the last page you may use the additional cells to add observation areas not reflected in this activity.

Observation Area	Sample questions	Experiences	Care Values
MORNING (Transition to School)	What experiences do you have on the way to school?		
	What do you see in your neighborhood?		
	How do you see adults treating each other?		
	How do your peers interact?		

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 Created in collaboration with Sara Daniel, SaintA, and Pam Black, Trauma Sensitive Education, LLC

Observation Area	Sample questions	Experiences	Care Values
	How do you arrive?		
ARRIVAL AT SCHOOL	How do enter the school building?		
	Is there order or chaos?		
	What is the noise level?		
	How predictable are the events that happen (same every day)?		
	Who first interacts with you each day?		
	How do they interact?		
	Does this change if you are late?		
CLASSROOM	What is the first thing that happens when you enter the classroom?		

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Observation Area	Sample questions	Experiences	Care Values
	What are the routines of the classroom?		
	Is there a sense of community in the classroom (everyone belongs)?		
	How is behavior corrected?		
	How are your learning needs met?		
	What is the sensory environment of the room (visually, auditory, touch/space, opportunity for movement)?		
	What else do you notice?		
LUNCHROOM	What happens in the lunchroom?		
	What is the sensory environment?		

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Observation Area	Sample questions	Experiences	Care Values
	What happens if you do not have a lunch or money for lunch?		
	How is behavior corrected?		
	How do you know where to sit?		
Transitions between Activities/ Class	Are transitions predictable?		
	Are transitions foreshadowed?		
	How are changes in routine supported?		
Playground/ Recess (less structured times)	How do peers determine recess activities?		
	Are all students included?		
	What are the potential areas of threat or unpredictability?		

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Observation Area	Sample questions	Experiences	Care Values
	How do students get help?		
Behavioral Supports	How is behavior reinforced and supported?		
	Is this the same throughout all school environments?		
	How are consequences used and with which students?		
End of Day	How does the day end?		
	How do we say goodbye?		
	How do we predict what will occur the next day?		
Observation Area			

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Trauma-Sensitive School Checklist

Lesley University
Center for Special Education

Trauma and Learning Policy Initiative
of Massachusetts Advocates for Children
and the Legal Services Center of Harvard Law School

This checklist is organized by five components involved in creating a trauma-sensitive school. Each component consists of several elements. Please assess your school on each element according to the following scale:

- 1** Element is **not at all** in place
- 2** Element is **partially** in place
- 3** Element is **mostly** in place
- 4** Element is **fully** in place

School _____ Date _____

Team Members (name and position)

A trauma-sensitive school is a safe and respectful environment that enables students to build caring relationships with adults and peers, self-regulate their emotions and behaviors, and succeed academically, while supporting their physical health and well-being.

School-wide Policies and Practices

1 **2** **3** **4**

1 **2** **3** **4**

1 **2** **3** **4**

1 **2** **3** **4**

1 **2** **3** **4**

1 **2** **3** **4**

1 **2** **3** **4**

1 **2** **3** **4**

- School contains predictable and safe environments (including classrooms, hallways, playgrounds, and school bus) that are attentive to transitions and sensory needs.
- Leadership (including principal and/or superintendent) develops and implements a trauma-sensitive action plan, identifies barriers to progress, and evaluates success.
- General and special educators consider the role that trauma may be playing in learning difficulties at school.
- Discipline policies balance accountability with an understanding of trauma.
- Support for staff is available on a regular basis, including supervision and/or consultation with a trauma expert, classroom observations, and opportunities for team work.
- Opportunities exist for confidential discussion about students.
- School participates in safety planning, including enforcement of court orders, transferring records safely, restricting access to student-record information, and sensitive handling of reports of suspected incidents of abuse or neglect.
- On-going professional development opportunities occur as determined by staff needs assessments.

Classroom Strategies and Techniques

1	2	3	4
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1	2	3	4
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1	2	3	4
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1	2	3	4
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1	2	3	4
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1	2	3	4
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1	2	3	4
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1	2	3	4
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- Expectations are communicated in clear, concise, and positive ways, and goals for achievement of students affected by traumatic experiences are consistent with the rest of the class.
- Students' strengths and interests are encouraged and incorporated.
- Activities are structured in predictable and emotionally safe ways.
- Opportunities exist for students to learn and practice regulation of emotions and modulation of behaviors.
- Classrooms employ positive supports for behavior.
- Information is presented and learning is assessed using multiple modes.
- Opportunities exist for learning how to interact effectively with others.
- Opportunities exist for learning how to plan and follow through on assignments.

Collaborations and Linkages with Mental Health

1	2	3	4
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1	2	3	4
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1	2	3	4
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1	2	3	4
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1	2	3	4
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- Policies describe how, when, and where to refer families for mental health supports; and staff actively facilitate and follow through in supporting families' access to trauma-competent mental health services.
- Access exists to trauma-competent services for prevention, early intervention, treatment, and crisis intervention.
- Protocols exist for helping students transition back to school from other placements.
- Mental health services are linguistically appropriate and culturally competent.
- Staff has regular opportunities for assistance from mental health providers in responding appropriately and confidentially to families.

Family Partnerships

1	2	3	4
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1	2	3	4
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1	2	3	4
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- Staff uses a repertoire of skills to actively engage and build positive relationships with families.
- Strategies to involve parents are tailored to meet individual family needs, and include flexibility in selecting times and places for meetings, availability of interpreters, and translated materials.
- All communications with and regarding families respect the bounds of confidentiality.

Community Linkages

1	2	3	4
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1	2	3	4
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- School develops and maintains ongoing partnerships with state human service agencies and with community-based agencies to facilitate access to resources.
- When possible, school and community agencies leverage funding to increase the array of supports available.

Culture of Wellness

Professional Quality of Life Scale (ProQOL)

Compassion Satisfaction and Compassion Fatigue (ProQOL) Version 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

1=Never

2=Rarely

3=Sometimes

4=Often

5=Very Often

- _____ 1. I am happy.
- _____ 2. I am preoccupied with more than one person I [help].
- _____ 3. I get satisfaction from being able to [help] people.
- _____ 4. I feel connected to others.
- _____ 5. I jump or am startled by unexpected sounds.
- _____ 6. I feel invigorated after working with those I [help].
- _____ 7. I find it difficult to separate my personal life from my life as a [helper].
- _____ 8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I [help].
- _____ 9. I think that I might have been affected by the traumatic stress of those I [help].
- _____ 10. I feel trapped by my job as a [helper].
- _____ 11. Because of my [helping], I have felt "on edge" about various things.
- _____ 12. I like my work as a [helper].
- _____ 13. I feel depressed because of the traumatic experiences of the people I [help].
- _____ 14. I feel as though I am experiencing the trauma of someone I have [helped].
- _____ 15. I have beliefs that sustain me.
- _____ 16. I am pleased with how I am able to keep up with [helping] techniques and protocols.
- _____ 17. I am the person I always wanted to be.
- _____ 18. My work makes me feel satisfied.
- _____ 19. I feel worn out because of my work as a [helper].
- _____ 20. I have happy thoughts and feelings about those I [help] and how I could help them.
- _____ 21. I feel overwhelmed because my case [work] load seems endless.
- _____ 22. I believe I can make a difference through my work.
- _____ 23. I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].
- _____ 24. I am proud of what I can do to [help].
- _____ 25. As a result of my [helping], I have intrusive, frightening thoughts.
- _____ 26. I feel "bogged down" by the system.
- _____ 27. I have thoughts that I am a "success" as a [helper].
- _____ 28. I can't recall important parts of my work with trauma victims.
- _____ 29. I am a very caring person.
- _____ 30. I am happy that I chose to do this work.

Workshops for the Helping Professions



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Transforming Compassion Fatigue into Compassion Satisfaction: Top 12 Self-Care Tips for Helpers

By Françoise Mathieu, M.Ed., CCC., Compassion Fatigue Specialist
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Dr Charles Figley, world renowned trauma expert and pioneer researcher in the field of helper burnout has called compassion fatigue a “disorder that affects those who do their work well” (1995) It is characterized by deep emotional and physical exhaustion, symptoms resembling depression and PTSD and by a shift in the helper’s sense of hope and optimism about the future and the value of their work. The level of compassion fatigue a helper experiences can ebb and flow from one day to the next, and even very healthy helpers with optimal life/work balance and self care strategies can experience a higher than normal level of compassion fatigue when they are overloaded, are working with a lot of traumatic content, or find their case load suddenly heavy with clients who are all chronically in crisis.

Compassion fatigue can strike the most caring and dedicated nurses, social workers, physicians and personal support workers alike. These changes can affect both their personal and professional lives with symptoms such as difficulty concentrating, intrusive imagery, loss of hope, exhaustion and irritability. It can also lead to profound shifts in the way helpers view the world and their loved ones. Additionally, helpers may become dispirited and increasingly cynical at work, they may make clinical errors, violate client boundaries, lose a respectful stance towards their clients and contribute to a toxic work environment.

It has been shown that, when we are suffering from compassion fatigue, we work more rather than less. What suffers is our health, our relationship with others, our personal lives and eventually our clients.

Assessing your own level of Compassion Fatigue

If would you like to assess your current level of Compassion Fatigue, visit Beth Stamm’s website: www.isu.edu/~bhstamm/tests.htm. Dr Stamm and Charles Figley have developed a self-test called the Proquol (professional quality of life) that can be accessed via this site. They not only look at Compassion Fatigue, they also assess

helpers' level of *compassion satisfaction* which is “about the pleasure you derive from being able to do your work well.” (Stamm, 1999) I have affectionately nicknamed this test “the thingy” as I find the name ProQuol rather unwieldy. If you are interested in obtaining a free self scoring excel version of this test, email our autoresponder: thingy@aweber.com and you will instantly receive the excel version, which is far easier to use than the original version.

Developing an Early Warning System for Yourself

I believe that compassion fatigue is a normal consequence of working in the helping field. The best strategy to address compassion fatigue is to develop excellent self care strategies, as well as an early warning system that lets you know that you are moving into the caution zone of Compassion Fatigue.

For the past 7 years, I have been training and assisting helpers in developing a better understanding of this complex occupational hazard. Here is a sample of my favourite self care strategies to transform compassion fatigue into compassion satisfaction.

Top 12 Self-Care Tips for Helpers

1. Take Stock-What's on your plate?

You can't aim to make changes and improvements without truly knowing where the problem areas are. Start by taking a nonjudgmental inventory of where things are at in your life. Make a list of all the demands on your time and energy (Work, Family, Home, Health, Volunteering, other). Try to make this list as detailed as you can. Eg: Under the Work category, list the main stressors you see (number of clients, or, amount of paperwork, or difficult boss, etc).

Once you have the list, take a look at it. What stands out? What factors are contributing to making your plate too full? Life situations or things you have taken on? What would you like to change most? If you are comfortable sharing this with a trusted friend or colleague, have a brainstorming discussion with them on strategies and new ideas. A counsellor or coach can also help you with this exercise. If you would like to read more on this, we highly recommend reading Cheryl Richardson's excellent book “**Take time for your life**” (1998).

2. Start a Self-Care Idea Collection

This can be fun. You can do it with friends and at work.

With friends: Over a glass of wine or a cappuccino, interview three friends on their favourite self-care strategies. Start making a list even if they are not ideas that you would do/are able to afford at the moment. Something new might emerge that you had not yet thought of.

At work: If you are doing this at work, you could even start a contest for the best self care idea of the week or have a “self care board” where people post their favourite ideas. You could have a “5 minutes of self care” at each staff meeting, where someone is in charge of bringing a new self care idea each week.

Once you have a really nice long list, pick three ideas that jump out at you. Make a commitment to implementing these in your life within the next month. Ask a friend/colleague if they would commit to supporting you (and you them) in maintaining your self care goals. This could mean that they go to the gym with you every Thursday, or that they email you at lunch to remind you to get out of your office. This is a wonderful way to stay on track and to validate your own experiences by sharing them.

3. Find time for yourself every day – Rebalance your workload

Do you work straight through lunch? Do you spend weekends running errands and catching up on your week without ever having 20 minutes to sit on the couch and do nothing? Can you think of simple ways to take mini breaks during a work day? This could simply be that you bring your favourite coffee cup to work, and have a ritual at lunch where you close your door (if you have a door) and listen to 10 minutes of your favourite music. A friend of mine has a nap on her yoga mat at work during her lunch break. What would work for you?

Not everyone has control over their caseload, but many of us do, providing we see all the clients that need to be seen. Would there be a way for you to rejig your load so that you don't see the most challenging clients all in a row?

Make sure you do one nourishing activity each day. This could be having a 30 minute bath with no one bothering you, going out to a movie, or it could simply mean taking 10 minutes during a quiet time to sit and relax. Don't wait until all the dishes are done and the counter is clean to take time off. Take it when you can, and make the most of it. Even small changes can make a difference in a busy helper's life.

4. Delegate - learn to ask for help at home and at work

Here is a home-based example: Have you ever taught a 4 year old how to make a sandwich? How long would it take you to make the same sandwich? Yes, you would likely make it in far less time and cause far less mess in the kitchen, but at the end of the day, that four year old will grow into a helpful 10 year old, and one day, you won't have to supervise the sandwich making anymore. Are there things that you are willing to let go of and let others do their own way? Don't expect others to read your mind: consider holding a regular family meeting to review the workload and discuss new options. Think of this: If you became ill and were in hospital for the next two weeks, who would look after things on the home front?

5. Have a transition from work to home

Do you have a transition time between work and home? Do you have a 20 minute walk home through a beautiful park or are you stuck in traffic for two hours? Do you walk in the door to kids fighting and hanging from the curtains or do you walk into a peaceful house? Do you have a transition process when you get home? Do you change clothes?

Helpers have told us that one of their best strategies involved a transition ritual of some kind: putting on cozy clothes when getting home and mindfully putting their work clothes “away” as in putting the day away as well, having a 10 minute quiet period to shift gears, going for a run. One workshop participant said that she had been really missing going bird watching, but that her current life with young children did not allow for this. She then told us that her new strategy would be the following: From now on, when she got home from work, instead of going into the house straight away, she would stay outside for an extra 10 minutes outside, watching her birdfeeders. Do you have a transition ritual?

6. Learn to say no (or yes) more often

Helpers are often attracted to the field because they are naturally giving to others, they may also have been raised in a family where they were expected to be the strong supportive one, the parental child etc.

Are you the person who ends up on all the committees at work? Are you on work-related boards? Do you volunteer in the helping field as well as work in it? Are you the crisis/support line to your friends and family? It can be draining to be the source of all help for all people. As helpers, we know that learning to say no is fraught with self esteem and other personal issues and triggers. Do you think you are good at setting limits? If not, this is something that needs exploring, perhaps with a counsellor. Can you think of one thing you could do to say no a bit more often?

Conversely, maybe you have stopped saying yes to all requests, because you are feeling so depleted and burned down, feel resentful and taken for granted. Have you stopped saying yes to friends, to new opportunities?

Take a moment to reflect on this question and see where you fit best: Do you need to learn to say no or yes more often?

7. Assess your Trauma Inputs

Do you work with clients who have experienced trauma? Do you read about, see photos of, and are generally exposed to difficult stories and images at your work?

Take a *trauma input survey* of a typical day in your life. Starting at home, what does your day begin with? Watching morning news on tv? Listening to the radio or reading the paper? Note how many disturbing images, difficult stories, actual images of dead or maimed people you come across.

Now look at your work. Not counting direct client work, how many difficult stories do you hear, whether it be in a case conference, around the water cooler debriefing a colleague or reading files?

Now look at your return trip home. Do you listen to the news on the radio? Do you watch tv at night? What do you watch? If you have a spouse who is also in the helping field, do you talk shop and debrief each other?

It is important to recognize the amount of trauma information that we unconsciously absorb during the course of a day. Many helpers whom we meet say that they are unable to watch much of anything on television anymore, other than perhaps the cooking channel. Others say the reverse, that they are so desensitized that they will watch very violent movies and shows and feel numb when others around them are clearly disturbed by it.

In a nutshell, there is a lot of extra trauma input outside of client work that we do not necessarily need to absorb or to hear about. We can create a “trauma filter” to protect ourselves from this extraneous material.

8. Learn more about Compassion Fatigue and Vicarious Trauma

Compassion Fatigue (CF) and Vicarious Trauma (VT) are serious, profound changes that happen when helpers do their best work. Learn more about CF and VT, including ways to recognise the signs and symptoms and strategies to address the problem. Consider attending a workshop or read more on the topic. Visit our website for more information: www.compassionfatigue.ca or email us: whp@cogeco.ca

9. Consider Joining a Supervision/Peer Support Group

Not all places of work offer the opportunity for peer support. You can organise such a group on your own (whether it be face to face meetings or via email or phone). This can be as small as a group of three colleagues who meet once a month or once a week to debrief and offer support to one another.

10. Attend Workshops/Professional Training Regularly

Helpers with severe compassion fatigue often speak of feeling de-skilled and incompetent. Researchers in the field of CF and VT have identified that attending regular professional training is one of the best ways for helpers to stay renewed and healthy. There are of course several benefits to this: connecting with peers, taking time off work, and building on your clinical skills. Identify an area of expertise that you want to hone. If you are not able to travel to workshops, consider taking online courses.

11. Consider working part time (at this type of job)

Managers often cringe when we say this in our workshops, but studies have shown that one of the best protective factors against Compassion Fatigue is to work part time or at least, to see clients on a part time basis and to have other duties the rest of the time. There are some excellent books on this topic, such as ***Your money or your life*** by Joe Dominguez and Marsha Sinetar's ***Do what you love and the money will follow***.

12. Exercise

We tell our clients how important physical exercise is. Do you do it on a regular basis? Can you think of three small ways to increase your physical activity? One busy counselling service hired a yoga instructor to come once a week to their office and everyone chipped in their 10\$ and did yoga together at lunch. Another agency said that they had created a walking club, and that a group of helpers walk outside for 30 minutes three times a week. The key to actually increasing physical exercise is to be realistic in the goals we set out for ourselves. If you don't exercise at all, aiming to walk around the block twice a week is a realistic goal, running a 10km run in two weeks is not.

Conclusion: “Dig where the ground is soft” *Chinese proverb*

When I was training in couples counseling with Dr Les Greenberg, he always used to say “when you are working with couples, dig where the ground is soft. Work with the client who seems most ready to change, not with the client who seems most closed and defensive.” Instead of picking your trickiest area, pick the issue that you can most easily visualise improving on. (eg: “making a commitment to going for a walk every lunch time vs getting rid of my difficult supervisor”).

You may not notice it right away, but making one small change to your daily routine can have tremendous results in the long term. Imagine if you started walking up two flights a stairs per day instead of using the elevator, what might happen after three months?

For more information on Compassion Fatigue Workshops and resources:

Contact Françoise Mathieu at: whp@cogeco.ca
www.compassionfatigue.ca

Françoise Mathieu is a Certified Mental Health Counsellor and Compassion Fatigue Specialist. She works individually with clients in private practice and offers workshops and consultation to agencies on topics related to compassion fatigue, wellness and self care. She and a colleague created Cameron & Mathieu Consulting in 2001 (now called WHP-Workshops for the Helping Professions) to provide workshops to helpers with a focus on personal and professional renewal.

WHP offers practical, skill-based workshops on various topics related to compassion fatigue, burnout and stress management. For more information and resources, contact Françoise Mathieu: (613) 547-3247; whp@cogeco.ca or visit our website:

www.compassionfatigue.ca.

Recommended books on Compassion Fatigue and Vicarious Trauma:

Figley, C.R. (Ed.). (1995) *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized*. New York: Brunner/Mazel.

McCann, I.L.; & Pearlman, L.A. (1990). Vicarious traumatization: A framework for understanding the psychological effects of working with victims. *Journal of Traumatic Stress*, 3: 131 - 149.

Stamm, B.H. (Ed.). (1999). *Secondary traumatic stress: Self-care issues for clinicians, researchers, and educators*, 2nd Edition. Lutherville, MD: Sidran Press.

Recommended Self-Care books for Helpers:

Borysenko, J. (2003) *Inner peace for busy people: 52 simple strategies for transforming your life*.

