PENNSYLVANIA COMMISSION ON CRIME AND DELINQUENCY
SCHOOL SAFETY AND SECURITY COMMITTEE

Model Trauma-Informed Approach Plan: Guidelines for School Entities

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Finally, PCCD would also like to acknowledge and thank the agencies, organizations, and researchers whose efforts and work were instrumental in shaping the development and design of these *Guidelines*.

Introduction

Background: Why Trauma-Informed Schools?

Research suggests that nearly a quarter of students witnessed violence in their homes, schools, and communities in the past year, and that two-fifths of children ages 17 and younger have witnessed violence at some point in their lifetime.[1] The impacts of these traumatic and highly stressful events – psychological, emotional, and neurobiological – can be significant and severe, affecting emotional regulation, memory, cognitive and non-cognitive skills, physical health, and other key parts of a child's development.[2]

In schools, trauma can reveal itself in myriad ways that make learning difficult, including challenges developing language and communication skills, building trusting relationships with peers and adults, limited executive functions (e.g., goal setting and planning, anticipating consequences), and effectively engaging in classroom curriculum and instruction.[3]

To help educators and other school personnel understand how trauma can affect students in order to more effectively meet their needs, many schools and communities across the country – and here in Pennsylvania – have implemented a ***Trauma-Informed Approach to Education***.

THINGS TO CONSIDER: Essential Elements of a Trauma-Informed School System[4]

1. Identifying and assessing traumatic stress.
2. Addressing and treating traumatic stress.
3. Teaching trauma education and awareness.
4. Having partnerships with students and families.
5. Creating a trauma-informed learning environment (social/emotional skills and wellness).
6. Being culturally responsive and inclusive.
7. Integrating emergency management and crisis response.
8. Understanding and addressing staff self-care and secondary traumatic stress.
9. Evaluating and revising school discipline policies and practices.
10. Collaborating across systems and establishing community partnerships.

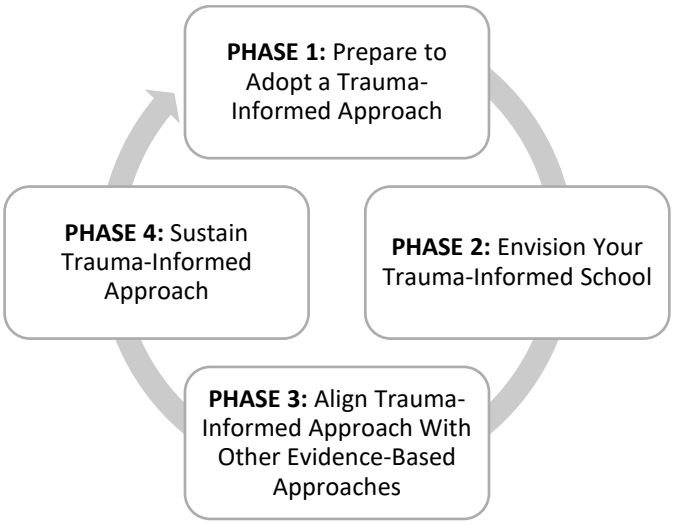
Trauma-informed school communities foster supportive learning environments through a whole-school systems change approach, beginning with promoting awareness and understanding of trauma for all staff to create trauma sensitive environments and leading to more comprehensive trauma responsive efforts that provide universal, selected, and targeted strategies to more effectively meet the educational needs of students who have been impacted by trauma and need additional supports.

Because of their scope and scale, efforts to build and sustain trauma-informed school communities often occur over several years and through a multi-phased approach. Figure 1 provides an overview of

[1] *Children's Exposure to Violence*, Child Trends, 2016.
[2] *Using Positive Behavioral Interventions & Supports (PBIS) to Help Schools Become More Trauma-Sensitive*, Wisconsin Department of Public Instruction, accessed August 8, 2019.
[3] *Using Positive Behavioral Interventions & Supports (PBIS) to Help Schools Become More Trauma-Sensitive*, Wisconsin Department of Public Instruction.
[4] *Essential Elements*, The National Child Traumatic Stress Network.

the key phases of planning, implementing, and sustaining trauma-informed schools, while recognizing the need for ongoing evaluation and continuous improvement.