Fanning, P. & Mitchener, H. (2001) *The 50 best ways to simplify your life*

Jeffers, S. (1987) *Feel the fear and do it anyway*.

O'Hanlon, B. (1999) *Do one thing different: 10 simple ways to change your life*.

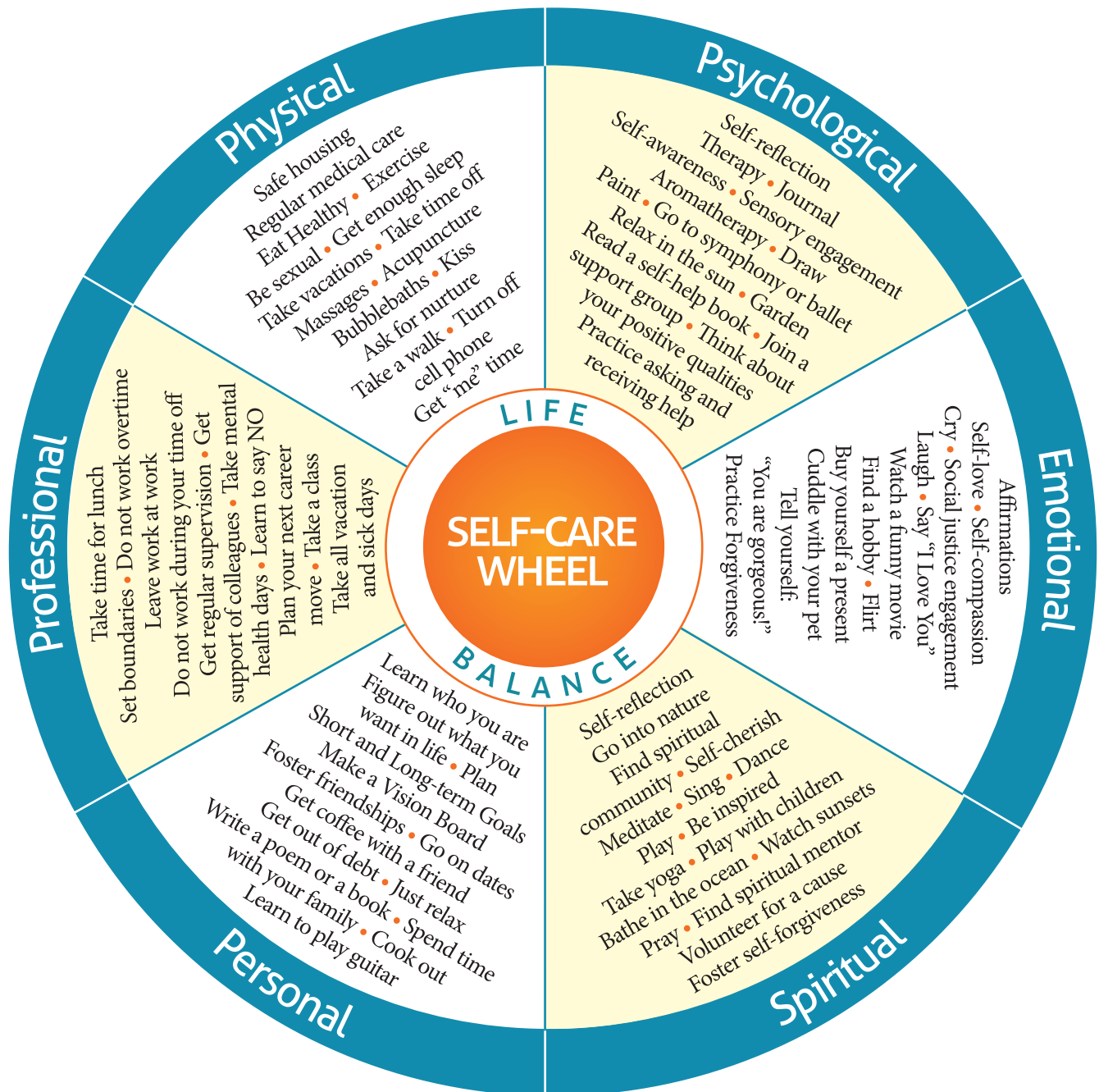
Posen, D. (2003) *Little book of stress relief*.

Richardson, C. (1998) *Take time for your life*.

SARK, (2004) *Making your creative dreams real: a plan for procrastinators, perfectionists, busy people, avoiders, and people who would rather sleep all day*.

Weiss, L. (2004) *Therapist's Guide to Self-care*.

SELF-CARE WHEEL



This Self-Care Wheel was inspired by and adapted from "Self-Care Assessment Worksheet" from *Transforming the Pain: A Workbook on Vicarious Traumatization* by Saakvitne, Pearlman & Staff of TSI/CAAP (Norton, 1996). Created by Olga Phoenix Project: Healing for Social Change (2013).

Dedicated to all trauma professionals worldwide.

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Warning signs that your school as a whole could be impacted by trauma:

	School environment is often chaotic, disorganized, and unpredictable.
	Staff members are often fearful of their own safety.
	Staff members often use harsh and punitive discipline practices to regain control.
	The school has a high rate of staff turnover.
	The school has a high rate of staff absenteeism.
	There is a lack of communication and/or frequent miscommunication among staff members.
	Interpersonal conflicts are increasing among staff members in different roles or departments.
	Staff members collectively tend to be cynical and negative about students.
	Student and family complaints about the school have increased.
	Staff members have less energy or motivation to go the extra mile.
	People at the school feel a lack of emotional and/or physical safety.
	The school has a negative atmosphere.
	Work quality is often poor.
	Work is often incomplete.

Assessing your school wide self-care practices:

Training and Education

	The school provides education to all employees on the signs of stress and related conditions such as secondary trauma.
	The school provides all employees with professional development related to stress management, self-care, and resilience-focused strategies.
	The school provides all employees with training related to their job tasks.
	Staff members are given opportunities to attend refresher trainings and trainings on new topics related to their roles.
	The school provides education on steps necessary to advance employees in their roles
	Staff coverage is in place to support training.

Support and Supervision

	The school offers an employee assistance program.
	Employee job descriptions and responsibilities are clearly defined.
	All staff members have access to regular supervision or support by administrators or peers
	Staff members have access to ongoing support for managing workload and time needed to complete tasks.
	Staff members are encouraged to understand their own stress reactions and take appropriate steps to develop their own self-care plans.
	Staff members are regularly supported in practicing self-care strategies.
	Staff members are welcome to discuss concerns about the school or their jobs with administrators without negative consequences (e.g., being treated differently, feeling like their jobs are in jeopardy, or having their concerns affect their positions on the team).
	Staff members are encouraged to take breaks, including lunch and vacation time.
	The school fosters team-based support and mentoring for staff.

Employee Input

	The school provides opportunities for staff members to give input into practices and policies.
	The school reviews its policies on a regular basis to identify whether the policies are helpful or harmful to the health and well-being of its employees.
	The school provides opportunities for staff members to identify their professional goals.
	Staff members have formal channels for addressing problems and grievances.
	Workplace issues, including grievance issues and interpersonal difficulties, are managed by individuals in the appropriate roles and are confidential.

Communication

	Staff members attend regularly scheduled team meetings.
	Topics related to self-care and stress management are addressed in team meetings.
	Regular discussions of how people and departments are communicating and relaying information occur in team meetings.
	The school has a way of assessing staff level of Secondary Trauma and related conditions.
	The school has a way of evaluating staff satisfaction on a regular basis.

Work Environment

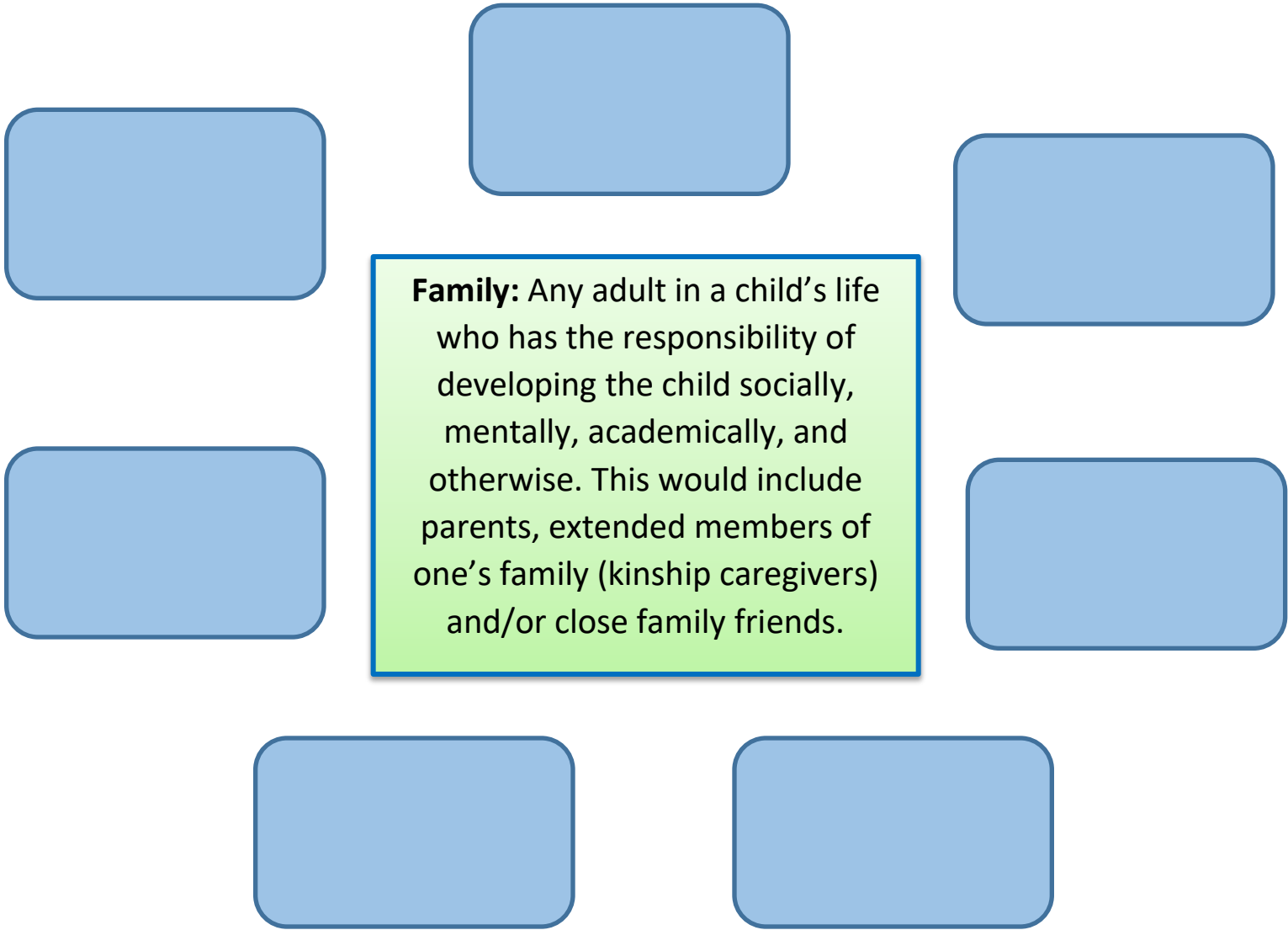
	The school environment is well lit.
	The school environment is physically well maintained (e.g., clean, secure).
	Information about self-care is posted in places that are visible.
	Employee rights are posted in places that are visible.
	The school provides opportunities for community building among employees.
	The school has policies concerning acts of discrimination, harassment, disrespect, and bullying for staff.
	The school responds promptly to any acts of discrimination, harassment, disrespect, and bullying among staff.

Area	Already Do	Would Like to Do
Training and Education		
Support and Supervision		
Employee Input		
Communication		
Work Environment		

- Time Span**
- Today
 - This Week
 - This Month
 - This Year

Self-Care BINGO

1.11 Student, Family, and Community Engagement



Advantages of Schools Using this Broader Definition of FAMILY:

Factors to Consider when Engaging this Broader Definition of FAMILY:

Trauma Sensitive Approaches for Home & School

Video 1 Fact Sheet: Understanding Trauma

What is Trauma?

Trauma refers to experiences that cause intense physical and psychological reactions to stress.



It can refer to a single event, multiple events, or a set of circumstances that are physically and/or emotionally harmful or potentially harmful and result in lasting adverse effects on an individual's physical, social, emotional, or spiritual well-being.*1

What is Traumatic Stress?

Child traumatic stress includes reactions resulting from exposure to one or more traumas over the life course. These reactions persist and affect a child's daily life even after the events have ended.



The stress experience may overwhelm a child's ability to cope with daily demands. Responses and symptoms vary but may be more evident when the child is reminded in some way of the traumatic event(s). *2

Causes/Kinds of Trauma

-  • Natural disasters
-  • Sexual abuse
-  • Physical abuse
-  • Domestic violence
-  • School violence
- Neglect and deprivation
- Traumatic grief
- Accidents
- Medical injury, illness, or procedures
- Loss of a parent/caregiver
- Exposure to community violence or terrorism

Instead of asking "What's wrong with you?", a more constructive question is "What's happened to you?"

Types of Trauma

Acute, Chronic, Complex, Systemic, System Induced



Signs of Trauma

Reactions to trauma can include a variety of responses, signs, or symptoms, including: *3

- Loss of appetite or overeating
- Unexplained irritability or anger
- School avoidance
- Fixation on certain events
- Problems focusing on projects, schoolwork, and conversations
- Regression or loss of skills
- Too much or too little sleep; nightmares
- High levels of worry, trouble with change, or a high level of feeling unsafe
- Angry outbursts, high levels of emotions, or poor focus
- Disruptive, disrespectful, sullen, withdrawn, avoidant, or anxious behaviors
- Physical symptoms, such as aches and pains
- Problems relating to others or forming attachments
- Older children may abuse drugs or alcohol and behave in risky ways



Adverse Childhood Experiences (ACEs)

The initial ACE study, by the Centers for Disease Control and Kaiser Permanente, identified an association between 10 experiences of childhood maltreatment and later problems with adult health and well-being. The study uses the ACE score, a total count of the number of adverse childhood experiences reported by respondents, to assess the total amount of stress during childhood. The greater the number of ACEs, the greater the risk for the following problems later in life including alcoholism, depression, multiple sexual partners, suicide attempts, smoking and liver disease among other negative health related issues.



Ultimately, this study showed the direct link between childhood trauma and poor health outcomes in adulthood.

ACEs are important because they trigger the fight, flight, or freeze response, which can lead to negative internalizing emotions and externalizing behaviors. The 10 ACEs defined by the study are:

- Physical abuse
- Sexual abuse
- Verbal abuse
- Physical neglect
- Emotional neglect
- Losing a parent to divorce, separation, or other reason
- Witnessing a mother abused
- A family member who is:
 - Depressed or diagnosed with another mental illness
 - Addicted to alcohol or another substance
 - In prison

Trauma's Impact on School

When children who experience trauma and traumatic stress operate in a fight, flight, or freeze mode, they may have trouble meeting the demands of school.



Teachers and other school staff may see big, acting-out behaviors. Some children may 'fly under the radar' and use avoidant behaviors. Each child's response to trauma is unique. Educators should look behind the behaviors to determine the student's needs.

*1 Cite: US Substance Abuse and Mental Health Services Administration.
 *2 Cite: National Child Traumatic Stress Network. Note: Traumatic stress is a common term for reactive anxiety and depression, although it is not a medical term and is not included in the Diagnostic and Statistical Manual of Mental Disorders (DSM).
 *3 Note: Signs of trauma may mimic characteristics of depression or anxiety. Clinical evaluation may be necessary to determine if other diagnosable mental health conditions exist.

Trauma Sensitive Approaches for Home & School

Video 2 Fact Sheet: Responding to Trauma

How Trauma Impacts Learning

Children and youth who have experienced trauma are often preoccupied with their physical, emotional and psychological safety. They may also have deficits in processing social cues and identifying their feelings in socially appropriate ways. Trauma can limit a child's ability to:



- Complete tasks
- Organize, understand, and remember information
- Concentrate and sustain attention
- Manage attention, emotions, and behavior
- Shift and transition to new activities and demands

Look Behind the Behaviors

Often adults observe confusing and concerning behaviors in children and youth who have experienced trauma or traumatic stress. These behaviors may not seem logical or proportional to the situation. It is really important to consider the function of the behaviors.



Ask: What is the child trying to gain or avoid? What is the underlying need? Your response matters!

ARC Framework for Addressing Trauma Impact *1

Attachment: Building a trusting relationship between a child or youth and caring adult



Self-Regulation: Identifying emotions and learning how to express and cope with them



Competency: Strengthening resilience by building skills to help children and youth cope with trauma and change

Building Connections Prevents Problems



When presented with challenging tasks and transition, a child or youth may respond with disruptive, disrespectful or disengaged behaviors. A child's trauma history may interfere with his or her ability to meet expectations at home and school, and create obstacles in relationship development.

Creating a strong relationship of trust and respect can ease anxieties, convey a sense of safety and prevent small concerns from turning into big behavior problems. Adults can take simple actions to build attachments, strengthen relationships, and prevent problems:

- Make positive and specific acknowledgement
- Use active listening and reciprocity in conversation
- Follow through with your word and promises
- Establish clear and reasonable expectations and consequences
- Apply a compassionate understanding of a child's strengths and deficits

Fostering Self Regulation *2

Children learn to cope with the challenges of life by practicing the skill of self-regulation through failures and successes. Students need guidance in learning how to regulate emotions and behaviors, and opportunities for practicing self-regulation. Adults can support development of self-regulation skills over time:

- Use affective statements (for example, using "I" messages) to identify the cause and effect relationship between their actions and the impact on their relationships with others.
- Focus on consistency and reciprocity to help build strong relationships.
- Assist children and youth in learning to identify their emotions and manage their behaviors.
- Teach strategies for coping with stress and strong emotions.
- Partner with children and youth to solve behavioral issues. Listening to their ideas helps them feel empowered.
- Watch for your own triggers!
- Empower children and youth to develop resiliency; increase opportunities for choice and building decision making skills.



Strategies

- Look at the need behind the behavior
- The approach must be clear, consistent, reinforced, and promote a sense of safety
- Focusing on relationships is essential
- Listening to students builds relationships
- Naming emotions helps in understanding and managing them

When a child's behavior is saying "I won't," he or she may mean "I can't."



*1 Cite: Blaustein & Kinniburgh

*2 Resources: Childmind.org; ARCframework.org

Trauma Sensitive Approaches for Home & School

Video 3 Fact Sheet: Building Trauma-Sensitive Schools

Schools using multi-tiered systems of supports (ex.: Virginia Tiered Systems of Supports/VTSS) recognize the importance of strengthening academic, social-emotional, and behavioral skills, so that children and youth are ready to meet high expectations at school, at home and in the community.



Academic
Social Emotional
Behavioral

What is Social-Emotional Competence? ^{*1}

There are five core skills critical to a child's social emotional growth:

- **Self-awareness** - the ability to recognize your emotions and understand the link between thoughts, emotions and behaviors
- **Self-management** - the ability to regulate one's emotions, thoughts and behaviors
- **Social awareness** - the ability to understand other's perspectives and demonstrate empathy.
- **Relationship skills** - the ability to build and maintain healthy relationships
- **Responsible decision making** - the ability to make positive choice in behavior and interactions with others



School/Family Collaboration is Key



- Share positive information with each other, in addition to concerns/problems
- Focus on child and family strengths
- Meaningfully engage families in school decision-making
- Open communication
- Listen to families; Build trust
- Keep all communications respectful and child-focused
- Reserve judgment re: parenting or teaching approaches

Restorative Practices ^{*4}

Restorative practices promotes inclusiveness, relationship-building, and problem-solving through the use of circles for teaching conflict resolution. In contrast to traditional, reactive punishments which rarely teach new skills, schools using restorative practices encourage students to reflect on and take responsibility for their actions and take steps to repair and harm they may have caused. Restorative practices help students and teachers develop stronger relationships through a deeper sense of understanding and empathy for one another.

Core Trauma-Informed Care Values ^{*2}

- **Safety** - Ensuring physical, emotional, behavioral and academic safety. Remember a student's perception of safety is what matters to them. Predictability and routine can contribute to a sense of safety.
- **Trustworthiness** - Conveying honesty and truthfulness. Examples of adults behaviors that show trustworthiness to students include being reliable and consistent, making tasks clear, and maintaining appropriate boundaries. Everyone must be treated with dignity and respect.
- **Choice** - Maximizing student and family choice. Student choices and a sense of control. For persons impacted by trauma who have lost control, having even small choices can feel reassuring and empowering. At school, opportunities for choice and shared decision-making can be integrated into academic and non-academic activities.
- **Collaboration** - Partnering of adults and students to solve problems and share power. Educators can help students and families be aware of and take opportunities to collaborate. Collaboration between school staff is especially critical in trauma-sensitive schools.
- **Empowerment** - Ensuring students recognize they are capable of change and they have opportunities to practice and be acknowledged for using problem solving skills. Schools empower by meaningfully including families and students in decision-making; adopting a strengths-based perspective that recognizes capabilities of all students; and embedding skill development throughout the school day.

Social Emotional Competencies Can Help Children ^{*3}

Social emotional competencies help children:

- Persist during challenging tasks
- Ask for help when needed
- Consider the consequences of their actions



Children who are taught social-emotional skills experience greater educational, career and relationship success.

Strategies

- Consider needed social, emotional, behavioral and academic supports
- Establish feelings of safety to support relationships
- Show genuine interest to build trust and strengthen relationships
- Maintain trust to support learning and understanding
- Let emotions calm before engaging the student
- Give choice in the school day to support empowerment
- Give voice and choice to promote trust and empowerment
- Foster open communication between home and school
- Build on student strengths
- Offer supports to families to build resiliency



*1 Cite: CASEL.org

*2 Cites: Fallot & Harris (2009); Daniel & Black, Wisconsin Department of Public Instruction (2017)

*3 Cite: CASEL.org

*4 Cite: NEA/AFT Restorative Practices Working Group, 2014

TRAUMA INFORMED SYSTEM CHANGE INSTRUMENT

As part of the evaluation of this project, we are tracking system change at a service provider level, at an agency level, and at the county system level. Please complete the following to help us understand your perception of change needed in these areas.

Organizational Change Self-Evaluation – The Current System

Rate the following statements regarding **your agency** as it currently operates.

Item Number		Not at All True for My Agency	A Little True for My Agency	Somewhat True for My Agency	Mostly True for My Agency	Completely True for My Agency
1.	Written policy is established committing to trauma informed practices	1	2	3	4	5
2.	The agency has a formal system for reviewing whether staff are using trauma informed practice	1	2	3	4	5
3.	There is system of communication in place with other agencies working with the child for making trauma informed decisions about the child or family	1	2	3	4	5
4.	There are structures in place to support consistent trauma informed responses to children and families across roles within the agency	1	2	3	4	5
5.	Families and children are given systematic opportunities to voice needs, concerns, and experiences	1	2	3	4	5
6.	The agency has a system in place to develop/sustain common trauma informed goals with other agencies	1	2	3	4	5
7.	Understanding of impact of trauma is incorporated into daily decision-making practice at my agency	1	2	3	4	5
8.	Supervision at my agency includes ways to manage personal and professional stress	1	2	3	4	5
9.	Trauma informed safety plans are written/available for each child (i.e., triggers, behaviors when over-stressed, strategies to lower stress, support people for child)	1	2	3	4	5
10.	Staff receive supervision from trauma informed supervisor	1	2	3	4	5
11.	Timely trauma informed assessment is available and accessible to children served by my agency	1	2	3	4	5
12.	A continuum of trauma informed intervention is available for children served by my agency.	1	2	3	4	5
13.	A child's definition of emotional safety is included in treatment plans at my agency.	1	2	3	4	5

Rate the following regarding your current **individual practice** from a trauma informed perspective.

		Not at all True for Me	A Little True for Me	Somewhat True for Me	Mostly True for Me	Completely True for Me
14.	I have a clear understanding of what trauma informed practice means in my professional role	1	2	3	4	5
15.	I feel favorable in trying a new trauma informed intervention with children and families.	1	2	3	4	5
16.	I feel equipped to help children make meaning of their trauma history and current experiences from a trauma perspective.	1	2	3	4	5
17.	In practice, I am utilizing what I believe to be trauma informed interactions with children and families.	1	2	3	4	5
18.	I am willing to try a new form of intervention even if I have to follow a manual or protocol.	1	2	3	4	5
19.	I am willing to use trauma informed interventions that researchers say are effective.	1	2	3	4	5

Name

Agency Affiliation/Role

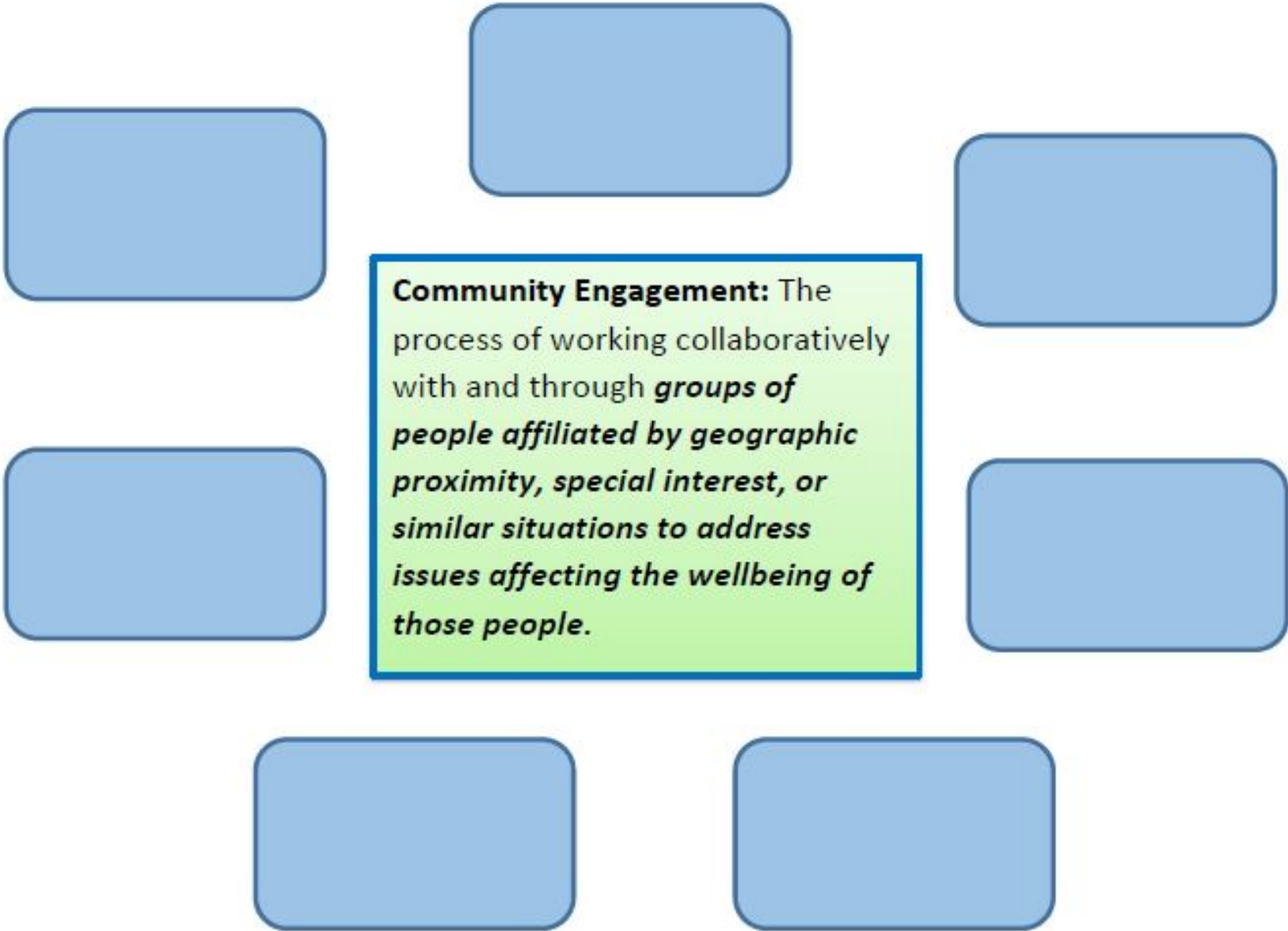
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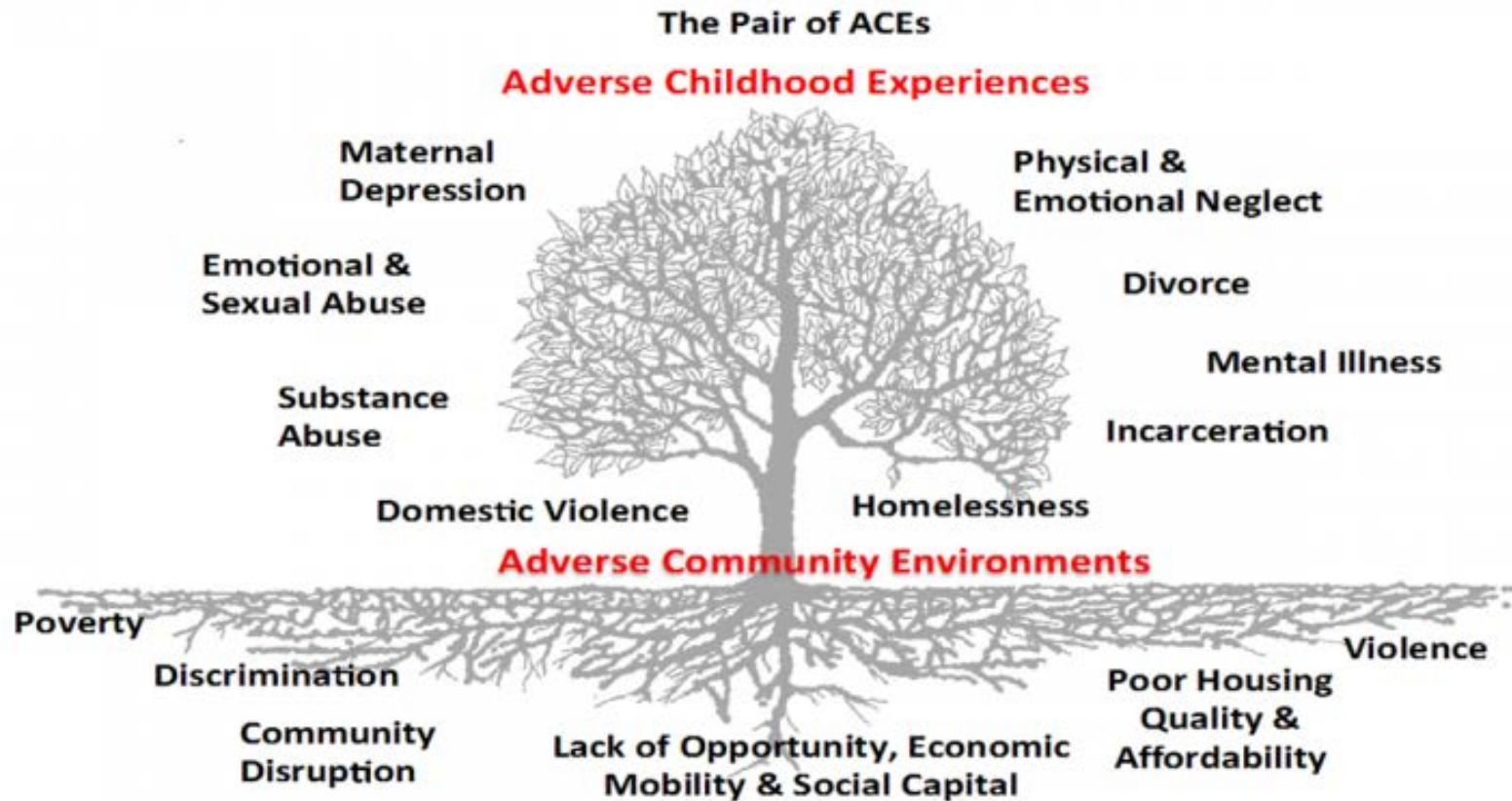
Phone Number

Thank you for your time and participation.

If you would like to participate in continued evaluation of the training project, we may wish to contact you regarding your opinion on trauma informed change in our community. If you do **not** wish to be contacted again to complete this instrument, please initial below. Thank you for your help with this project.

_____ **No thank you, I prefer to not be contacted again to complete this instrument.**





Ellis, W., Dietz, W. (2017) A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience (BCR) Model. *Academic Pediatrics*. 17 (2017) pp. S86-S93. DOI information: 10.1016/j.acap.2016.12.011



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Source: Building Community Resilience Collaborative, <https://publichealth.gwu.edu/departments/redstone-center/resilient-communities>



Family Engagement: A Guide to Partnering with Families to Improve Service Outcomes

Purpose

The purpose of the Family Engagement Tip Sheet is to provide child, youth, and family serving agencies and organizations with guidance on how and why to meaningfully engage family members into the decision-making process around the content and direction of services, interventions, and/or referrals made in the course of case management and planning.

Audience

Front line service providers, middle and upper management staff in local government agencies, and community-based child, youth, and family serving organizations.



Meaningful Family Engagement

is a significant focus of the service delivery system for many child, youth, and family serving agencies and systems. The fields of child welfare, behavioral health, public health, juvenile justice, education, early childhood development, housing, and victim advocacy all address meaningful family engagement as both a method of service delivery and as a philosophy.

Common themes across systems include:

Child-centered approaches

Trauma-informed, strength-based responses

Joint planning and decision-making

Family involvement (including children, youth, caregivers, and extended family) at the system and service-delivery levels

Individualized services

Open, honest, and respectful interactions

Interagency and multisystem collaboration





Who is considered "family?"

The inclusion of kin, extended family members, and supportive people in a child's life increases the opportunities for meaningful family engagement. Staff should include all forms of family to help identify connections, recognizing that some people who play the most supportive roles in a child's life may not be related, but who have been an emotionally significant relationship with the family or child.

The Benefits of Meaningful Family Engagement

Meaningful family engagement can help improve outcomes for children and families and can improve how families cope in times of crisis. It can also enhance the well-being and satisfaction of those working with families by building their capacity to support families and helping to improve community resources.



Specifically, increased family engagement can:

- Enhance the fit between family needs and services
- Improve families' abilities to cope with the issues that they are experiencing
- Enhance systems' capacity to support children, youth, and families, including improved services and resources
- Enhance the helping relationship
- Boost staff morale by improving service outcomes and improving workforce skills

Strategies for enhancing family engagement

Strategies for enhancing family engagement should address the safety of children, youth, and non-offending family members and may occur at three levels:

- Practice level: Methods, plans of action, and strategies designed for frontline staff
- Program level: Approaches and procedures used by agencies and organizations
- System level: Processes and policies to support larger networks of agencies and organizations

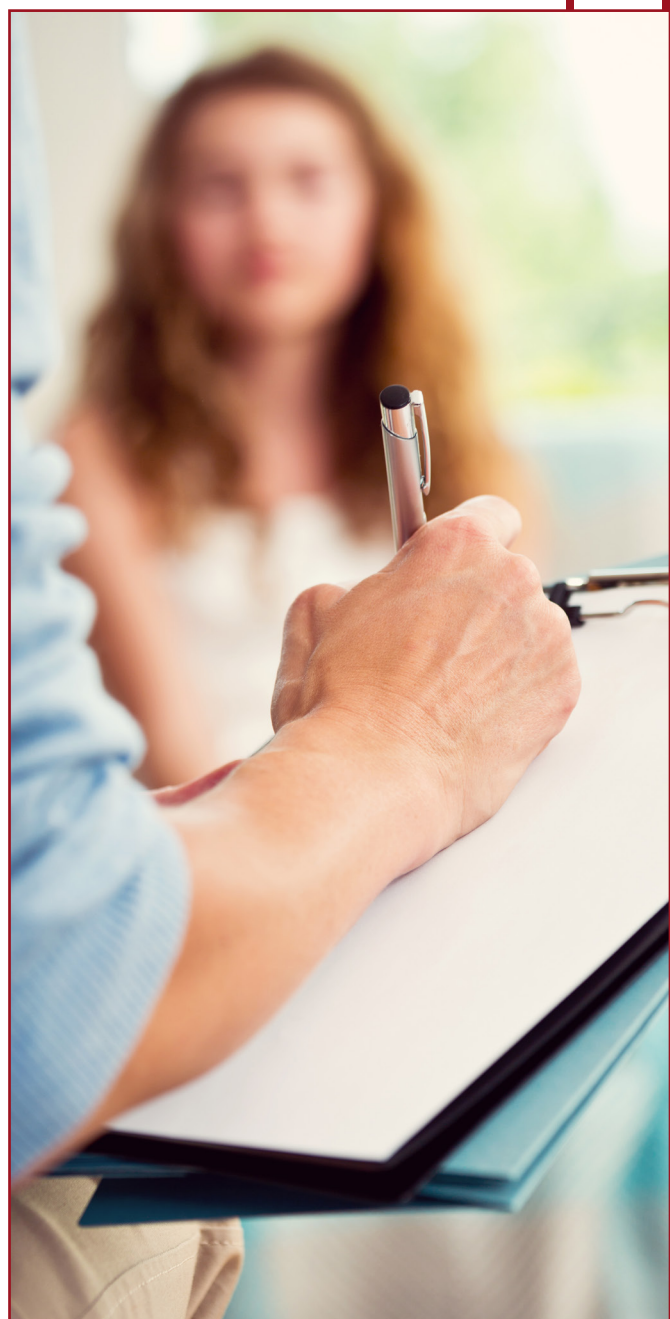
Program-Level Strategies

1. Hire staff with specific experience as a family member or former system-involved individual to coordinate family engagement and assist in developing staff training
2. Train staff on meaningful family engagement strategies
3. Implement strength-based programming including, but not limited to, parenting education, family therapy, and/or parent mentors
4. Understand the strengths, beliefs, and practices each family's unique culture carries with it
5. Ensure that interventions and services respect diverse cultures
6. Institutionalize an organizational practice of providing interpreters and translators during meetings, events, and trainings for families that have limited English proficiency
7. Provide diverse interventions in order to individualize services specific to family need



Practice-Level Strategies

1. Help families understand the issues and reasons for agency involvement
2. Actively include families in planning and decision-making
3. Be consistent and transparent with families
4. Provide timely resources, referrals, and interventions
5. Set measurable, achievable, and mutually satisfactory goals in case management and planning
6. Respect cultural, racial, ethnic, religious, and spiritual identities
7. Respect diverse sexual orientations, gender identities, and gender expressions
8. Provide services and information in family members' preferred language
9. Clarify terms and processes in order to de-mystify the system



System-Level Strategies

1. Collect and analyze feedback from families to identify points of friction, opportunities for additional engagement, and potential policy changes
2. Map opportunities to collaborate with existing family support organizations and develop family support program resource directories
3. Work to create greater equity, given the inherent power difference between families and child, youth, and family serving organizations and systems
4. Engage with families to examine state policies related to children, youth, and families
5. Partner with families to advocate for adequate and meaningful resources to support children, youth, and families





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This document utilizes, adapts, and expands upon a compilation of definitions and general content from: Child Welfare Information Gateway. (2017); The Family Engagement Inventory (FEI): A brief cross-disciplinary synthesis. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.

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Growing Resilient Communities



Activity 4: Family Engagement Action Planning

The Action Planning Tool below offers schools/divisions an opportunity to lay out their basic beliefs, goals and practices on how the team will work together to build and support family engagement.