Figure 1. Multi-Phased Process for Adopting a Trauma-Informed Approach[5]



THINGS TO CONSIDER: Trauma and Substance Abuse

Studies have demonstrated a strong connection between trauma exposure and substance abuse in adolescents. Research suggests that teens who have experienced physical or sexual abuse/assault were three times more likely to report past or current substance abuse than peers who did not have a trauma history. Adolescents with substance use disorders are also significantly more likely than peers to experience traumas resulting from risky behaviors, and may be less able to cope with traumatic events.

For additional information on the intersections of trauma and substance abuse in adolescents, please see *Understanding the Links Between Adolescent Trauma and Substance Abuse: A Toolkit for Providers* from the National Child Traumatic Stress Network (2008).

Supporting Trauma-Informed Approaches in Pennsylvania: Act 18 of 2019

Act 18 of 2019 (SB 144) was signed into law on June 28, 2019, amending Act 44 of 2018 and establishing new requirements and initiatives related to school safety and security. Among its provisions, Act 18 added Section 1311-B to Article XIII-B (School Safety and Security) of the PA Public School Code supporting the creation of a Trauma-Informed Approach Plan. The Act also established additional requirements in the PA Public School Code for training of board members and employees in trauma-informed approaches to education. *(For a full listing of statutory requirements related to trauma-informed approaches, please see Appendix A.)*

[5] Adapted from *Leading Trauma-Sensitive Schools Action Guide*, National Center on Safe Supportive Learning Environments, U.S. Department of Education.

Under Article XIII-B of the PA Public School Code, school entities can apply for funding through the School Safety and Security Committee within the Pennsylvania Commission on Crime and Delinquency (PCCD) for programs that address safety and security, including, but not limited to, those that promote trauma-informed approaches to education.

Section 1306-B. School Safety and Security Grant Program

(j) Specific Purposes *– The committee shall provide grants to school entities for programs that address safety and security, including…*

(21) Trauma-informed approaches to education, including:
(i) Increasing student and school employee access to quality trauma support services and behavioral health care, including the following:
(A) Hiring or contracting with certified guidance counselors, licensed professional counselors, licensed social workers, licensed clinical social workers, school psychologists and other professional health personnel to provide services to students and school employees.
(B) Developing collaborative efforts between the school entity and behavioral health professionals to identify students in need of trauma support and to provide prevention, screening, referral and treatment services to students potentially in need of services.
(ii) Programs providing:
(A) Trauma-informed approaches to education in the curriculum, including training of school employees, school directors and behavioral health professionals to develop safe, stable and nurturing learning environments that prevent and mitigate the effects of trauma.
(B) Services for children and their families, as appropriate, who have experienced or are at risk of experiencing trauma, including those who are low-income, homeless, involved in the child welfare system or involved in the juvenile justice system.

Section 1311-B of the PA Public School Code also requires that PCCD's School Safety and Security Committee develop and adopt a Model Trauma-Informed Approach Plan that school entities must use when applying for School Safety and Security Grants:

Section 1311-B. Trauma-informed approach.

No later than August 31, 2019, the committee shall develop a model trauma-informed approach plan that shall be used by a school entity applying for a grant under section 1306-B(j)(21). The plan must include the following:

(1) Designation of at least one individual who:
(i) is assigned to the school;
(ii) oversees the implementation of the plan, integrating the coordination of services and professional development into the school entity's comprehensive plan; and
(iii) serves as a member of a school's student assistance program.

(2) Coordination of services among:

(i) the student and the student's family;
(ii) the school; and
(iii) county-based services, community care organizations, public health entities, nonprofit youth service providers, community-based organizations, organizations that provide before or after-school care and other similar groups that are located in the community.

(3) Indication of how coordinated services are provided based on a trauma-informed approach with an understanding, recognition and responsiveness to the effects of trauma on education, absenteeism and school completion, including the secondary impact of trauma on school employees.

(4) Utilization of evidence-based or evidence-informed approaches that are tailored to the community to ensure that data is collected and the effectiveness of the trauma-informed approaches are determined.

(5) Professional development and support for school staff which fosters a culture in the school entity and community that is informed about how to understand, recognize and respond to trauma and address the impact of trauma on students as a secondary impact on school employees.

Use of the Guidelines

This document was developed by the Committee to assist school entities applying for funding to support projects related to trauma-informed approaches to education through PCCD's School Safety and Security Grant Program, as required by Section 1311-B of the PA Public School Code. ***The guidelines are intended to provide a minimum set of criteria and elements for inclusion in school entities' Trauma-Informed Approach Plan, and should be customized and adapted to meet the unique needs, capabilities, and goals of specific school communities.*** Please note: These are only guidelines, and a school entity should consult with their solicitor to ensure compliance with all relevant state and federal laws in the development of their specific plans and implementation strategies.

While the document was designed for school entities seeking grant funding, the guidelines and plan template can also serve as a resource for any school entity or community looking to implement trauma-informed approaches to education, whether they are in the beginning stages of exploring and planning or if they already have well-established, comprehensive strategies in place. The guidelines were also designed to provide relevant, evidence-based resources and information for school entities to use as they work to develop and enhance trauma-informed communities.

THINGS TO CONSIDER: Using PCCD School Safety and Security Grants to Support Planning

If your school entity does not currently have a formal plan on how to make your school community trauma-informed, you should include in your application that this plan development will be part of your requested project. You do not have to have a formal plan in place at the time of application, but you will need to complete one as part of your grant. Grant funds are eligible to be used for this purpose. For example, school entities can use their awarded funding to support costs associated with assessment, planning, and stakeholder engagement (such as community event hosting or facilitation costs), as well as other activities that support the planning, development, implementation, and evaluation of an evidence-based trauma-informed

approach. Additional information regarding funding criteria and resources for applicants is available on PCCD's *School Safety and Security* webpage.

As you work on developing your plan or strengthening your existing implementation, the Committee encourages school entities determine their readiness and capacity through a needs assessment *(see "Conducting a Readiness Assessment" on page 21 for additional information)*, as well as engage in a continuous review of what is working well and where improvements can be added to the process. Being trauma-informed is a comprehensive and dynamic undertaking, and one that benefits from incorporating a wide range of perspectives and input from teachers, support staff, administrators, students, their families, and the broader community.

Glossary of Key Terms

1. **Adverse Childhood Experiences (ACEs):**[6] A term associated with a 1995 Centers for Disease Control and Prevention (CDC) and Kaiser Foundation study which identified three common forms of adversity that affect children: physical and emotional abuse, neglect, and household challenges. The study found strong positive correlations between the number of ACEs a person experienced and the likelihood of negative outcomes later in life.

2. **Alternative Education for Disruptive Youth (AEDY):**[7] Programs implemented by a school district, area career and technical school, a group of school districts, or an Intermediate Unit which removes disruptive students from regular school programs in order to provide those students with a sound educational course of study and counseling designed to modify disruptive behavior and return students to a regular school curriculum.

3. **Community Schools:** [8] Public schools that seek to mitigate the impact of poverty on academic performance by meeting the needs of students and families through locally driven partnerships. Community schools create vibrant, safe, and welcoming environments where students are challenged and supported to achieve their maximum potential.

4. **Complex Trauma:**[9] Trauma that happens repetitively and may result in direct harm to the individual and/or interfere with the child's ability to form a secure attachment. Complex trauma describes both children's exposure to multiple traumatic events – often of an invasive, interpersonal nature – and the wide-ranging, long-term effects of this exposure. These events are severe and pervasive, such as abuse or profound neglect. They usually occur early in life and can disrupt many aspects of the child's development and sense of self.

5. **Culturally Responsive:**[10] The valuation, consideration, and integration of individuals' culture, language, heritage, and experiences leading to supported learning and development.

6. **Early Warning System:**[11] Early warning systems use readily available data on attendance, behavior, and course grades to alert teachers and administrators to students who are on a pathway to dropping out of school. Early warning systems help educators know what to look for amid the myriad data points collected about students, and can be implemented at the middle and high school levels – even as early as 6th grade.