Family Engagement Action Planning Tool

Division/School:	Project Name:
Date and Version of Tool:	Team Members:

- 1. Vision: What are Core Values and Strategies for engagement of families? What are the beliefs about the importance of engaging families, youth, and larger community?**

- 2. Goals/Results: What do we want to achieve? What difference will this make for families, students, staff?**

- 3. Crafting the Message: How will family engagement help students, families, staff, and the community?**

- 4. What can we do differently or better to engage more families and keep them engaged?**

- 5. What actions can be taken to uphold our values and achieve our goals?**

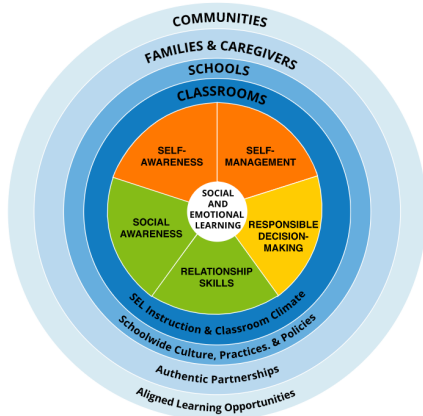
ACTIONS	TIMEFRAME	WHO WILL HELP?	DATA- How we know we are successful?
1.			
2.			
3.			
4.			

Adapted from Parent Engagement Roadmap Tool, Center for Study of Social Policy

1.3 Behavior Expectations

1.8 Classroom Procedures

What is SEL?



Social Emotional Learning (SEL) is a process through which all young people and adults acquire and apply the knowledge, skills and attitudes to develop healthy identities, manage emotions, and achieve personal and collective goals, feel and show empathy for others, establish and maintain supportive relationships, and make responsible and caring decisions.

Self-Awareness – The ability to understand one’s own emotions, thoughts, and values and how they influence behavior across contexts. This includes capabilities to recognize one's strengths and limitations with a well-grounded sense of confidence and purpose.

Self-Management - The abilities to manage one's emotions, thoughts and behaviors effectively in different situations and to achieve goals and aspirations. This includes the capabilities to delay gratification, manage stress and feel motivation and agency to accomplish personal and collective goals.

Social Awareness - The abilities to understand the perspectives of and empathize with others, including those from diverse backgrounds, cultures, and contexts. This includes the capabilities to feel compassion for others, understand broader historical and social norms or behavior in different settings, and recognize family, school, and community resources and supports.

Relationship Skills - The abilities to establish and maintain healthy and supportive relationships and to effectively navigate settings with diverse individuals and groups. This includes the capabilities to communicate clearly, listen actively, cooperate, work collaboratively to problem solve and negotiate conflict constructively, navigate settings with differing social and cultural demands and opportunities, provide leadership, and seek or offer help when needed.

Responsible Decision Making -The abilities to make caring and constructive choices about personal behavior and social interactions across diverse situations. This includes the capabilities to consider ethical standards and safety concerns, and to evaluate the benefits and consequences of various actions for personal, social, and collective well-being.

Sample Matrices

Teaching Matrix		SETTINGS			
		All Settings	Classrooms	Hallways	Cafeteria
EXPECTATIONS	Respect	Be kind Hands/feet to self Help/share with others	Give your best effort USE POSITIVE SELF-TALK	Use normal voice volume	Practice good table manners
	Responsible	Recycle Clean up after self USE CALMING STRATEGIES	Participate in activities MONITOR FEELINGS/EMOTIONS	Walk	Replace trays & utensils
	Safe	Be alert to your surrounding	Follow adult instructions ASK FOR HELP	Maintain physical space	Clean up eating area



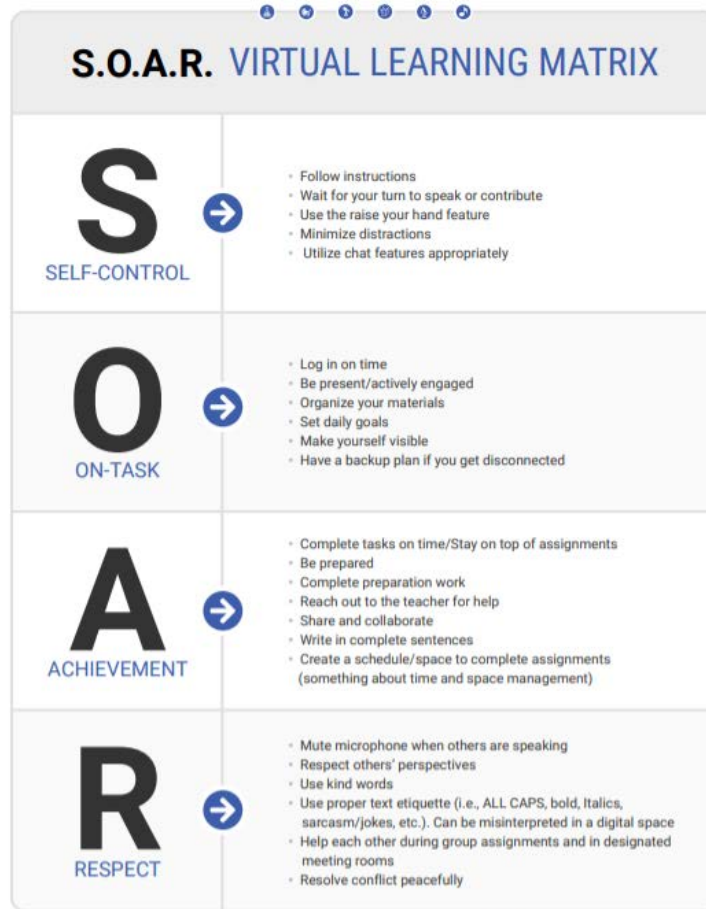
Teaching Matrix		SETTINGS			
		All Settings	Classrooms	Hallways	Cafeteria
EXPECTATIONS	Respect	Be kind Hands/feet to self Help/share with others	Give your best effort	Use normal voice volume	Practice good table manners
	Responsible	Recycle Clean up after self	Participate in activities	Walk	Replace trays & utensils
	RESILIENT	IDENTIFY EMOTIONS USE COPING STRATEGIES	ASK FOR HELP	COMMUNICATE IF THERE IS A PROBLEM	USE RELAXATION STRATEGIES



Teaching Matrix		SETTINGS				
		All Settings	Classroom	SELF	Hallways	Cafeteria
EXPECTATIONS	Respect	Be kind Hands/feet to self Help/share with others	Give your best effort	USE POSITIVE SELF-TALK	Use normal voice volume	Practice good table manners
	Responsible	Recycle Clean up after self	Participate in activities	MONITOR FEELINGS/EMOTIONS USE CALMING STRATEGIES	Walk	Replace trays & utensils
	Safe	Be alert to your surrounding	Follow adult instructions	ASK FOR HELP	Maintain physical space	Clean up eating area

ADD COLUMN FOR "SELF"

Notes:

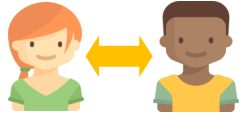


School-wide Expectations	Incorporate Social-emotional Competencies				
	All Settings	Hallways	Lunch	Bus	Online
Respect	Be on time. Assume positive intent.	Walk to the right. Use level 2 voice volume.	<i>Invite those sitting alone to join.</i>	Stay in my seat.	<i>Consider feelings of others before I post. Be an upstander –speak up when I see unsafe behavior.</i>
Achieving and Organized	Hands and feet to self. Help/share with others.	Walk directly to my designated area.	<i>Have a lunch plan. Choose quiet or social lunch area. Invite friends to join.</i>	Have a plan. Use headphones to listen to music.	<i>Check my feelings before I post. Re-read message before I post.</i>
Responsible	Recycle. Be prepared.	Pick up litter. Maintain physical space.	<i>Use my breathing technique. Listen to my signals.</i>	Watch for my stop. Use level 1 voice.	<i>Double check sources before I post. Think before I forward.</i>

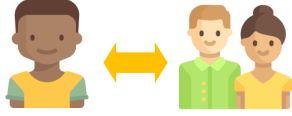
MATRIX: BEHAVIOR/SOCIAL-EMOTIONAL CURRICULUM		LOCATIONS			
EXPECTATIONS					

BUILDING POSITIVE RELATIONSHIPS

Directions: In your small groups, identify practices you can put in place to support positive relationships between staff, leadership, students, and families.



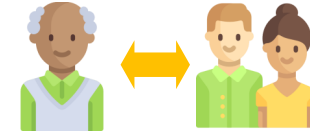
STUDENT TO STUDENT



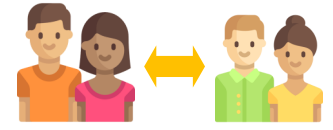
STUDENT TO STAFF



SCHOOL TO FAMILY



LEADERSHIP TO STAFF



STAFF TO STAFF

Relationships

Relationships are the key to success in the classroom, especially for students who have experienced trauma.

Ways to Build Relationships

- Commit to greetings
- Learn about the student (letters, questionnaires)
 - Appeal to student's interests
 - Have high expectations
 - Speak with Respect

Ways to Connect

- Daily Check-in and Check-outs – brief interaction between student and an adult
- Community Building Circles – use a circle format to get to know one another in the classroom, discuss topics, have shared experiences
- Team Building Activities
- One and Done – in the first thirty days of school, demonstrate a single act of empathy (do a favor) for a different student each day
- Two by Ten – for ten days in a row, spend two minutes talking to a student about anything except school
- Three in Thirty – ask enough questions in the first thirty days to learn three things about each student
- Me Bag – have each student and teacher fill a bag with 2-3 items that represent who they are and then provide an opportunity for everyone to share

VTSS 10 Practices Are Trauma Informed		
VTSS 10	What is the strategy	WHY this practice supports students impacted by trauma
1. Arrange the Physical Environment	<ul style="list-style-type: none"> Traffic patterns are clearly defined and allow movement without disrupting others. Desks and furniture arrangement are built around the types of instructional activities and are arranged for maximum student and teacher visibility and access. Materials are clearly labeled, easily accessible, and organized for ease of use. 	<p>Setting up a physical environment to allow teacher to monitor all students and activities promotes feeling of safety and predictability for students.</p> <p>Considering traffic patterns to avoid disruption supports students to respect personal space of others.</p>
2. Active Supervision	<ul style="list-style-type: none"> Movement: Constant, random, target predictable problems, proximity. Scan: Look and listen to all students, look for appropriate and inappropriate behaviors, make eye contact. Interact: Frequent and positive feedback and interactions to encourage, reinforce, and correct. Identify opportunities to pre-correct and provide additional instruction on appropriate behaviors. 	<p>Maintaining active supervision provides a sense of safety for students. When adult is constantly scanning the environment, it is more likely they will predict or identify a trigger to a problem prior in order to prevent the problem behavior from occurring. This especially important regarding known triggers for a student who may be impacted by trauma.</p> <p>Active supervision creates frequent opportunities to interact with students to develop, strengthen, and maintain relationships.</p>
3. Defining Classroom Expectations	<ul style="list-style-type: none"> Classroom rules are aligned with school-wide expectations. Classroom rules are observable, measurable, positively stated, clearly defined, and prominently posted. Teacher has a plan and a schedule to actively teach classroom rules and expectations several times throughout the year. 	<p>All students, especially students impacted by trauma, thrive from established expectations. For students impacted by trauma, high expectations show the student they are capable and worthy.</p> <p>Consistent classroom rules and expectations help students differentiate purposeful rules from unpredictable rules that may occur in other areas of their lives. Consistent classroom expectations also create predictable adult behavior across the school for all students. When established upfront, it may help students establish a sense of security.</p>
4. Routines and Procedures	<ul style="list-style-type: none"> Routines and procedures are aligned with school-wide expectations. Routines and procedures are succinct, positively stated, and in age-appropriate language. Routines and procedures are taught and practiced several times throughout the year. 	<p>When we provide clearly defined routines and procedures, students know what to expect. Reducing the stress of the unknown helps students to operate in a state of calm. Clearly established routines also increase the likelihood of adults identifying and prompting students of possible changes, which is likely to prevent or reduce impact the change may have on student behavior.</p> <p>Regular routines create the opportunity for incorporating intentional regulation activities.</p>

<p>5. Opportunities to Respond</p>	<ul style="list-style-type: none"> • Identify opportunities within your lesson plans to increase opportunities for students to respond. • Identify opportunities to replace single responding through hand-raising with multiple students responding through the use of response cards, dry erase boards, electronic whiteboard and response clickers, and choral response. 	<p>Providing multiple opportunities to respond is a way to conduct formative assessments in the classroom. Allowing for differentiated responses enables students who prefer less attention a way to engage as well.</p> <p>Allowing frequent opportunities for students to respond provides time to process or apply what they are learning. This opportunity to process and apply allows neural networks to be strengthened. (Craig, S.E., 2016)</p>
<p>6. Ensuring Academic Success</p>	<ul style="list-style-type: none"> • Students need to experience academic success in order to be authentically engaged. • Optimal rates of correct responding should be about 80% during initial instruction and approximately 90-95% when students are engaged in independent practice. • Ensuring academic success requires frequent formative assessment and lesson adjustment. • Practices that increase the level of success: teaching prerequisite skill; modeling the skill, strategy, or rule; making sure the question and correct answer is clear; anticipating likely errors and pre-correcting; teaching at the appropriate level of difficulty; careful monitoring of responses; providing immediate corrective feedback; conducting an interactive review. 	<p>Academic success helps promote a sense self-confidence and accomplishment. This helps to build resiliency as the student experience success and builds academic skills.</p> <p>Practices such as gradually increasing the level of success, providing pre-corrections, using the appropriate level of difficulty, and modeling allows for student success on academic tasks. This helps students impacted by trauma to stay regulated and build academic skills and resiliency.</p> <p>Frequent assessments allow for students impacted by trauma to get frequent feedback about their academic skills.</p> <p>When teachers provide monitoring and corrective feedback to students impacted by trauma, they have an increased opportunity to assess the students' current emotional state and adjust accordingly based on the students' emotional states and academic needs.</p>
<p>7. Scaffolding</p>	<ul style="list-style-type: none"> • Teachers provide high levels of support and guidance and gradually reduce the assistance as the student progresses toward mastery. • It includes the following strategies: partnering, chunking, sequencing/progress in complexity, demonstrations and completed models, providing hints and prompts, providing aids such as cue cards, and checklists. 	<p>Uses the power of a positive relationship to support the student's progress.</p> <p>Provides emotional safety in the learning process.</p> <p>Makes learning more manageable and is less likely to trigger the student.</p> <p>Helps to normalize mistakes as part of the learning process and is therefore less threatening.</p> <p>Provides a predictable sequence for the learning process.</p>

8. Acknowledgement and Behavior Specific Praise	<ul style="list-style-type: none"> ● Behavior specific praise statements (BSPS): <ul style="list-style-type: none"> ○ Identify student/group ○ Identify school-wide expectations ○ Describe and acknowledge the rule/behavior being recognized ● Contingent upon student accurately displaying desired behavior. ● BSPS delivered four times as often as error correction. 	<p>Positive specific praise is a powerful tool for building a student's self-esteem and positive sense of self.</p> <p>Teaches new skills and the predictability of behavior specific praise, allows for a sense of control and promotes brain development.</p> <p>The recommended ratio of BSPS to error correction is even higher for students impacted by trauma due to the predictability it creates.</p>
9. Error Correction	<ul style="list-style-type: none"> ● Error correction is an informative statement provided by a teacher or other adult following the occurrence of an undesired behavior. ● It is contingent (occurs immediately after the undesired behavior), specific, and brief. ● Continuum of response includes: redirection, reteach, contingent instructions, provide choice, and conference. 	<p>Strategies need to empower the student and teach resiliency skills.</p> <p>Re-teaching skills will help youth replace learned responses that may not be appropriate.</p> <p>A continuum of responses provides the student help regulating their emotions, provides staff the opportunity to relate to the student's emotions before reasoning.</p>
10. Feedback: Building Community, Collaboration, Citizenship Through Effective Feedback	<ul style="list-style-type: none"> ● The dependent relationship between a given task or specified behavior and the ability for the whole group to access a specific reward. ● Acknowledges students for performing a desired behavior that serves the group functioning. ● Saves time and resources by designing a program for an entire classroom rather than individual students, and encourages positive social interactions between peers. 	<p>Class-wide contingencies establish and maintain expectations. Limit setting and expectations are powerful for students impacted by trauma.</p> <p>Acknowledging students class-wide helps establish and strengthen a community in the classroom. All students are part of the acknowledgement system, which assists teacher in providing higher dosage of acknowledgement for students requiring that while still including a student who may not need that higher dosage.</p> <p>For students impacted by trauma, this allows them to feel like they are part of the classroom community and group success, but does not create individual stress which could trigger dysregulation.</p>

Adapted from *Examples of How Classroom Practices Are Trauma Informed* by Midwest PBIS Network 7.5.17

CLASSROOM MATRIX: *PROCEDURES*

		CLASSROOM PROCEDURES		
		SMALL GROUP INSTRUCTION	HOW TO ASK FOR HELP	WHEN I FEEL UPSET/ FRUSTRATED
EXPECTATIONS	Respect	<p>LISTEN TO PEERS WHEN THEY SPEAK</p> <p>USE KIND WORDS</p>	<p>RAISE HAND OR USE PRIVATE SIGNAL TO GAIN TEACHERS ATTENTION</p>	<p>COMMUNICATE WITH TEACHER/ADULT</p> <p>USE KIND WORDS</p>
	Responsible	<p>KEEP UP WITH YOUR MATERIALS</p>	<p>WAIT FOR TEACHER ACKNOWLEDGEMENT</p>	<p>IDENTIFY EMOTION</p>
	Safe	<p>WALK WHEN MOVING AROUND THE CLASSROOM</p>	<p>USE QUIET VOICE</p>	<p>USE COPING STRATEGY</p>

BEHAVIOR EXPECTATIONS MATRIX

		SETTING/ROUTINE				
E X P E C T A T I O N S						

CLASSROOM PRACTICES CONSIDERATIONS

	What do you already do?	How will you do current strategy with more intentionality?	What will you add/change to your classroom practices to make trauma-sensitive?
PHYSICAL ENVIRONMENT			
ACTIVE SUPERVISION			
DEFINE CLASSROOM EXPECTATIONS			
ROUTINES AND PROCEDURES			
OPPORTUNITIES TO RESPOND			

1.4 Teaching Expectations

Social Emotional Competency	Skills Related to the Social Emotional Competency	Ideas for Teaching the Social Emotional Competency
Self-Awareness	<ul style="list-style-type: none"> ● Integrating personal and social identities ● Identifying personal, cultural, and linguistic assets ● Identifying one's emotions ● Demonstrating honesty and integrity ● Linking feelings, values, and thoughts ● Examining prejudices and biases ● Experiencing self-efficacy ● Having a growth mindset ● Developing interests and a sense of purpose 	<ul style="list-style-type: none"> ● Have students identify personal strengths and strengths of identity groups ● Create class roles and responsibilities that promote individual strengths ● Identify and label emotions and feelings <ul style="list-style-type: none"> ● Use scales or "thermometer" to rate emotional intensity ● Start the day with a check-in ● Hold class discussions ● Tell students frequently why you are optimistic for them and their future ● Have students journal about how they are feeling. ● Model feelings by explaining how you have felt in certain situations (be sure to explain that this was your experience but may not be normal for everyone) ● Role-play different feelings ● Provide scenarios and talk through how each person may feel ● Literature read-aloud ● Bring attention to physical cues that show how students are feeling ● Paraphrase or reflect on how you think students are feeling i.e. "It sounds like you might be feeling.... but I'm not sure, is that right?"
Self-Management	<ul style="list-style-type: none"> ● Managing one's emotions ● Identifying and using stress-management strategies ● Exhibiting self-discipline and self-motivation ● Setting personal and collective goals ● Using planning and organizational skills ● Showing the courage to take initiative ● Demonstrating personal and collective agency 	<ul style="list-style-type: none"> ● Create a class catalog of appropriate strategies ● Teach age appropriate calming exercises (mindfulness, grounding, asking for/using putty, stress ball, etc., breathing techniques, muscle relaxation, visual imagery) ● Incorporate the use of a feelings scale or thermometer (5 point scale) ● Implement cozy or calming corners ● Model positive self-talk <ul style="list-style-type: none"> ● "I am safe." ● "I can calm myself down." ● "I can trust the adult I am with to give me helpful directions." ● Establish and work toward personal and collective short term and long term goals ● Discuss barriers and how one might overcome those barriers ● Model how you motivate yourself to achieve goals