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[6] Adverse Childhood Experiences (ACEs), CDC, National Center for Injury Prevention and Control, Division of Violence Prevention.
[7] PA Public School Code of 1949, Article XIX-C. Disruptive Student Programs; Article XIX-E. Private Alternative Education Institutions for Disruptive Students.
[8] *Pennsylvania ESSA Consolidated State Plan*, Pennsylvania Department of Education, May 31, 2019. See also *Community School: A Whole-Child Framework for School Improvement*, IEL and Coalition for Community Schools, April 2017, and D. Jenkins and M. Duffy, *Community Schools in Practice: Research on Implementation and Impact*, Research for Action, January 2016.
[9] *Complex Trauma,* The National Child Traumatic Stress Network.
[10] *Culturally Responsive Systems,* Pennsylvania Training and Technical Assistance Network (PaTTAN).
[11] Early Warning and Response Systems, Everyone Graduates Center.

7. **Every Student Succeeds Act (ESSA):** Signed into law on December 10, 2015 by President Barack Obama, the Every Student Succeeds Act (ESSA) reauthorized the Elementary and Secondary Education Act (ESEA) of 1965. Developed and passed with strong bipartisan support, ESSA replaced No Child Left Behind (NCLB) as the nation's main K-12 education law. Pennsylvania's Consolidated State Plan, required under ESSA, was approved by the U.S. Department of Education in January 2018.

8. **Individualized Education Plan (IEP):**[12] An IEP is a written plan for the provision of services for the education of students with disabilities or gifted students. Under federal and state law, public school entities in Pennsylvania have a responsibility for children "thought-to-be" eligible for special education services and/or accommodations, including locating, identifying, and evaluating all students with suspected disabilities, including but not limited to evaluating a student for who a request for an evaluation has been made. Two criteria exist for an IEP, both of which must be met:
    a. The student must meet one of the 13 disability categories defined by the Individuals with Disabilities Education Act (IDEA); and
    b. The student must need special education (that is, the child requires specifically designed instruction to receive educational benefits).

9. **Multi-Tiered Systems of Support (MTSS):**[13] A standards-aligned, comprehensive school improvement framework for enhancing academic, behavioral and social-emotional outcomes for all students. As part of the MTSS framework, cross-disciplinary teams represented at the local education agency (LEA), school, grade and individual levels use a problem-solving process to integrate evidence-based academic, behavioral, and social-emotional practices matched to student needs and with fidelity of implementation. A continuum of supports and services exist across three tiers (Universal, Secondary, and Tertiary), and is undergirded by high-quality professional learning, cultural responsivity, partnership and meaningful involvement with families, and dynamic decision-making that rests on the use of reliable and valid data sources.
    a. Tier 1 (Universal): Provide preventive, proactive, and universal interventions to support academic instruction for all students.
    b. Tier 2 (Secondary): Provide targeted interventions to support students classified as academically "at risk," who require more intervention than is typically provided within Tier 1 (Universal) supports.
    c. Tier 3 (Tertiary): Requires the most intensive level of intervention for students with the most significant, high intensity academic support needs (assessment based).

10. **Pennsylvania School Climate Survey:** The PDE Office for Safe Schools developed free, online school climate surveys for use by school entities in Pennsylvania. These surveys provide schools with formative and summative climate data for use with needs assessments, program development, and short and long-term planning. The domains measured by the surveys include: Social Emotional Learning, Student Support, High Expectations and Academic Rigor/Challenge, and Safe and Respectful School Climate.

[12] *IEPs and 504 Service Agreements*, Pennsylvania Department of Education.
[13] *Multi-Tiered Systems of Support (Academic)*, Pennsylvania Technical Assistance and Training Network.

11. **Pennsylvania Youth Survey (PAYS):**[14] A biennial survey of Pennsylvania school students in the 6th, 8th, 10th and 12th grades to learn about their behavior, attitudes, and knowledge concerning alcohol, tobacco, other drugs, and violence. Since 1989, PCCD has sponsored and conducted the PAYS to assess use/misuse of harmful substances and behaviors as well as risk factors related to these behaviors and the protective factors that help guard against them.

12. **Positive Behavior Interventions and Support (PBIS):**[15] A proactive, multi-tiered approach to discipline that promotes appropriate student behavior and increased learning. PBIS provides direction and a decision-making framework for developing a comprehensive system of behavior support tailored to individual program and school needs, and is based on a three-tiered model.
    a. Tier 1 (Universal): Provides a system of supports to all students in a school based on preventative practices which emphasize teaching and reinforcing expected student behaviors.
    b. Tier 2 (Secondary): Provides targeted interventions to support students classified as "at risk," who require more intervention than is typically provided within Tier 1 (Universal) supports.
    c. Tier 3 (Tertiary): Requires the most intensive level of intervention for students with the most significant behavioral/emotional support needs (assessment based).

13. **Post-Traumatic Stress Disorder (PTSD):** A clinical diagnosis that applies to people who have experienced a traumatic event and who suffer a particular constellation of symptoms. A person does not need to meet the diagnostic criteria for PTSD to be impacted negatively by trauma or to benefit from trauma-informed care.

14. **Professional Development:**[16] Activities that:
    a. Are an integral part of school and local educational agency strategies for providing educators (including teachers, principals, other school leaders, specialized instructional support personnel, paraprofessionals, and, as applicable, early childhood educators) with the knowledge and skills necessary to enable students to succeed in a well-rounded education and to meet the challenging State academic standards; and
    b. Are sustained (not stand-alone, 1-day, or short-term workshops), intensive, collaborative, job-embedded, data-driven, and classroom-focused.

15. **Secondary Traumatic Stress:**[17] The emotional distress that results when an individual hears about the traumatic experiences of another individual. Distress may result from hearing someone's trauma stories, seeing high levels of distress in the aftermath of a traumatic event, needing to retell a student's story, and/or seeing photos or images related to the trauma. Other terms commonly used to refer to secondary traumatic stress include burnout and/or compassion fatigue.

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[14] *Pennsylvania Youth Survey (PAYS)*, Pennsylvania Commission on Crime and Delinquency.
[15] *Overview of Positive Behavior Interventions and Supports (PBIS)*, Pennsylvania Technical Assistance and Training Network.
[16] ESEA Section 8101(42).
[17] *Building Trauma-Sensitive Schools*, National Center on Safe Supportive Learning Environments, U.S. Department of Education.

16. **Section 504 Plan/Service Agreement:**[18] A Section 504 Plan describes the regular or special education and related aids and services a student needs and the appropriate setting in which to receive those services to meet requirements for students with disabilities under Section 504 of the Rehabilitation Act of 1973. Plans/agreements can include setting forth the specific related aids, services, or accommodations needed by the student, which are implemented in school, in transit to and from school, and in all programs and procedures, so that the student has equal access to the benefits of the school's educational programs, nonacademic services, and extracurricular activities.

17. **Social-Emotional Learning:**[19] The process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions. Social-emotional learning is positively correlated with improved academic achievement and other developmental outcomes.

18. **Student Assistance Program (SAP):** Established under Section 1547 of PA Public School Code, SAP is designed to assist school personnel in identifying issues including alcohol, tobacco, other drugs, and mental health issues which pose a barrier to a student's success. Pennsylvania requires all school entities (school districts, charter schools, and cyber charter schools) to have SAP programs for all grades (elementary and secondary). The PA Network for Student Assistance Services (PNSAS) Regional Coordinators are available to provide technical assistance to support schools in meeting required criteria.

19. **Toxic Stress:** Excessive or prolonged activation of stress response systems in the body and brain. Toxic stress can negatively impact healthy development.

20. **Trauma:**[20] Includes results from an event, series of events or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's cognitive functioning and physical, social, emotional, mental or spiritual well-being.

21. **Trauma-Informed Approach:**[21] Includes a school-wide approach to education and a classroom-based approach to student learning that recognizes the signs and symptoms of trauma and responds by fully integrating knowledge about trauma into policies, professional learning, procedures and practices for the purposes of recognizing the presence and onset of trauma, resisting the reoccurrence of trauma and promoting resiliency tailored to a school entity's culture, climate and demographics and the community as a whole.