Social Emotional Competency	Skills Related to the Social Emotional Competency	Ideas for Teaching the Social Emotional Competency
<p style="text-align: center;">Social Awareness</p>	<ul style="list-style-type: none"> ● Taking others' perspectives ● Recognizing strengths in others ● Demonstrating empathy and compassion ● Showing concern for the feelings of others ● Understanding and expressing gratitude ● Identifying diverse social norms, including unjust ones ● Recognizing situational demands and opportunities ● Understanding the influences of organizations/systems on behavior 	<ul style="list-style-type: none"> ● Create Class Agreements and Class Norms ● Practice perspective taking: Cross age mentoring ● Establish a class definition of empathy, share stories/experiences ● Model appreciating diversity <ul style="list-style-type: none"> ● Role Play ● Discuss respect for others <ul style="list-style-type: none"> ● Bucket fillers ● Literature read alouds to facilitate discussions of character feelings ● Hold class meetings to develop empathy ● Have class discussions same/different feelings ● Have older students (upper elementary, middle, or high school) develop an advertising campaign (e.g., media campaigns, poster contests, promotional videos to show on morning announcements) to promote a norm on treating others the way one would want to be treated. ● Discuss different definitions of respect and how that looks in various cultures (be sure to honor all cultures and not just dominant culture) ● Model the use of affective statements ● Organize class and individual community service projects ● Have students participate in class projects, especially with older students (late elementary, middle, and high), to promote awareness of the rights of others. Include having students identify their own biases and discuss ways to change those perspectives of others who are different. ● Discuss how behavior affect others ● Use video clips with character responses ● Have students share experiences, thoughts, and feelings from different cultural perspectives ● Validate and affirm diversity ● Celebrate historic figures who resisted stereotypes or worked to promote justice and equality for all individuals. ● Model respect and enthusiasm for learning about diversity – show enthusiasm for literature by authors from many different cultures, show enthusiasm for learning about different cultures. ● Ask routine questions throughout the day to draw attention to how students' behavior is affecting those around them

Social Emotional Competency	Skills Related to the Social Emotional Competency	Ideas for Teaching the Social Emotional Competency
Relationship Skills	<ul style="list-style-type: none"> ● Communicating effectively ● Developing positive relationships ● Demonstrating cultural competency ● Practicing teamwork and collaborative problem-solving ● Resolving conflicts constructively ● Resisting negative social pressure ● Showing leadership in groups ● Seeking or offering support and help when needed ● Standing up for the rights of others 	<ul style="list-style-type: none"> ● Model and practice effective communication <ul style="list-style-type: none"> ● Practice reflective listening during partner work ● Model and practice conflict resolution skills ● Discuss the importance of social engagement ● Implement partner work/cooperative learning groups and have students evaluate how well their group worked together ● Promote relationship-building ● Model giving and receiving feedback ● Have a class discussion on the difference between assertive and aggressive ● Model and teach conflict resolution and conduct role play ● Give students opportunity to practice receiving compliments and praise ● Teach the use of I-statements ● Model how to ask for help ● Utilize strategies that engage students in teamwork <ul style="list-style-type: none"> ● games and sports ● project based learning
Responsible Decision Making	<ul style="list-style-type: none"> ● Demonstrating curiosity and open-mindedness ● Identifying solutions for personal and social problems ● Learning to make a reasoned judgment after analyzing information, data, facts ● Anticipating and evaluating the consequences of one's actions ● Recognizing how critical thinking skills are useful both inside & outside of school ● Reflecting on one's role to promote personal, family, and community well-being ● Evaluating personal, interpersonal, community, and institutional impacts 	<ul style="list-style-type: none"> ● Use class meeting/advisory or small group structure to: <ul style="list-style-type: none"> ● Introduce problem solving process ● Role Play ● Practice ● Practice self-reflection ● Have a class discussion on responsibility and related terms ● Examine problems or moral situations from literature and examine other alternatives and impacts. ● Create, agree to, and help students understand logical consequences, discussing them frequently and whenever appropriate. ● Explicitly identify the steps for solving a problem. Walk through the steps of problem-solving in response to hypothetical situations. ● Read current events and discuss if the decisions made are ethical and evaluate against a clearly defined ethical criteria. ● Literature read aloud to facilitate discussion around character problem solving

Adapted from Updated CASEL 5: CASEL 10-2020: <http://www.casel.org/what-is-SEL>

Adapted from Teaching Activities to Support the Core Competencies of SEL—August 2017 :<https://www.casel.org/wp-content/uploads/2017/08/Sample-Teaching-Activities-to-Support-Core-Competencies-8-20-17.pdf>

SOCIAL EMOTIONAL COMPETENCY LESSON PLAN

ELEMENTARY SAMPLE

LESSON PLAN	Teaching Non-Cognitive & Non-Academic Skills Using a Trauma-Sensitive Lens		
ALIGNED WITH	Second Step, Grade 3, Unit 2 Lesson 8		
SPECIFIC SKILL	Accepting Differences in Others	COMPETENCY	Social Awareness
PERFORMANCE EXPECTATIONS			
<i>What specific actions will the students demonstrate related to this skill?</i>			
<ul style="list-style-type: none"> ● When asked, the students will be able to identify one way they are the same as one other person in the classroom. ● When asked, the students will be able to identify one way they are different from one other person in the classroom 			
<i>PRE-TEACH: What vocabulary needs to be pre-taught? What previously learned skills need to be reviewed before teaching this skill?</i>			
Reminders of Previous Vocabulary	New Vocabulary	Reminder of Previous Skills and Learning	
<ul style="list-style-type: none"> ● Similar (the same or alike) ● Different (not the same) ● Accept (to agree that something is okay) ● Appreciate (to agree that something is good, even if you are not used to it) ● Individual (unique or one of a kind; one by 	<ul style="list-style-type: none"> ● Teasing ● Bullying ● Empathy (understanding something from another person's view or perspective) 	<ul style="list-style-type: none"> ● What respectful looks and sounds like ● Reasons why bullying is not a good thing. (others feel sad, hurt and embarrassed) 	

SOCIAL EMOTIONAL COMPETENCY LESSON PLAN

ELEMENTARY SAMPLE

itself, himself or herself)		
TEACH: What activities will you use to introduce and teach this specific skill?		
<ul style="list-style-type: none">• Choosing partner: Second Step indicates that each student has a specific partner. On the day of the lesson, check in with all students to make sure they are still comfortable with their partner.• Work to heal any difficulties between partners before beginning the lesson. When that is not possible, help students choose different partners (<i>TSS adaptation to help ensure a sense of security and control over learning</i>).• Brain Builder: Common Ground – See Lesson 8 under Brain Builder and then modify so students do not jump into their partner’s personal space. Students stand side by side and jump forward, if they like the activity named (e.g., fishing, dancing, swimming, playing video games). Students jump backward if they do not like the activity named (<i>TSS adaptation helps students who have experienced inappropriate touch avoid being triggered by another person in their personal space</i>).• Group reflection on the Brain Builder: Students can raise their hand, do thumbs up, or indicate using an individual strategy (e.g., Holding up “yes” or “no”) their answers to teacher questions, such as: Raise your hand if you and your partner found a lot in common.		
SUPPORT FOR IMPLEMENTATION PRACTICE: What kinesthetic, visual, auditory and/or tactile cues will you use to remind the students to use this skill during the school day?		
<ul style="list-style-type: none">• Visual cues as reminders to individuals or small groups determined by group or individual students.• Homework to review concepts and rules of respect with family.• Posters from Second Step.		

SOCIAL EMOTIONAL COMPETENCY LESSON PLAN

ELEMENTARY SAMPLE

- Small positive reminders on desks, over lockers, etc.

FEEDBACK/FORMAL ASSESSMENT: How will you determine whether or not the students have mastered this skill at the independent level?

- Have students complete a safety check daily to assess their comfort level with other students in the classroom.
- Provide individual opportunities throughout the week for students to approach you and share their comfort level or other issues. Follow up on any student report of not feeling safe.
- Make sure that students understand the “Reporting Bullying” process.
- Share story and picture about Yasaman and Olivia.
- Lead discussion from Lesson #8 on Yasaman and Olivia, how they are different, and how they have things in common.
- Talk about specific words that Yasaman and Olivia can use to get to know each other.
- What words can Olivia use to help other students get to know Yasaman?
- Application to classroom:
- *Complete activity from Second Step Lesson #8 with partner or on their own, if student is not yet comfortable sharing feelings or physical things with another person (TSS adaptation to address trigger of fear of lack of control).*
- *Have students who are comfortable share what they learned together. Other students can share with teacher individually or turn in written work to teacher (TSS adaptation to address anxiety and lack of control).*

SOCIAL EMOTIONAL COMPETENCY LESSON PLAN

ELEMENTARY SAMPLE

RETEACH: What additional activities or strategies will you use to correct using inaccuracies in performance or reinforce parts of the skills students are unable to perform at mastery level?

1. Re-teach to small groups or individuals, if reminder cues increase or students check "yes" to being teased in a day.
2. Role play the skill with another adult and then two students, finding similarities with each other. Students volunteer for this role play (TSS adaptation takes into account anxiety level of students).
3. Share new story about two students who have differences and how they got to know each other and find similarities. Check www.secondstep.org for possible videos.
4. Have students choose someone they want to get to know better and write questions they might ask that student. Allow time and facilitate students talking to the student they chose. Have students write a paragraph about something they learned that surprised them.

TN STATE STANDARDS AND SOCIAL EMOTIONAL LEARNING COMPETENCIES

Grade 7

<p>Subject 7th Grade</p>	<p>TN Standards (5-8) Academic target: Students will be able to...</p>	<p>SEL I Can Statement. Students will be able to....</p>	<p>What would teachers need to do to integrate SEL and TN Standards?</p>
<p>English Language Arts</p>	<p>Cite several pieces of textual evidence to support analysis of what the text says explicitly as well as inferences drawn from the text.</p>	<p>I can accurately identify my emotions and the complexities of different emotions</p>	<p>Learning activity(s): Think-Pair-Share Locate images that imply a specific emotion (you can use http://www.canstockphoto.com/images-photos/emotional.html for stock images). Display an image for the students to view and internalize individually. After a short time, allow the students to pair up with a partner and share what emotion they believe is being portrayed and discuss what evidence supports their inference. For closing, have students journal a time that they felt a similar emotion and how they handled their feelings.</p>
<p>Math</p>	<p>Analyze proportional relationships and use them to solve real-world and mathematical problems</p>	<p>I can develop strategies to manage stress</p>	<p>Learning activity(s): <u>Talking Chips</u> Students will sit together in a group and are given one item each (a chip, pencil, eraser, etc.). Together they will create a proportional response and a non-proportional response to a given situation (i.e. accidentally being bumped into in the hallway). In order to speak, the teammate must place their “chip” in the center of the table. When he/she is finished another student places their “chip” on the table and is free to add to the discussion. A student cannot return to the discussion until everyone has used their “chips”. Closing: How do these scenarios relate to the</p>

			mathematical relationships that you are studying in class?
Social Studies	I can identify some of the major lasting contributions of Rome and explain their influence on modern society	I can apply empathy and social interactions I can understand the reason behind rules	Learning activity(s): Concentric Cirles Pose the questions, “What is a rule that is important to our school community?”, “What is a school rule that you may disagree with?” and “If you were able to change that rule, what would you change it to?” Has there ever been a time where you disagreed with someone who created the rules that you were meant to follow, like Julius Cesar and Brutus? Can you empathize with them even though you did not agree with the rules?
Science	Make observations and describe the structure and function of organelles found in plant and animal cells.	I can establish and maintain friendships.	Learning activity(s): Fan N Pick Overarching Question: What role do you play in the following areas in our school ? On a set of 4 index cards (one per group of 4) write the word classroom, sports, clubs and band/choir on a separate card. One student will fan out the cards and another student will select one of the cards with the words not facing them. They will read their card and then discuss their role or a role of someone within that group and the importance of that role within the group. The other students will take turns pulling cards and discussing their roles within the groups or areas. The teacher will bring the groups back together by posing the question, “Howdoes being part of a group

			fill a need within our lives and provide a sense of belonging?" Students can either journal their responses or share out. Reflection: How does being a member of a group compare to the complexity of cell structures within plants and animals?
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EXAMPLE

Missouri Middle School 2017-18 Teaching Schedule

Date	Lesson (Taught during Home Room unless otherwise indicated)
8/18	Respect, Responsible, Ready at Genius Middle School <ul style="list-style-type: none"> • Assembly at end of day to encourage staff & students to be respectful, responsible, & ready.
8/19	Store jackets/coats, backpacks, and electronic devices in locker & Arrive on Time
8/19	Honor dress code
8/20	Positive Language with peers and adults - Appropriate volume when talking
8/21	Have materials you need for class <ul style="list-style-type: none"> • Assembly end of day to celebrate first week's work. Send Matrix home via e-mail and flyers
8/25	Review Week 1 Lessons
8/26	Actively listen
8/27	Use restrooms and water fountains for intended purposes
8/28	Keep all areas of the building free of debris
8/29	<ul style="list-style-type: none"> • Assembly end of day to celebrate good work and discuss establishing goals for September.
9-2	Follow directions
9-8	Positive language with peers and adults
9-15	Respond Positively when spoken to – Respectful Disagreement
9-22	Post only approved art
9-29	Have materials you need for next class <ul style="list-style-type: none"> • Assembly end of day to celebrate good work and discuss establishing goals for October
October	Lessons from data review and Solution Plan
November	Lessons from data review and Solution Plan
December	Lessons from data review and Solution Plan
January 5	Booster Review Respect, Responsible, Ready in Nonclassroom Settings Review classroom rules and routines
January 12	Lessons from data review and Solution Plan
February	Lessons from data review and Solution Plan
March	Lessons from data review and Solution Plan
After Spring Break	Booster Review Respect, Responsible, Ready in Nonclassroom Settings Review classroom rules and routines
Before State Tests	Responsible – Do your best work
April	Lessons from data review and Solution Plan
May	Lessons from data review and Solution Plan


1.9 Feedback & Acknowledgment

Perception is 100% Reality

Developing	Trauma-Sensitive
Students say it's bad when teachers...	Helpful alternatives
Yell	Speak calmly and in a neutral tone
Blame you when it was someone else	Seek understanding
Refuse to believe you	Build trust
Talk on and on	Listen first then respond
Make sarcastic jokes	Use positive humor for engagement
Tell you you you're a bad class	Utilize and promote strengths
Have favorites	Create equal opportunities
Hold up your mistakes	Hold up your successes (publicly/private)
Embarrass you in front of the class	Create a safe space for exploration
Put you down	Lift others up emotionally
Tease you	Empower
Compare you to others	Identify unique attributes

Trauma Sensitive Error Correction

Directions: In the chart below, reword the error correction non-example to make it trauma sensitive.

 Pause and Practice	
Error Correction Non-Examples	Trauma Sensitive Rephrase
How many times do I have to tell you to work quietly?	
Didn't I just tell you to get your work done?	
Why are you talking when I'm talking?	
Do you want me to send you to the office?	
What's going to happen if I call your mother?	
What do you think you're doing?	
Don't you think you should be using your time better?	

Creative ideas using affirmations or mantras

Elementary

- Painting or writing an affirmation on a rock or paper to have at their desk
- Including families through activities or notes home that include the affirmation or mantra
- Include in morning meetings or proactive circles and allow students to share their personal affirmation
- Work with a student to create a personal affirmation to build a relationship. This affirmation could be laminated and placed in their desk or a “calm corner” in your room.
- Post affirmations/Mantras in the classroom and refer to them throughout the day

Secondary

- Using cell phone apps, pictures, or notes on their cell or laptop to create an affirmation
- Including families through notes home/email/class webpage. Ask the class to help you create the mantra
- Include in proactive circles and allow students to share their personal affirmation/introduce mantra
- Be intentional within their reading assignments to point out affirmations or mantras (demonstrate first)
- Work with a student to create a personal affirmation to build a relationship. Check in on them and encourage them to use their affirmation.
- Post affirmations/Mantras in the classroom and refer to them throughout the day

VALUE-BASED AFFIRMATION ACTIVITY

The following exercise will not be graded. The purpose of this exercise is to help me get to know you better. Name _____

Circle the two or three values that are most important to you:

• creativity • community/relationships with family and friends • political views • independence • learning and gaining knowledge • money, wealth, or status • your social/cultural/racial identity • honesty or integrity • helping society • achievement in athletics, education, or career

• connection with nature/the environment • athleticism, fitness • spirituality or religion • sense of humor/having fun

Other? _____

On a scale of 1–5 where 1 is highly disagree and 5 is highly agree, rate the following statements:

1. These values have influenced my life. _____
2. In general, I try to live up to these values. _____
3. These values are an important part of who I am. _____
4. I care about these values. _____

Based on your responses above, please do the following:

- First, look at the values you picked as most important to you.
- Next, think about times when these values were important to you.
- Finally, describe why these values are important to you. Include some discussion about how you ranked the values.
- Focus on your thoughts and feelings. Don't worry about spelling or grammar.

Ideas on how to use the activity:

- Provide opportunity to revisit this assignment at critical moments
 - The beginning of the school year
 - Prior to major exams and testing
 - Near holidays and breaks
- Provide opportunity for discussion and sharing with other students if a trusting classroom environment exists (**give choice**)
- Provide opportunities for them to share their writings with you in which you affirm and give validating feedback either written or verbally, not a graded assignment
- Have them provide a visual representation of their written assignment (poster, photo, graphic art,

song, electronic applications)

You can adapt the worksheet to have them come up with their top two-three values verses listing them.

Key: Explain that you desire for them to complete the activity so you can get to know them. Let them know you value their input.