22. **Universal Screening:**[22] Screening is conducted to identify or predict students who may be at risk for poor outcomes (e.g., academics, social skills, behavior, mental health). Universal screening assessments are typically brief, conducted with all students at a grade level, and followed by

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[18] 42 U.S.C. § 12102 – ADA, 22 Pa. Code § 15.2, 15.7. See also: *Parent and Educator Resource Guide to Section 504 in Public Elementary and Secondary Schools,* U.S. Department of Education, Office for Civil Rights, December 2016.
[19] *What is SEL?* Collaborative for Academic, Social, and Emotional Learning (CASEL)
[20] PA Public School Code of 1949, Section 102 (Definitions).
[21] PA Public School Code of 1949, Section 102 (Definitions).
[22] Katie Eklund and Eric Rossen, *Guidance for Trauma Screening in Schools*, National Center for Mental Health and Juvenile Justice and Defending Childhood State Policy Initiative, September 2016.

additional testing or short-term progress monitoring to corroborate students' risk status. In screening, attention should focus on fidelity of implementation and selection of evidence-based tools, with consideration for cultural and linguistic responsiveness and recognition of student strengths.[23]

23. **Youth Risk Behavior Surveillance System (YRBSS):**[24] Developed in 1990 by the CDC to monitor health behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults in the United States, the YRBSS includes national, state, territorial, tribal government, and local school-based surveys of representative samples of 9th through 12th grade students. Surveys are administered every two years, conducted by relevant departments of health and education.

[23] American Institutes for Research (AIR)

[24] Youth Risk Behavior Surveillance System (YRBSS), Centers for Disease Control and Prevention.

Before You Get Started

These *Guidelines* were developed to support school entities in their efforts to plan, implement, and/or sustain trauma-informed approaches. Before you begin the plan development process, the Committee recommends considering the following key characteristics and objectives associated with each of the four implementation phases to determine where your school entity currently falls, and how a Trauma-Informed Approaches Plan should be tailored to your specific goals and needs.

Figure 2. Key Characteristics and Objectives of Trauma-Informed Schools by Phase[25]

PHASE 1: Prepare to Adopt a Trauma-Informed Approach

- Leaders have articulated a commitment to adopting a trauma-informed approach *(e.g., leaders have developed and implemented a communications plan for informing staff about plans for integrating a trauma-informed approach)*.
- Resources have been allocated to support the adoption of a trauma-informed approach *(e.g., training to support change has been built into professional development plans for the school year)*.
- All school staff members have a baseline understanding of trauma and its impact on students and staff as well as what it means to be a trauma-informed school.

PHASE 2: Envision Your Trauma-Informed School

- The school entity understands its current capacity related to trauma sensitivity.
- The school has a tailored plan in place for integrating trauma-informed practices across core domains *(e.g., support staff development, create safe and supportive environments, assess needs and provide support, build social and emotional skills, collaborate with students and families, adapt policies and procedures, etc.)*.
- There are processes in place for ensuring maintenance of a trauma-informed workgroup or similar multidisciplinary team *(e.g., MTSS/PBIS, SAP, etc.)*.
- There is a plan in place for monitoring progress towards goals.
- There is a plan in place for evaluating impact related to adopting a trauma-informed approach.

PHASE 3: Align Trauma-Informed Approach with Other Evidence-Based Approaches

- The school entity has an established process for ensuring ongoing alignment between different multidisciplinary workgroups and implementation teams employing similar principles and goals to trauma sensitivities.
- The school entity provides joint professional development activities related to trauma sensitivity and complementary approaches and frameworks *(e.g., MTSS/PBIS, SAP, restorative practices, etc.)*.
- The school entity has formally incorporated trauma-informed practices into other approaches that already include implementation and monitoring processes *(e.g., MTSS/PBIS, SAP, restorative practices, emergency planning, etc.)*.

[25] Adapted from *Leading Trauma-Sensitive Schools Action Guide*, National Center on Safe Supportive Learning Environments, U.S. Department of Education.

PHASE 4: Sustain Trauma-Informed Approach

- The school entity identifies student, staff, and school-level outcomes associated with adopting a trauma-informed approach *(e.g., staff members report increased satisfaction with their work, improved school climate survey scores, etc.)*.
- The school entity updates its trauma-informed approach plans based on data.
- The school entity engages with others who are adopting a trauma-informed approach.
- The school entity educates others in the community about trauma sensitivity and the effects of adopting a trauma-sensitive approach *(e.g., other community members and stakeholders are aware of the school entity's efforts concerning trauma-informed systems)*.

It is important to note that, throughout every phase of implementing trauma-informed approaches, effective communications and messaging are essential. Keeping all stakeholders informed and providing forums for feedback and ongoing input will help ensure that a school entity's trauma-informed approach reflects local needs and has community buy-in and support.

These phases also align with the stages of implementation designed by the National Implementation Research Network (NIRN) and utilized in evidence-based schoolwide intervention frameworks like the Multi-Tiered Systems of Support (MTSS) and Positive Behavior Interventions and Support (PBIS) models for system change: 1) Exploration; 2) Installation; 3) Initial Implementation; and 4) Full Implementation.[26]

THINGS TO CONSIDER: Availability of Funding to Support Phases of Implementation

As described previously in these *Guidelines*, eligible school entities can apply for funding through PCCD's School Safety and Security Grant Program to support activities and costs associated with planning, implementing, and sustaining trauma-informed approaches. Additional information regarding funding criteria and resources for applicants is available on PCCD's *School Safety and Security* webpage.

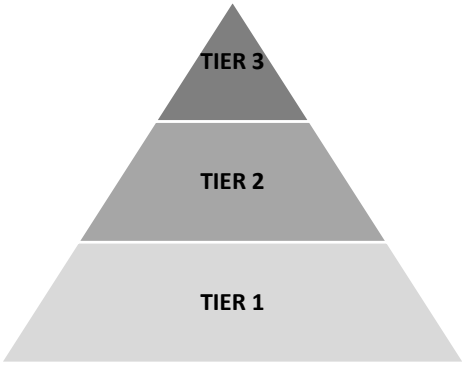
[26] See *Trauma-Informed Approaches in Schools*, Colorado Department of Education, February 2018.

Guidelines for Developing Trauma-Informed Approach Plans

RECOMMENDED Using Multi-Tiered Systems of Support as a Guiding Framework for Building Trauma-Informed School Communities

Many schools across Pennsylvania already utilize a Multi-Tiered Systems of Support (MTSS) framework and Positive Behavior Interventions and Support (PBIS) approach to provide universal, targeted, and intensive interventions and supports to meet both the academic and social-emotional needs of all students. The MTSS framework is a three-tiered, schoolwide approach that promotes early identification and support of students with learning and emotional/behavior needs. Importantly, the MTSS framework's design recognizes and addresses the broader contexts that impact students, schools, and communities: school environment/culture, community, and family partnerships. Within these three tiers are strategies and practices essential to creating a trauma-informed school.

Figure 3. MTSS Framework for Trauma-Informed Schools[27]



TIER 1: Safe Environments and Universally Healthy Students / Creating and Supporting a Trauma-Informed School *(All Students/Staff)*

- **Key Strategies:** Promoting Positive School Climate, Trauma Sensitive Classrooms, Emergency Management, Mental Health First Aid, Behavioral Health, Bullying Prevention, School Therapeutic Services (STS) Education, General Wellness Support & Education
- **Key Partnerships:** School Community (administrators, teachers, counselors, coaches, nurses), Community Mental and Behavioral Health Organizations, Law Enforcement, Youth Development Organizations, Advocacy Groups (e.g., LGBTQ), Families

TIER 2: Early Intervention/ Identifying Students and Staff At-Risk *(Some Students/Staff)*

- **Key Strategies:** Screening Students; Group Interventions (Cognitive Behavioral Therapy, STS Support), Threat Assessment, Peer Support
- **Key Partnerships:** School Community, Community Mental and Behavioral Health Organizations, Families

TIER 3: Intensive Support *(Individual Students/Staff)*

- **Key Strategies:** Intensive Individual and Family Interventions; Trauma-Specific Treatment
- **Key Partnerships:** School Community, Community Mental and Behavioral Health Organizations, Families

[27] Adapted from *Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework*, The National Child Traumatic Stress Network, 2017.

Recognizing the significant body of evidence and implementation science supporting these frameworks, the Committee recommends that school entities integrate trauma-informed approaches within broader MTSS/PBIS systems. The schoolwide system transformation demanded by trauma-informed education approaches aligns well with the stages and principles of implementation science at the core of MTSS/PBIS frameworks. Integrating within a comprehensive, evidence-based schoolwide framework will also help reduce likelihood that trauma-informed efforts become siloed or unsustainable.

Additional information about providing a continuum of interventions and supports through MTSS/PBIS and trauma-informed approaches is available in Appendix B.