Adapted from:

https://diversity.humboldt.edu/sites/default/files/paselk_values_affirmation_activity_1.pdf

Resource to broaden your understanding:

https://greatergood.berkeley.edu/podcasts/item/how_to_switch_off_critics_shereen_marisol_meraji_codeswitch

Episode 73: How to Switch Off Your Critics

(Updated: 9/30/2020)

School-wide Acknowledgement Matrix - Students

TYPE	WHAT	WHEN	WHERE	WHO
<p>Immediate/High Frequency In the moment, predictable, Delivered at a high rate for a short period (e.g., Gotchas, Paws, High Fives)</p>				
<p>Redemption of High Frequency (e.g., school store, drawings)</p>				
<p>Intermittent/Unpredictable (e.g., surprise homework completion treat, random use of gotchas in hallway)</p>				
<p>Long-term School-wide Celebrations (school-wide not individually based)</p> <p>FOR: Ex: ODR reduction, school-wide target met for certain setting/behavior area ACTIVITY: (e.g., ice cream social, dance, game day)</p>				

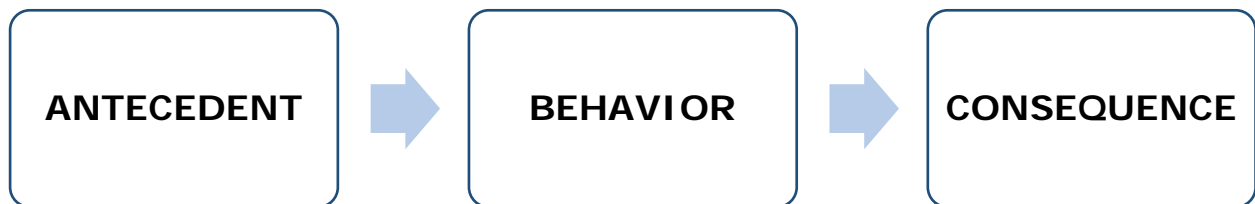
School-wide Acknowledgement Matrix - Staff

TYPE	WHAT	WHEN	WHERE	WHO
<p>Immediate/High Frequency In the moment, predictable, Delivered at a high rate for a short period (e.g., Gotchas, Paws, High Fives)</p>				
<p>Redemption of High Frequency (e.g., school store, drawings)</p>				
<p>Intermittent/Unpredictable (e.g., surprise homework completion treat, random use of gotchas in hallway)</p>				
<p>Long-term School-wide Celebrations (school-wide not individually based) FOR: Ex: ODR reduction, school-wide target met for certain setting/behavior area ACTIVITY: (e.g., ice cream social, dance, game day)</p>				

1.5 Problem Behavior Definitions

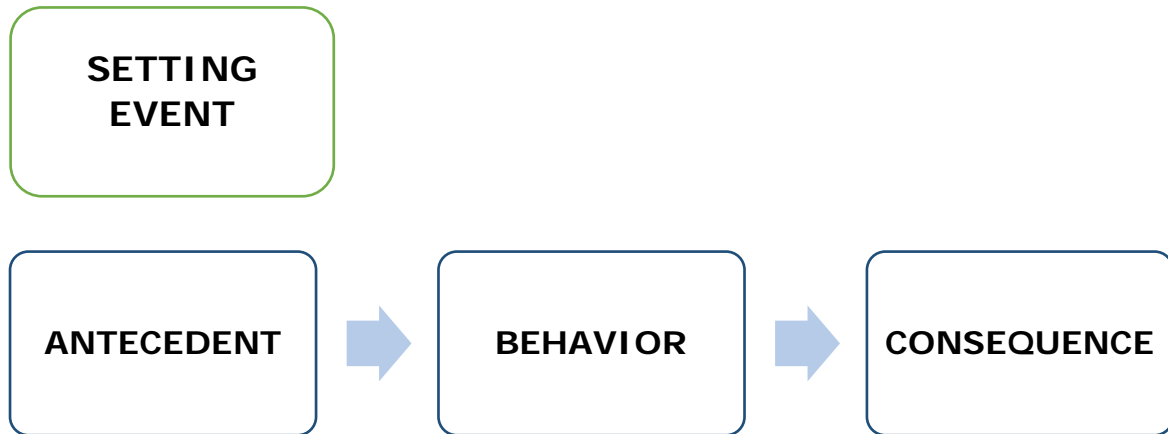
Behavior is Communication

- **Antecedent** – occurs immediately before the behavior
- **Behavior** – observable and measurable action
- **Consequence** – occurs immediately after the behavior



Reinforcement – anything that follows a behavior that causes a behavior to increase

Setting event – ecological events or conditions (e.g. lack of sleep, change in routine, noisy environment, crowds, allergies, illness, etc.) that increase the likelihood that the challenging behavior may occur. (O'Neill, et al., 1997)



Examples of setting events:

- Environmental: noise level, being late, moving to a new home, transitions, time of day, classroom factors (instructional match, lack of relationships, crowded space,, etc.)
- Social: family crisis, fight, negative social interactions, loss of loved one, family divorce/discord
- Physiological: sickness, sleep problems, agitation due to emotions, mental illness, medication changes or side-effects

Flight

What I look like:	What I am aware of:	How my body feels:	What's happening in my inner world:	You can help me feel safe by:
Hyperactive Aggressive Running away Threatening Disruptive Clumsy Disrespectful Anti-social Unable to follow rules Immature Leg movement Fidgety	My surroundings Sudden noises Tone of voice The overwhelming environment Who might be a danger to me The need to get out of here How far away I am from being safe	Terrified Heart racing Quick breathing Tense muscles Nauseous Sweating	I am in danger, need to get out I need safety I feel alone I am not worth much I don't belong I can't tell how I feel I am ugly	Allow me to go to safety Validate my feelings Recognize my perspective Treat me with respect Re-direct privately

Adapted from Mark Thornley & Helen Townsend: What Survival Looks like in School [www. Innerworldwork.co.uk](http://www.Innerworldwork.co.uk)

Freeze

What I look like:	What I am aware of:	How my body feels:	What's happening in my inner world:	You can help me feel safe by:
Bored Distracted Not listening Standing or sitting still Quickly looking around Zoned out Wide eyed	Heart is beating faster Breathing is faster Brain is slowing down Noise in background Listening for threats (tone of voice) I am under attack Terrified Body Language Need to protect myself	Under attack Ready to fight Very scared High pulse rate Tense muscles Lack of focus but sensitive to perceived threats	I am a failure I'm not as good as everyone else I hate myself I am scared I need to go somewhere safe I don't belong I'm embarrassed You will all laugh at me You will single me out	Allow me to go to safety Re-direct and remind me in a way that doesn't embarrass me or single me out Let me choose where to sit Understand my perspective

Adapted from Mark Thornley & Helen Townsend: What Survival Looks like in school www.Innerworldwork.co.uk

Fight

What I look like:

Argumentative
Aggressive
Unable to concentrate
Unable to finish work
Confrontational
Unable to "fit in"
Disrespectful
Alone
Unable to get along with others
Immature
Unable to follow rules
Crying
Hands in fists
Glaring

What I am aware of:

Threats of danger
If I hit first, I might survive
If I disrupt, I might escape
No-one likes me
I need to get out of here, escape
I have no friends
I can't trust anyone
You don't want me here
I need to get ready to survive what's next

How my body feels:

Tense
Over alert
Nauseous
Terrified
Faint or dizzy
I can't cope
I'm so alone
I need to cry
I need to laugh hysterically
I am worthless
I am ugly
I am hated

What's happening in my inner world:

I wish they would like me
I wish I had friends
I wish I could do this work
I wish I could go somewhere safe
I wish you knew how scary this is for me
I wish I had someone to talk to
I wish I was wanted
I wish I was popular

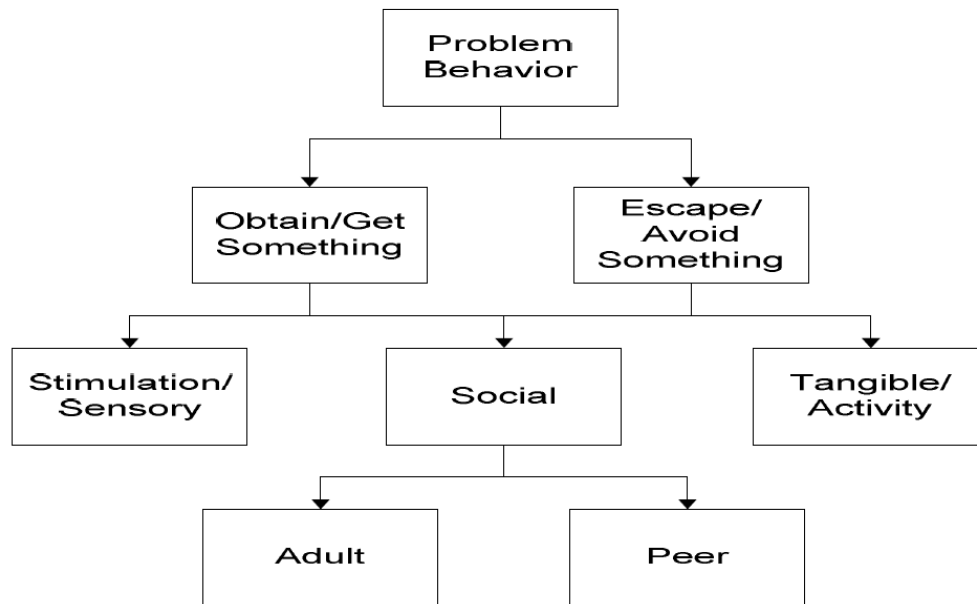
You can help me feel safe by:

Allow me to choose who I feel safe talking to
Allow me to choose where to sit
Let me have a break
Listen to me
Understand how scary this is
Prompt, re-direct me privately
Give me a role
Understand I need time and space
Tell me about changes before they happen

Appease (also known as fawn or submit)

What I look like:	What I am aware of:	How my body feels:	What's happening in my inner world:	You can help me feel safe by:
Socially withdrawn Compliant Quiet Yes or no answers Passive Resigned Low energy Neutral expression	I can't think Tired Tummy aches Sad Lonely	Worn out No energy Guilty Like I've given up Slow Tearful	Why can't I do better I'm useless It's all my fault Nothing will feel ok I can't keep myself safe I want to die	Repetitive simple tasks Help me take care of my sensory needs like a weighted blanket Tell me I am safe Help me take deep breaths Let me spend time with a trusted adult Help me

Behavior serves a Function

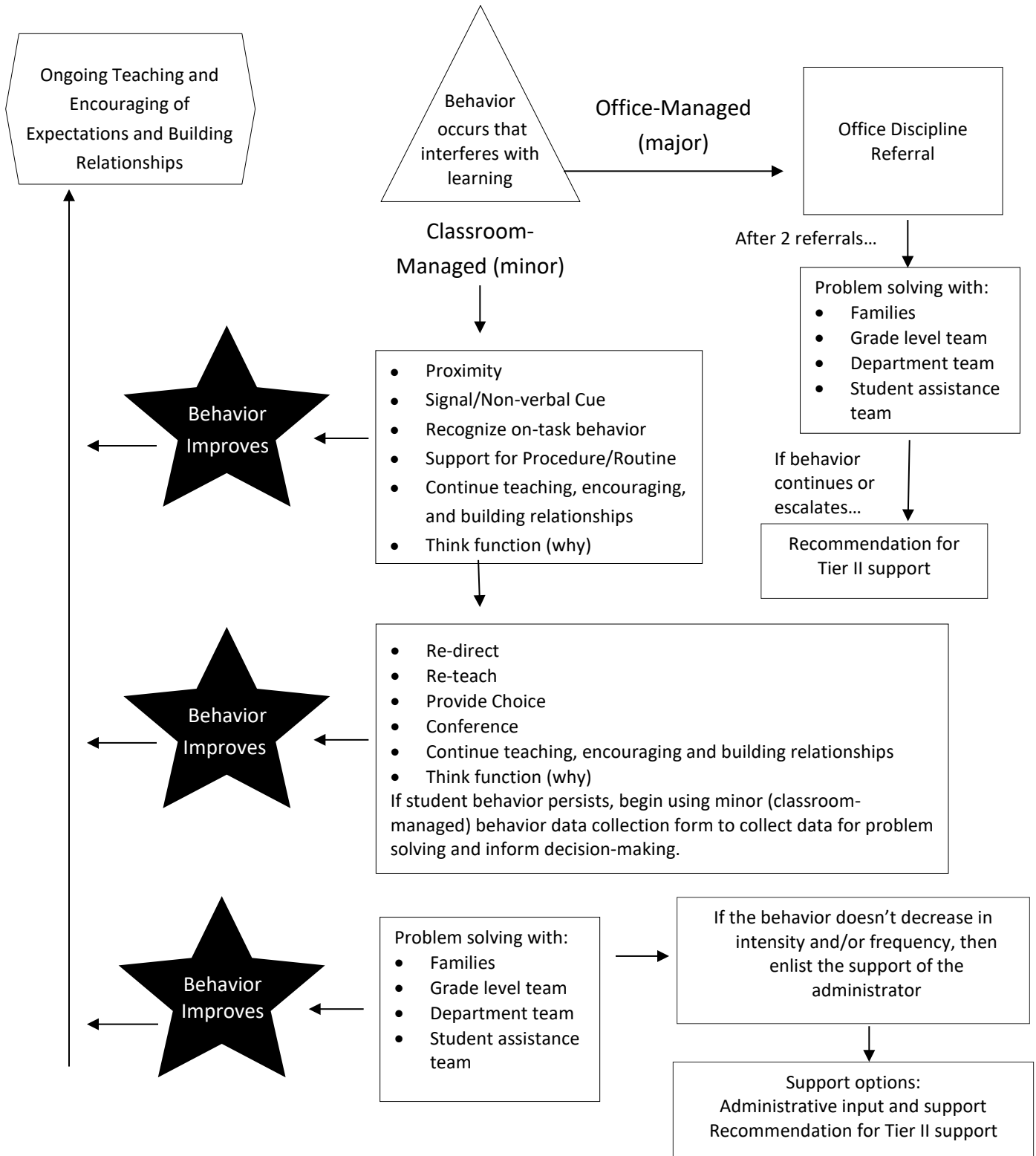


Examples of Functions of Behavior:

GET/OBTAIN	ESCAPE/AVOID
Choice	Tasks: demand or request
Attention (interaction with peers or adults)	A specific person or group of people
Objects	Objects (undesired)
Activity (desired/pleasurable)	Activity (undesired/hated)
Self-stimulation/sensory input	Sensory input
Justice/fairness	Protest a lack of fairness/justice (do not use "revenge")
	Protest a lack of choice (do not use "control")

1.6 Discipline Policies

Discipline Process: Continuum of Support for Discouraging Inappropriate Behavior



Vulnerable Decision Points

Definition: A specific decision that is more vulnerable to the effects of implicit bias and our current state and our immediate triggers

Two parts:

- Elements of the situation
- The person's decision state (internal state)

Activity: Know yourself

What are some common vulnerable decision points (VDP) for many adults in schools?

What do you think may be some VDP for you?

Vulnerable Decision Points

Neutralizing Routine: When you see a problem, stop and ask yourself:

- Is this a Vulnerable Decision Point (VDP)
 - Situation
 - Decision state
- If so, use an agreed-upon alternative response

Sample Neutralizing routines

- "See me after class/at the next break"
- Am I acting in line with my values?
- Delay decision until I can think clearly
- Ask the student to reflect on their feelings/ behavior
- Take 2 deep breaths
- Recognize my upset feeling and let them go
- "I appreciate you, but that's not okay"
- Picture this student as a future doctor/lawyer
- Assume student's best effort at getting needs met
- Model "cool down" strategy

Activity: Neutralizing Routines

Brainstorm neutralizing routines that you may have used or might plan to use...

How do you share this information with others in your building?

Additional Strategies

- **Connection before Correction**
- **Calm Corners**
- **Validation:** don't try to fix it in the moment; instead use validating statements: "What can I help you with?", "It sounds like you are really struggling"
- **Encouraging language**
- **Conferencing with the student**
- **Prompting the use of SEL strategies**
- **Offering choice:** encouraging cooperation through empowerment
- **Limit setting:** 3 steps: (1) state the request clearly and concisely; (2) provide limited, but reasonable choice; (3) use instructive consequences that hold children accountable for their actions
- **Redirection/prompting:** reminding the student of task without commenting on the off-task behavior
- **De-escalation strategies**

Alternative to Suspension

- Problem solving/contracting
- Restitution
- Mini-course or skill modules
- Parent involvement/supervision
- Counseling
- Community service
- Behavior monitoring
- Coordinated behavior plans
- Alternative programming
- In-school suspension

Scenario

“Ashley just transferred into my 5th grade classroom after being placed in foster care. I wanted to make her feel welcome. I moved to put my hand lightly on her shoulder when I was explaining an assignment and she slapped my hand away. Then she stared at me defiantly.”

Developing Teacher Response:

“Why she just decided to slap me is beyond me. I was trying to be helpful & welcoming. Her reaction was totally out of proportion to the situation. Physical aggression simply cannot be tolerated or excused. She needed to learn that right away. There had to be immediate and significant consequences if I’m to maintain order in my classroom. When I tried to remove Ashley to the office, she just lost it. Instead of complying, she chose to struggle and started kicking me. I don’t like to see students suspended from school, but Ashley needs to learn that she cannot behave that way in school.”

Trauma Sensitive Teacher Response:

“I must have frightened Ashley without meaning to. It’s clear she does not want to be touched. She may have other triggers, as well. Right now she is hyper-aroused & feels cornered. If I put any extra demands or expectations on her right now, she could escalate & that will just make the situation worse. I told Ashley we would talk about what just happened when she calms down. I need to help her feel safe or she won’t be able to learn in my classroom. I know it’s common for kids in foster care to have trauma. I need to find out more about what her needs are, maybe from her school records or from her foster parents & the caseworker. If I need to, I’ll contact our Building Consultation Team for support.”

1.7 Professional Development Wrap Up

Checklist for High Quality Professional learning (HQPD) Training

Before Training	PREPARATION
	1. Provides a description of the training with learning objectives prior to training.
	2. Provides readings, activities, and/or questions to think about prior to the training.
During Training	3. Provides an agenda (i.e., schedule of topics to be presented and times) before at the beginning of the training.
	4. Quickly establishes or builds on previously established rapport with participants.
	INTRODUCTION
	5. Connects the topic to participants' context (e.g., community, school, district).
	6. Includes the empirical research foundation of the context (e.g., citation, verbal references to research literature, key researchers).
	7. Content builds or relates to participants' previous professional learning.
	8. Aligns with school/district/state/federal standards or goals.
	9. Emphasizes impact of content on student learning outcomes.
	THE PROFESSIONAL LEARNING PROVIDER
	10. Builds shared vocabulary required to implement and sustain the practice
	11. Provides examples of the content/practice in use (e.g., case studies, vignette)
	12. Illustrates the applicability of the material, knowledge, or practice to the participants' context
	ENGAGEMENT
	13. Includes opportunities for participants to practice and/or rehearse new skills
	14. Includes opportunities for participants to express personal perspectives (e.g., experiences, thoughts on concepts)
	15. Includes opportunities for participants to interact with each other related to training content
	16. Adheres to agenda and time constraints
	EVALUATION
	17. Includes Opportunities for participants to reflect on learning
18. Includes discussion of specific indicators - related to knowledge, material, or skills provided by the training - that would indicate a successful transfer to practice.	
19. Engages participants in assessment of their acquisition of knowledge and skills	
After Training	MASTERY
	20. Details follow-up activities that require participants to apply their learning in a new setting or context.
	21. Offers opportunities for continued learning through technical assistance and resources.
	22. Describes opportunities for coaching to improve fidelity of implementation.

Noonan, Langham, and Gaumer (2013)



Annual Professional Development and Action Plan for Aligning Trauma Sensitive Practices 2022-2023

*The team should identify three to four priorities for implementation during the upcoming school year.
This example assumes school staff do not have prior training in trauma.

Year 1

Post Training - Complete Trauma Sensitive Checklist to establish priorities and guide your plan. [http://www.tolerance.org/sites/default/files/general/trauma%20sensitive%20school%20checklist%20\(1\).pdf](http://www.tolerance.org/sites/default/files/general/trauma%20sensitive%20school%20checklist%20(1).pdf)

AUGUST Preparing for a New Year

- Planning to build buy-in- creating your sense of urgency
- Revisit Teams - build a guiding coalition
- Schedule staff training for trauma awareness - consider direct professional learning, book studies, videos/movies (Resource Guide)
- Review Data through a trauma lens by thinking about the types of needs that students bring to school
- Review Building VTSS Implementation Plan (how to build an action plan, barriers, identify programs already in place that could be built upon or enhanced) - remember to review your strategic plan and division initiatives.
- Determine whether data and VTSS implementation plan indicate a need for professional learning

SEPTEMBER Kicking Off a New Year (Take & Teach)

- Professional Learning: Understanding the impact of trauma on behavior and learning, building relationships, feedback and acknowledgments systems for staff and students, self-care.
- Collect effectiveness data on professional learning.
- Review enhanced matrix with staff and students. Teach any new behaviors.
- Work on creating a welcoming environment for students, staff and families. Ex: Greet students at the entrance of the door each morning, relationship mapping, classrooms are structured in a predictable and emotionally safe way, and positive family phone calls.
- Provide time during a staff meeting for staff members to draft a self-care plan.
- Collect fidelity data on areas targeted by the school (Ex: relationships, matrix)

OCTOBER Feedback for Success (Take & Teach)

- Professional Learning: Behavior specific praise, anchoring acknowledgement systems (classroom to schoolwide), responding to behaviors with consistency (using flowchart).
- Conduct informal walkthroughs (peer-to-peer, administrator) to look for evidence of professional learning strength and areas of growth.

NOVEMBER Celebrating What's Working

- Sharing of best practices that are happening right now (self-care, relationship building, feedback & acknowledgment).
- Sharing data (any reteaching?)
- Celebrate successes

JANUARY Booster

- Re-teaching expectations
- Prevention- planning ahead for any spike in data

FEBRUARY Preparing for the Tiered Fidelity Inventory

- Understanding the purpose
- Understanding the process
- Understanding the expectations for conducting and reporting

MARCH Action Planning

- Using the TFI outcomes for planning
- Use data for planning
- Review the Trauma-Sensitive Checklist - where are we?

APRIL Sustaining and Succession Planning

- Solicit staff, student and family feedback (formal survey or focus groups)
- Planning for summer training
- Re-teaching expectations (after break)
- Plan for self-care, feedback and acknowledgement to support testing month

MAY/JUNE What's Next?

- Planning for summer training
- Review staff, family and student feedback

SUMMER

- Attend training
- Develop professional learning timeline for 2020-2021

Resilience Building Block 

Resilience Building Block 

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**virginia Tiered Systems of Support
Tiered Fidelity Inventory Companion
Guide: Mental Health Planning Tool**



Virginia Tiered Systems of Supports Tiered Fidelity Inventory Companion Guide: Mental Health Planning Tool

INTRODUCTION

Increasingly, researchers have recommended teaching social-emotional competencies within a prevention-focused, multi-tiered public health model, because simply adopting a curriculum does not lead to adequate implementation or improved outcomes (Greenberg, Domitrovich, Weissberg, & Durlak, 2017; Merrell & Gueldner, 2010). Positive behavioral interventions and supports (PBIS) provides an ideal framework for promoting social-emotional competencies to improve outcomes for the whole child. Like PBIS, implementing social emotional curricula has also been shown to improve student behavior outcomes, such as decreasing emotional distress and conduct problems, and increasing academic scores (Durlak et al., 2011; Payton et al., 2008).

Purpose of the TFI Companion Guide: Mental Health Planning Tool

The goal of using the MH Enhancements is the implementation of practices that promote mental wellness for all students and responsiveness to their mental health needs, e.g., responses to trauma, mental illness, etc. Recognizing that a well implemented PBIS system is critical to the building of a system of supports for mental health, the *TFI Companion Guide: Mental Health Planning Tool* provides guidance for embedding mental health supports into a school's tiered system of support for behavior.

How to use the TFI Companion Guide: Mental Health Planning Tool :

The *TFI Companion Guide: Mental Health Planning Tool* is designed to assist school leadership teams seeking to build systems and implement practices that promote and support student mental health. Teams might begin implementing tiered systems of supports for behavior with a mental health lens from the start or may examine their mental health practices after the initial implementation of behavioral supports has taken place.

It is intended that the *TFI Companion Guide: Mental Health Planning Tool* will be used as part of a comprehensive plan to embed mental health supports in a school. It is especially important that this plan address not only technical changes (i.e., adaptations to actual practices or instruction), but also adaptive changes (i.e., changes in values, beliefs, roles, relationships, and approaches to work). Strategies to identify and address the mental wellness needs of staff should be included in the plan as well.



Virginia's three-day Tier 1 training *Trauma Sensitive Schools in VTSS* provides a strong foundation for broadening the lens of focus while building/improving tiered supports for behavior. It is highly recommended that schools seeking to build mental health supports include this training in their comprehensive plan for implementing mental health tiered supports .

The *TFI Companion Guide: Mental Health Planning Tool* is not an additional fidelity of implementation tool, but rather an action planning resource that teams can use to improve their implementation. The document does not stand alone, but is used as a companion document to the SWPBIS TFI. Each mental health enhancement is aligned to a single item of the TFI to facilitate assessment and action planning for fidelity of implementation. After completing the SWPBIS TFI, teams can use the *TFI Companion Guide: Mental Health Planning Tool* to assess and improve their mental health supports. Teams may choose to (a) review the entire *TFI Companion Guide: Mental Health Planning Tool*; (b) consult items from the TFI that are in place, i.e., to build on strengths; or (c) assess items where the TFI indicates need for improvement.



MENTAL HEALTH ENHANCEMENTS

Criteria Scale: NI = Not Implementing, PI = Partially Implementing, FI = Fully Implementing

TIER ONE				
Subscale: Teams				
Feature	Mental Wellness/Health Enhancements	What does that look like?	Possible Data Sources	Criteria
<p>1.1 Team Composition Tier 1 team includes a Tier 1 systems coordinator, a school administrator, a family member and individuals able to provide a) applied behavioral expertise, b) coaching expertise, c) knowledge of student academic and behavior patterns, d) knowledge about the operations of the school across grade levels and programs, and for high</p>	<p>Tier I team includes community partner(s) with expertise in mental health and wellness.</p>	<p>Role and function of community partners related to Tier 1 implementation are explicitly stated in MOU.</p>	<p>Memorandum Of Understanding (MOU) with community partner agency(ies)</p> <p>Meeting minutes</p>	<p>NI = no community partner has been identified</p> <p>PI= attendance of community partner is less than 80%</p> <p>FI = community partner fulfills identified role and attendance is at or above 80%</p>



<p>schools, e) student representation.</p>				
<p>1.2 Team Operating Procedures Tier 1 team meets at least monthly and has a) regular meeting format/agenda, b) minutes, c) defined meeting roles, and d) a current action plan.</p>	<p>The Tier I team’s vision and mission includes an explicit focus on the social-emotional development and well-being of students. The monthly agenda and action plan include items related to mental health.</p>	<p>Collaborative discussions related to the alignment of mental health with academics and behavior. For example, if a school is experiencing concerns with bullying or threat in the school based on data, the team could create a targeted SEL lesson to address these concerns in every homeroom.</p> <p>Teams review relevant community data, as well as school data as they establish measurable goals that include mental health outcomes (climate data, student/family surveys)</p>	<p>Vision and mission statements</p> <p>Tier I team meeting minutes</p> <p>Tier I team action plan School Improvement/ Strategic Plan</p>	<p>NI = vision and mission statements, meeting minutes, and action plan do not include SE development and well-being of students</p> <p>PI= vision and mission statements include focus on MH, but minutes lack evidence of attention to SE development and well-being of students OR team addresses SE development and well-being of students, but it is not explicitly stated in the vision and mission, meeting</p>



				<p>minutes, and/or action plan</p> <p>FI = SE development and student well-being is included in the vision and mission statements and is addressed routinely by the Tier I team as evidenced by meeting minutes and action plan</p>
Subscale: Implementation				
<p>1.3 Behavior Expectations School has five or fewer positively stated behavioral expectations and examples by setting and location for student and staff behaviors (i.e., school teaching matrix defined and in place.)</p>	<p>The school teaching matrix includes social-emotional skills.</p>	<p>School Wide Expectations/The Curriculum should:</p> <ol style="list-style-type: none"> 1. Promote a safe, positive and predictable environment 2. Promote prosocial behaviors 3. Promote social 	<p>Teaching matrix</p> <p>Walk-throughs</p> <p>Staff handbook</p> <p>Student handbook</p>	<p>NI = SE expectations have not been identified</p> <p>PI = SE expectations have been identified but are not included in the matrix</p>



		<p>emotional development</p> <ol style="list-style-type: none"> 4. Linked to social emotional competencies 5. Reflective of the cultural norms and values of families, schools and communities 6. Shared with families to promote consistency between home and school. <p>Ways to integrate this into your matrix include:</p> <ol style="list-style-type: none"> 1. An expectation related to mental health (be resilient, resourceful, inclusive, supportive) 2. Add a "self" column 	<p>Meeting minutes</p>	<p>FI = SE expectations have been identified and are included in the matrix</p>
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		<p>MATRIX: SELF COLUMN</p> <table border="1"> <thead> <tr> <th rowspan="2">TEACHING MATRIX</th> <th colspan="5">SETTINGS</th> </tr> <tr> <th>All Settings</th> <th>Classrooms</th> <th>SELF</th> <th>Hallways</th> <th>Cafeteria</th> </tr> </thead> <tbody> <tr> <td>Respect</td> <td>Be kind Hands/feet to self Help/share with others</td> <td>Effort</td> <td>USE POSITIVE SELF-TALK</td> <td>Use normal voice volume</td> <td>Practice good table manners</td> </tr> <tr> <td>Responsible</td> <td>Recycle Clean up after self</td> <td>Participate in activities</td> <td>MONITOR FEELINGS/EMOTIONS USE CALMING STRATEGIES</td> <td>Walk</td> <td>Replace trays & utensils</td> </tr> <tr> <td>Safe</td> <td>Be alert to your surrounding</td> <td>Follow adult instructions</td> <td>ASK FOR HELP</td> <td>Maintain physical space</td> <td>Clean up eating area</td> </tr> </tbody> </table>	TEACHING MATRIX	SETTINGS					All Settings	Classrooms	SELF	Hallways	Cafeteria	Respect	Be kind Hands/feet to self Help/share with others	Effort	USE POSITIVE SELF-TALK	Use normal voice volume	Practice good table manners	Responsible	Recycle Clean up after self	Participate in activities	MONITOR FEELINGS/EMOTIONS USE CALMING STRATEGIES	Walk	Replace trays & utensils	Safe	Be alert to your surrounding	Follow adult instructions	ASK FOR HELP	Maintain physical space	Clean up eating area		
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<p>1.4 Teaching Expectations Expected academic and social behaviors are taught directly to all students in classrooms and across other campus settings/locations</p>	<p>Social-emotional skills are explicitly taught as well as embedded across the curriculum.</p>	<p>Curriculum supports:</p> <ol style="list-style-type: none"> 1. Freestanding Lessons (explicit teaching) 2. Teaching Practice (project based-learning) 3. Integrate SEL and Academic Curriculum 4. Organizational Strategies that Promote SEL as School-Wide Practices 	<p>Lesson plans Schedule for lesson delivery Walk-through Principal and peer observations</p>	<p>NI = SE skills are not taught PI= SE skills are taught informally or inconsistently FI= Formal system with written schedule is used to explicitly teach and practice SE skills directly to students and informally taught across settings throughout the day</p>																													



<p>1.5 Problem Behavior Definitions School has clear definitions for behaviors that interfere with academic and social success and a clear policy/procedure (e.g., flowchart) for addressing office-managed versus staff-managed problems.</p>	<p>No enhancement needed</p>	<p>Flow chart should include strategies to access safe space and/or counselor in coordination with class managed behavior.</p> <p>Example (Fairfax County): Crisis vs Concern Chart</p>		
<p>1.6 Discipline Policies School policies and procedures describe and emphasize proactive, instructive, and/or restorative approaches to student behavior that are implemented consistently.</p>	<p>The school’s policies and procedures include an explicit focus on SE skill development and well-being of students and are implemented consistently.</p>	<p>For students involved in minor discipline issues, the discipline policy provides a structured opportunity for the student to de-escalate, reflect, and come up with a plan to move forward. In many cases, a restorative chat can be used to resolve the issue between the affected parties.</p> <p>For students involved in major discipline issues resulting in in-school or out-of-school suspension, transition plans are</p>	<p>Discipline policy</p> <p>Student handbook</p> <p>Code of conduct</p> <p>Informal administrator interview</p> <p>School website, brochures, etc.</p>	<p>NI = There is no clear evidence or considerations regarding the SE skill development and well-being of students in policies and procedures</p> <p>PI = Policies and procedures regarding SE skill development and well-being of students are implemented inconsistently</p>



		co-created with the student and communicated to the faculty to support student success.		FI = Policies and procedures allow for the consideration of the SE skill development and well-being of students and administrator reports consistent use
<p>1.7 Professional Development A written process is used for orienting all faculty/staff on four core tier 1 SW-PBIS practices: a) teaching school-wide expectations, b) acknowledging appropriate behavior, c) correcting errors, and d) requesting assistance.</p>	<p>The written process will include a plan to increase awareness and reduce mental illness stigma. Staff are trained in the following: a) the impact of social emotional and mental health issues on the whole child, b) recognition of signs and symptoms, c) appropriate and informed responses and/or referrals, and d) awareness of the array of services available in the</p>	<p>Staff have the knowledge, tools, and resources to promote the positive development of students' social-emotional and mental health or they have ready access to learn more.</p> <p>School leaders proactively schedule staff professional learning on mental health topics (e.g. trauma, anxiety, depression, suicide). Schools also provide professional learning related directly to</p>	<p>Professional development calendar</p> <p>Staff handbook Professional development records</p>	<p>NI = No process for teaching staff is in place</p> <p>PI = Process is informal/unwritten, not part of professional development calendar, and does not include all staff or all four professional development topics</p>



	community for students and families	the school’s identified needs based on data, school climate, and culture throughout the school year.		FI = Formal process and plan for the provision of teaching all staff in all four topics and documentation of staff completion
1.8 Classroom Procedures Tier 1 features (school-wide expectations, routines, acknowledgements, in-class continuum of consequences) are implemented within classrooms and consistent with school-wide systems.	Educators are knowledgeable of and use strategies that promote SEL and relationships between educators and student, student to student, educators and families, educators to educators and connections between children and families and schools.	The classroom teacher values relationships and fosters a safe and open learning environment by providing a daily/class schedule and communicating changes to the normal schedule in advance. Discipline practices are consistent and predictable. The teacher is self-aware about vulnerable decision points, implicit bias, and cultural competence and feels empowered to ask for support when needed. Routines-some eg	Informal walkthroughs Lesson plans Individual classroom data Staff handbook Contact log Attendance sheet	NI = No evidence of routines and practices PI = Inconsistent expectations for routines and practices FI = 80% of staff utilize documented routines and practices with fidelity



		Classroom organization- Safe places in classroom		
<p>1.9 Feedback and acknowledgment A formal system (i.e., written set of procedures for specific behavior feedback that is a) linked to school-wide expectations and b) used across settings and within classrooms) is in place and used by at least 90% of a sample of staff and received by at least 50% of a sample of students.</p>	<p>Staff encourages, prompts and reinforces the utilization of social emotional skills.</p>	<p>Team considers population and specific mental health needs when developing acknowledgement system. Students are offered a menu of activities that are sensitive to their social emotional needs.</p> <p>For example, students who tend to exhibit characteristics that are internalizing in nature (i.e., withdrawal, isolation, difficulty advocating for needs, etc.) may not feel that a large assembly or celebration is rewarding to them, rather it could actually make their symptoms worse. Instead, these students may prefer to play a board game with a friend or go to the art room, etc.</p>	<p>Informal walkthroughs</p> <p>Lesson plans</p> <p>Feedback from student focus groups</p>	<p>NI = No evidence that prompts and reinforcements exist</p> <p>PI = Inconsistent use of prompts and reinforcement</p> <p>FI = Prompts and reinforcement are integrated into instruction and used with fidelity</p>



<p>1.10 Faculty Involvement Faculty are shown school-wide data regularly and provide input on universal foundations (e.g., expectations, acknowledgements, definitions, consequences) at least every 12 months.</p>	<p>Collectively, administrators and staff encourage and provide opportunities to promote staff wellness, including self care.</p>	<p>School leaders provide their staff the knowledge, tools, and resources about being self-aware and maintaining one's own care;</p> <ol style="list-style-type: none"> 1. Provide professional learning on self care and mindfulness 2. Create safe spaces for staff to talk about the trauma they may have taken on 3. Provide teachers with meaningful resources that can help build a foundation of respect, professionalism, and trust 4. Make an effort to build in moments of gratitude throughout the school year 	<p>Self-care plans Faculty surveys Wellness logs Staff handbook School Climate Survey Attendance Data</p>	<p>NI= No evidence of wellness supports PI= Practices in place but are inconsistent or not written FI= Evidence of practices that support staff wellness</p>



		It is also important to show staff data on mental health issues that are impacting the students.		
1.11 Student/Family & Community Involvement Stakeholders (students, families, and community members) provide input on universal foundations (e.g., expectations, consequences, acknowledgements) at least every 12 months.	School/staff engage students, families, and community in wellness practices.	Partner with families and community members to implement strategies to engage all caregiver and families. Consider the following examples: caregiver workshops, where caregiver-trainers work with other caregivers, electronic or web-based resources available for all families, “mental health first-aid training”	Family surveys Communication plan Calendar/event log	PI = Practices in place but are inconsistent or not written FI = Documentation of the integration of family, school and community partnerships around wellness practices
Subscale: Evaluation				
1.12 Discipline Data Tier 1 team has instantaneous access to graphed reports summarizing problem	The team has access to school and community data related to social emotional and mental health.	School data: exclusionary discipline, attendance, nurse/counselor visits, school climate surveys, risk behavior surveys	School policy Student outcome data	NI = No/limited access to data



<p>behavior events organized by frequency, location, time of day, and by individual student</p>		<p>Community data: FACT database for child abuse/violence trends, substance abuse data</p> <p>Mental Health data a) assess and track implementation fidelity of evidence-based practices, b) track incidents of challenging behavior, c) regularly screen children for social/emotional support needs.</p>	<p>Process for data-informed decision making</p> <p>Climate/youth surveys</p> <p>Universal screener data</p> <p>Community health/wellness data</p>	<p>PI = Lacks access to relevant data needed by teams</p> <p>FI = Teams have access to a full array of relevant data</p>
<p>1.13 Data-based Decision Making Tier 1 team reviews and uses discipline data and academic outcome data (e.g., curriculum-based measures, state test) at least monthly for decision-making.</p>	<p>Tier I team reviews and uses data related to social emotional mental health at least monthly for decision-making.</p>	<p>School employed and community employed staff receive professional learning to understand and interpret data from one another's systems.</p>	<p>Data decision rules</p> <p>Team meeting minutes</p>	<p>NI- No process exists or data are reviewed but not used</p> <p>PI = Data reviewed and used for decision making, but less than monthly</p>



				FI = Team reviews and uses data for decision-making at least monthly. If data indicates a social emotional mental health concern, an action plan is developed to enhance or modify Tier I supports
<p>1.14 Fidelity Data Tier 1 team reviews and uses SW-PBIS fidelity (e.g., SET, BoQ, TIC, SAS, Tiered Fidelity Inventory) data at least annually.</p>	No enhancement needed			
<p>1.15 Annual Evaluation Tier 1 team documents fidelity and effectiveness (including on academic outcomes) of tier 1 practices at least annually (including year-by-year</p>	Tier I team documents mental health and wellness outcomes at least annually (including year-by-year comparisons) and are shared with stakeholders (staff, families, community, district) in a usable format.	Program data such as prevention programs: SEL, suicide, bullying.	<p>Discipline data</p> <p>Intervention data</p> <p>Attendance data (student and staff)</p>	<p>NI = No evaluation takes place or evaluation occurs without data</p> <p>PI = Evaluation conducted, but not</p>



<p>comparisons) that are shared with stakeholders (staff, families, community, district) in a usable format.</p>			<p>Academic data Surveys: student, caregiver, climate, community</p>	<p>annually, or outcomes are not used to shape the Tier I process and/or not shared with stakeholders</p> <p>FI = Evaluation conducted at least annually, with mental health and wellness outcomes shared with stakeholders, with clear alterations in process based on evaluation</p>
TIER TWO				
Subscale: Teams				
<p>2.1 Team Composition: Tier II (or combined Tier II/III) team includes a Tier II systems coordinator and individuals able to provide (a) applied behavioral expertise, (b) administrative</p>	<p>Tier II team membership includes representation of (a) specialized instructional support personnel</p>	<p>Role and function of community partners are explicitly stated in the MOU. The Memorandum of Understanding (MOU) that exists between the school division and mental health</p>	<p>Tier II team meeting minutes and attendance record MOU's</p>	<p>NI = No student support services or community partner representative has been identified and/or roles have not been articulated</p>



<p>authority, (c) knowledge of students, and (d) knowledge about operation of school across grade levels and programs.</p>	<p>(e.g., school psychologist/counselor/social worker/nurse), (b) a community partner with expertise in mental health/trauma; and their roles have been clearly articulated.</p>	<p>agency will include the following: 1. Mental health and PBIS, as well as the philosophy and approach of a learning model, 2. Expectations for funding, 3. Professional development - including co-training expectations, 4. Data collection, monitoring, and Specific expectations of roles and responsibilities.</p>		<p>PI = Attendance of student support services and community partner representative is less than 80% or roles have not been articulated</p> <p>FI = Student support services and community partner fulfill identified roles and attendance is at 80% or above</p>
<p>2.2 Team Operating Procedures: Tier II team meets at least monthly and has (a) regular meeting format/agenda, (b) minutes, (c) defined meeting roles, and (d) a current action plan.</p>	<p>The agenda and action plan include items related to mental health.</p>	<p>Team regularly reviews availability of Tier II interventions to meet current MH needs, e.g., Do we have an intervention to address grief (data indicate several recent caregiver deaths)</p> <p>The inclusion of community data can ensure that action planning is culturally relevant</p>	<p>Tier II team meeting minutes</p> <p>Tier II team action plan</p>	<p>NI = Meeting minutes and action plan do not include items related to mental health</p> <p>PI = Minutes lack evidence of attention to mental health OR team addresses mental health but it is not explicitly stated in</p>



		and considers home/school/community context of students.		meeting minutes and/or action plan FI = Mental health is addressed routinely by the Tier 2 team as evidenced by meeting minutes and action plan
<p>2.3 Screening: Tier II team uses decision rules and multiple sources of data (e.g., ODRs, academic progress, screening tools, attendance, teacher/family/student nominations) to identify students who require Tier II supports.</p>	No enhancement needed	<p>Screening tool examples:</p> <ul style="list-style-type: none"> ● Student Risk Screening Scale (SRSS) ● The Devereux Students Strengths Assessment (DESSA) ● The Student Risk Screening Scale - Internalizing & Externalizing (SRSS-IE) ● Behavior Assessment System for Children 3rd Edition: Behavioral & Emotional Screening System (BASC-3:BESS) ● Social, Academic, & Emotional Behavior Risk Screener 		



		<p>(SAEBRS)</p> <ul style="list-style-type: none"> ● Strengths and Difficulties Questionnaire (SDQ) ● Systematic Screening for Behavior Disorders & Emotional Screening System (BASC-3:BESS) ● Social, Academic, & Emotional Behavior Risk Screener (SAEBRS) ● Strengths and Difficulties Questionnaire (SDQ) ● Systematic Screening for Behavior Disorders (SSBD, 2nd Edition) ● Social Skills Improvement System - Performance Screening Guide (SSIS-PSG) ● Social, Academic, and Emotional Behavior Risk Screener (SAEBRS) 		
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<p>2.4 Request for Assistance: Tier II planning team uses written request for assistance form and process that are timely and available to all staff, families, and students.</p>	<p>No enhancements needed</p>			
Subscale: Interventions				
<p>2.5 Options for Tier II Interventions: Tier II team has multiple ongoing behavior support interventions with documented evidence of effectiveness matched to student need.</p>	<p>Tier II team has multiple mental health evidence-based interventions matched to student needs and provided by individuals trained in the intervention.</p>	<p>Examples of EB interventions: -small group targeted SEL skills and supports -small group self-regulation skills and supports -support groups (e.g., substance abuse, death in the family) -resilience skills</p>	<p>Targeted interventions reference guide Evidence of progress monitoring Lesson plans</p>	<p>NI = No evidence-based Tier II interventions are identified with documented evidence of use PI = Evidence-based Tier II interventions are partially implemented with documented evidence of use FI = Evidence-based Tier II interventions are consistently implemented and documented</p>



<p>2.6 Tier II Critical Features: Tier II behavior support interventions provide (a) additional instruction/time for student skill development, (b) additional structure/predictability, and/or (c) increased opportunity for feedback (e.g., daily progress report).</p>	<p>Tier II mental health interventions include: (d) a plan for generalization of the targeted skill(s) across environments (including home) (e) a plan to communicate and engage staff and families to support the intervention.</p>	<p>An example of this could be social skills instruction for those students who demonstrate social skills acquisition deficits across multiple settings.</p> <p>Plan:</p> <ol style="list-style-type: none"> 1. Assess to identify common skill deficits 2. Gather lessons 3. Plan for generalization and maintenance 4. Establish session procedures 5. All staff, families, and students are notified and aware of interventions, understand their role and actively participate in the intervention 6. Teach social skill lessons (who is qualified to teach these lessons?) 7. Progress monitor 8. Evaluate program outcomes (did it work?) 		<p>NI = No plan for generalization or communication exists</p> <p>PI = Plans for generalization and/or communication exist but is not consistently implemented</p> <p>FI = Plans for generalization and communication exist and are consistently implemented</p>
<p>2.7 Practices Matched to Student Need:</p>	<p>No enhancement needed</p>			



<p>A formal process is in place to select Tier II interventions that are (a) matched to student need (e.g., behavioral function), and (b) adapted to improve contextual fit (e.g., culture, developmental level).</p>				
<p>2.8 Access to Tier I Supports: Tier II supports are explicitly linked to Tier I supports, and students receiving Tier II supports have access to, and are included in, Tier I supports.</p>	<p>Mental health interventions are (a) coordinated with the Tier 1 social emotional learning curriculum and skill building, (b) communication links ensure student progress continues across multiple settings.</p>	<p>All staff, families, and students are notified and aware of interventions, understand their role and actively participate in the intervention</p>	<p>Student and school schedules Intervention plans Communication plans</p>	<p>NI = No evidence of A and B PI = Evidence of A or B FI = Evidence of A and B are present</p>
<p>2.9 Professional Development: A written process is followed for teaching all relevant staff how to refer students and implement each Tier II intervention that is in place.</p>	<p>No enhancement needed</p>			
<p>Subscale: Evaluation</p>				



<p>2.10 Level of Use: Team follows written process to track proportion of students participating in Tier II supports, and access is proportionate.</p>	<p>No enhancement needed</p>			
<p>2.11 Student Performance Data: Tier II team tracks proportion of students experiencing success (% of participating students being successful) and uses Tier II intervention outcomes data and decision rules for progress monitoring and modification.</p>	<p>The Tier II Team monitors and adjusts interventions in student wellness plans to improve mental health and social emotional outcomes.</p>	<p>School and community employed staff are proficient at using internal and external sources of data/tools to evaluate student outcomes and adjust interventions.</p>	<p>Agenda and minutes for Tier II Team meetings Family communication logs Intervention tracking (e.g., student attendance logs, frequency of intervention)</p>	<p>NI = Student data not monitored PI = Student data is inconsistently discussed and/or decisions not clear and/or percentages not determined FI = Student data (% of students being successful) monitored and used at least monthly, with data decision rules established to alter (e.g., intensify or fade) support, and shared with stakeholders</p>



<p>2.12 Fidelity Data: Tier II team has a protocol for ongoing review of fidelity for each Tier II practice.</p>	<p>No enhancement needed</p>			
<p>2.13 Annual Evaluation: At least annually, Tier II team assesses overall effectiveness and efficiency of strategies, including data-decision rules to identify students, range of interventions available, fidelity of implementation, and on-going support to implementers; and evaluations are shared with staff and district leadership.</p>	<p>No enhancement needed</p>			
Tier Three				
Subscale: Teams				
<p>3.1 Team Composition: Tier III systems planning team (or combined Tier II/III team) includes a Tier III systems coordinator and individuals who can provide (a) applied behavioral expertise, (b) administrative authority, (c) multi-agency supports (e.g., person centered planning, wraparound, RENEW) expertise, (d) knowledge of students,</p>	<p>Tier III team membership includes representation of (a) specialized instructional support personnel (e.g., school psychologist/counselor/social worker/nurse),</p>	<p>Team includes licensed individuals with mental health expertise and is knowledgeable/ experienced with Functional Behavior Assessment (FBA), Cognitive Behavioral Therapy (CBT), and wrap-around services. The Release of Information (ROI) with community partners includes expectations around</p>	<p>Tier III team meeting minutes and attendance record Release of Information (ROI)</p>	<p>NI = No student support services or community partner representative has been identified and/or roles have not been articulated PI =Attendance of student support services and community partner</p>



<p>and (e) knowledge about the operations of the school across grade levels and programs.</p>	<p>(b) a community partner with expertise in mental health/trauma; and their roles have been clearly articulated.</p>	<p>participation in individual (Tier 3) meetings.</p>		<p>representative is less than 80% or roles have not been articulated</p> <p>FI = Student support services and community partner fulfill identified roles and attendance is at 80% or above</p>
<p>3.2 Team Operating Procedures: Tier III team meets at least monthly and has (a) regular meeting format/agenda, (b) minutes, (c) defined meeting roles, and (d) a current action plan.</p>	<p>Tier III Team maintains student records and confidentiality in accordance with policies of the school division and other participating agencies.</p>	<p>The team members adhere to:</p> <ol style="list-style-type: none"> 1. Written confidentiality procedures 2. Signed releases of information 3. Written system for securing records/documentation. <p>Example: Quick Reference Grid on Information Sharing Laws in Virginia</p>	<p>Team norms</p> <p>Division policy around student records</p> <p>Confidentiality agreements</p> <p>Release of information</p> <p>Sign off sheets</p>	<p>NI = No evidence of written procedures, review of policies and compliance</p> <p>PI = Inconsistent evidence of written procedures, review of policies and compliance</p> <p>FI = Consistent evidence team members review, understand, and adhere to school</p>



				policies related to procedures for information sharing and releases
<p>3.3 Screening: Tier III team uses decision rules and data (e.g., ODRs, Tier II performance, academic progress, absences, teacher/family/student nominations) to identify students who require Tier III supports.</p>	No enhancement needed	<p>Screening tool examples:</p> <ul style="list-style-type: none"> ● Student Risk Screening Scale (SRSS) ● The Devereux Students Strengths Assessment (DESSA) ● The Student Risk Screening Scale - Internalizing & Externalizing (SRSS-IE) ● Behavior Assessment System for Children 3rd Edition: Behavioral & Emotional Screening System (BASC-3:BESS) ● Social, Academic, & Emotional Behavior Risk Screener (SAEBRS) ● Strengths and Difficulties Questionnaire (SDQ) 		



		<ul style="list-style-type: none"> ● Systematic Screening for Behavior Disorders & Emotional Screening System (BASC-3:BESS) ● Social, Academic, & Emotional Behavior Risk Screener (SAEBRS) ● Strengths and Difficulties Questionnaire (SDQ) ● Systematic Screening for Behavior Disorders (SSBD, 2nd Edition) ● Social Skills Improvement System - Performance Screening Guide (SSIS-PSG) ● Social, Academic, and Emotional Behavior Risk Screener (SAEBRS) 		
<p>3.4 Student Support Team: For each individual student support plan, a uniquely constructed team exists (with</p>	No enhancement needed	Documentation of caregiver, family and student participation in the selection around team members;		



input/approval from student/family about who is on the team) to design, implement, monitor, and adapt the student-specific support plan.		opportunities for family and student participation documented.		
Subscale: Resources and Support				
3.5 Staffing: An administrative plan is used to ensure adequate staff is assigned to facilitate individualized plans for the students enrolled in Tier III supports.	An administrative plan includes procedures are in place for a) access a professional who is qualified to perform a mental health assessment, and b) access a school-level team of individuals trained in crisis response as needed to address a mental health emergency.,	Qualifications are outlined for individuals to perform assessments, provide specialized interventions , and respond to crisis interventions. Listing of individuals who are trained/licensed to perform assessments, provide specialized interventions, Listing of crisis team members, training and systems in place to access the team in an emergency situation For example: Mandt	Written procedures with identified roles and responsibilities Job descriptions of individuals allocated to Tier III supports MOU or collaborative agreement with outside agencies for support	NI = No access to trained professionals or a school team PI = Limited access to trained professionals and/or a school team FI = Full access to trained professionals and a school team
3.6 Student/Family/Community Involvement:	No enhancement needed	Releases of information sharing with agencies providing wrap-around		



<p>Tier III team has district contact person(s) with access to external support agencies and resources for planning and implementing non-school-based interventions (e.g., intensive mental health) as needed.</p>		<p>supports and evidence of collaboration</p>		
<p>3.7 Professional Development: A written process is followed for teaching all relevant staff about basic behavioral theory, function of behavior, and function-based intervention.</p>	<p>A written process is followed for teaching all relevant staff a) the difference between a mental health crisis and concern, b) how to implement a student's support plan, and c) a procedure to support staff.</p>	<p>Mental health crisis is defined and procedures/protocols are clearly outlined and communicated; training records/signature sheets of individuals trained on the individual's plan; systems are in place to support staff.</p>	<p>Staff handbook Evidence of relevant staff members training of each student's individual plan (e.g. signature page attached to plan) School policy</p>	<p>NI= No process for teaching relevant staff PI = At least one written process is in place for teaching relevant staff FI = All three written processes exist for teaching relevant staff</p>
<p>Subscale: Support Plans</p>				
<p>3.8 Quality of Life Indicators: Assessment includes student strengths and identification of student/family preferences for individualized support options to meet their stated needs</p>	<p>No enhancement needed</p>	<p>Individual support plan includes sections that address life domains</p>		



across life domains (e.g., academics, health, career, social).		Fairfax - Return to Learn		
3.9 Academic, Social, and Physical Indicators: Assessment data are available for academic (e.g., reading, math, writing), behavioral (e.g., attendance, functional assessment, suspension/expulsion), medical, and mental health strengths and needs, across life domains where relevant.	No enhancement needed			
3.10 Hypothesis Statement: Behavior support plans include a hypothesis statement, including (a) operational description of problem behavior, (b) identification of context where problem behavior is most likely, and (c) maintaining reinforcers (e.g., behavioral function) in this context.	No enhancement needed			
3.11 Comprehensive Support: Behavior support plans include or consider (a) prevention strategies, (b) teaching strategies, (c) strategies for	The school has/collaborates on proactive plans (e.g. community based wrap-around plans) for students	Comprehensive support for mental health includes. (a) collaboration/communication plan with school, families, and community ((e.g., residential, hospital, private day) (b)	Tier III student support plans Re-entry plan	NI = No evidence of transition planning or collaboration PI =Transition and/or collaboration around



<p>removing rewards for problem behavior, (d) specific rewards for desired behavior, (e) safety elements where needed, (f) a systematic process for assessing fidelity and impact, and (g) the action plan for putting the support plan in place.</p>	<p>transitioning back to school from treatment programs (e.g., residential, hospital, private day).</p>	<p>release of information that ensures pertinent information is shared and with who (c) designated support staff member to be the contact for the student (d) safety plan (e) process for monitoring transition</p>		<p>student support plans is inconsistent or plans are not implemented consistently</p> <p>FI = Documentation of collaboration with student support plans exists and plans are implemented consistently</p>
<p>3.12 Formal and Natural Supports: Behavior support plan(s) requiring extensive and coordinated support (e.g., person centered planning, wraparound, RENEW) documents quality of life strengths and needs to be completed by formal (e.g., school/district personnel) and natural (e.g., family, friends) supporters.</p>	<p>Student support plan(s) requiring extensive and coordinated support (e.g., person centered planning, wraparound, RENEW) documents quality of life strengths and needs to be completed by formal (e.g., school/district personnel) and natural (e.g., family, friends) supporters.</p>	<p>Comprehensive support for mental health includes. (a) collaboration/communication plan with school, families, and community ((e.g., residential, hospital, private day) (b) release of information that ensures pertinent information is shared and with who (c) designated support staff member to be the contact for the student (d) safety plan (e) process for monitoring transition</p>	<p>Student support plans</p>	<p>NI = Plan does not include specific actions, or there are no plans with extensive support</p> <p>PI = Plan includes specific actions, but they are not related to the quality of life needs and/or do not include natural supports</p> <p>FI = Plan includes specific actions,</p>



				linked logically to the quality of life needs, and they include natural supports
3.13 Access to Tier I and Tier II Supports: Students receiving Tier III supports have access to, and are included in, available Tier I and Tier II supports.	No enhancement needed			
Subscale: Evaluation				
3.14 Data System: Aggregated (i.e., overall school-level) Tier III data are summarized and reported to staff at least monthly on (a) fidelity of support plan implementation, and (b) impact on student outcomes.	Tier III team collects, analyzes, and reports on aggregated data regarding mental health referrals and interventions to recommend/inform division policy, staffing, financing, etc.		Reports to staff Staff meeting minutes Procedures for identifying, collecting, analyzing, and reporting data points	NI = No procedures for identifying, collecting, analyzing, and reporting data points PI = Inconsistent utilization of data collection FI = Data is collected, analyzed and reported on student outcomes at least quarterly
3.15 Data-based Decision Making:	No enhancement needed			



<p>Each student’s individual support team meets at least monthly (or more frequently if needed) and uses data to modify the support plan to improve fidelity of plan implementation and impact on quality of life, academic, and behavior outcomes.</p>				
<p>3.16 Level of Use: Team follows written process to track proportion of students participating in Tier III supports, and access is proportionate.</p>	<p>No enhancement needed</p>			
<p>3.17 Annual Evaluation: At least annually, the Tier III systems team assesses the extent to which Tier III supports are meeting the needs of students, families, and school personnel; and evaluations are used to guide action planning.</p>	<p>No enhancement needed</p>			



References

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Barrett, S., Eber, L., McIntosh, K., Perales, K., & Romer, N. (2018). *Teaching social-emotional competencies within a PBIS framework.* OSEP Technical Assistance Center on Positive Behavioral Interventions and Supports. www.pbis.org.

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Reference list

PBIS Cultural Responsiveness Field Guide: Resources for Trainers and Coaches, Milaney Levenson, Kent Smith, Kent McIntosh, Jennifer Rose, Sarah Pinkelman, November 2016,

Extra Resources

Extra Resources

VTSS Trauma Learning Modules

Module	Resource
Introduction	<ul style="list-style-type: none"> • Take 5 • Adverse Childhood Experiences • Learning vs Survival Brain • Why we need Trauma Sensitive Classrooms • What Does a Trauma Sensitive Middle/High School Look Like?
Culture of Wellness (1.10)	<ul style="list-style-type: none"> • Your 'Surge Capacity' Is Depleted — It's Why You Feel Awful • What is Teacher Burnout? • Educator Resilience and Trauma-Informed Self-Care • Educator Stress Spectrum • "What does it mean to take care of yourself?" • Beyond the Cliff Laura van Dernoot Lipsky • Covid's Effect on Teaching • Virtual Calming Room • Job-Related Stress Threatens Teacher Supply • The Why Articles • VTSS Trauma Learning Modules • PBIS Leadership Forum, Culture of Wellness, A3 Session: • Here is an extended resource from Brene Brown and Nagoski on burnout with cutting edge research on the importance of recognizing your stress, completing the stress cycle, and recognizing the impact of human care syndrome. Link to podcast and book information. • Podcast on "What does it mean to take care of yourself?" • Tap in Tap Out Video • Silence Response Checklist • Why so many teachers are leaving, and why others stay • Rough Seas to Smooth Sailing Resources
1.11	<ul style="list-style-type: none"> • VTSS/Former Families Forward Trauma and Trauma Sensitive Schools Training Videos and Fact Sheets • Trauma Sensitive School Checklist • Trauma-Informed Systems Change Instrument • Building Community Resilience

	<ul style="list-style-type: none"> • Virginia HEALS toolkit • Trauma Informed Community Networks in Virginia list
1.3	<ul style="list-style-type: none"> • What is SEL? • 5 Keys to Successful Emotional Learning • SEL Resource Padlet
1.8	<ul style="list-style-type: none"> • Relationship Padlet • Quick Check-in with Students • Virtual Calming Space • The Difference You Make
1.4	<ul style="list-style-type: none"> • The Power of Relationships • Student Voice • Teaching Math as a Social Activity • Educate the Heart • SEL at all levels • SEL self assessment • SEL Barrier Padlet
1.9	<ul style="list-style-type: none"> • Your Words Matter Video • Mr. Jensen Video • Padlet • High School Mantra example • Affirmation Chant • Henrico Recognition Idea • Accentuate the Positive • Self-affirmation activates brain systems • How to Talk to a “Problem Student” Without Them Tuning You Out • CASEL Strengthening Adult SEL
1.5	<ul style="list-style-type: none"> • Allison Sampson-Jackson video • America's School Mental Health Report
1.6	<ul style="list-style-type: none"> • Under the Surface video • Model Code of Conduct • Calming Room • Restorative Circles -Alternatives to Suspension
1.7 & Wrap Up	<ul style="list-style-type: none"> • Moving from ACES to Resilience