REQUIRED Designation of Individual(s) to Oversee Implementation

As described previously, Section 1311-B of the PA Public School Code requires that school entities designate at least one individual within their Trauma-Informed Approach Plan that meets certain criteria:

> *(1) Designation of at least one individual who:*
> *(i) is assigned to the school;*
> *(ii) oversees the implementation of the plan, integrating the coordination of services and professional development into the school entity's comprehensive plan; and*
> *(iii) serves as a member of a school's student assistance program.*

Beyond these minimum statutory requirements, the Committee recommends that school entities consider the following as they develop this section of their Plan:

- ***Identify a Lead:*** It is important to identify a single point person who will be responsible for coordinating the implementation of your trauma-informed plan. This person can be at the district or the school building level, whatever works best for your school entity. The lead should meet the minimum statutory requirements described in Section 1311-B of the PA Public School Code *(see language above)*. If it is a school employee, provisions of an individual contract or collective bargaining agreement should be considered in making the assignment.

- ***Use Community Partners Wisely:*** If you select someone from outside of the school community (such as an employee from a partner university or nonprofit organization) to serve as designated individuals or as a lead coordinator (if using a team-based approach), it is essential that person has the support and buy-in from the school administration, preferably through a written agreement or memorandum of understanding (MOU) that lays out the tasks and responsibilities of the lead coordinator and the school entity. If serving as the only designated individual, the person must also meet other requirements provided in statute (i.e., assigned to the school; oversees implementation of the plan, integrating the coordination of services and professional development into the school entity's comprehensive plan; and serves as a member of the school's Student Assistance Program, or SAP).

- ***Ensure Knowledge of School and Broader Community:*** Whomever is selected must fully understand the needs of the school and the larger school community – including students, teachers/staff, and families. This person should also, at minimum, be familiar with the SAP process and trained on the SAP model, ideally serving as a member of the school entity's SAP team (SAP training required for the lead). This person should also be familiar with the

requirements and resources provided by the school entity for meeting the needs of students with disabilities or those "thought to be" disabled and potentially in need of an IEP or Section 504 Plan.

- ***Authority, Skills, and Training:*** The designated individual(s) and/or lead coordinator must be given the authority to make the plan successful. School entities should select someone for this role who has the skills to gain buy-in and can coordinate a variety of views.

- ***Ensure Appropriate Workload and Scope of Responsibilities:*** The school entity should create a plan for the appropriate distribution of tasks and responsibilities across school personnel, with specific attention to displacing other activities to avoid overworking the designated individual(s) and/or lead coordinator, as well as other staff who may be aiding in planning efforts through a team-based approach.

THINGS TO CONSIDER: Student Assistance Program (SAP) Membership

As described previously, Act 18 of 2019 requires that school entities include their Trauma-Informed Approach Plan as part of their request for PCCD School Safety and Security Grants if applying for funding to support trauma-informed approaches. This Plan must include the designation of at least one individual tasked with the planning and implementation efforts and who also serves as a member of a school's Student Assistance Program (SAP).

As required by Section 1547 of the PA Public School Code and supporting regulations (22 Pa. Code, Chapter 12 – Students and Student Services), all school entities must implement a comprehensive drug and alcohol education, counseling, and support services program. The PA Department of Education has designated SAP as the vehicle to require and assist school entities in meeting this mandate.[28] SAP members should be representatives from any or all of the following groups: administrators, teachers, counselors, psychologists, school social workers, nurses, or other related professional staff. It is recommended that each SAP team – which ideally will be in every school building – consist of at least four members, but the size of the team should be sufficient to effectively handle the caseload.

In addition, representatives from the county behavioral health and drug and alcohol systems should be appointed as liaisons to SAP teams. Additional community-based partners and providers can also be included as members of the SAP team, as appropriate and if they are trained in the Pennsylvania SAP model and work closely with the school entity. Annual written letters of agreement, similar to an MOU, between the liaison organization(s) and the school entity authorize the organization(s) involvement on the SAP team.

School entities should ensure that any information or records shared with team members as part of the SAP process align with its records policy (e.g., obtaining parent/guardian permission to obtain records if student is under the age of 18).

[28] *Drug and Alcohol Education, Counseling and Support Services, BEC 24 P.S. §15-1547,* PDE, July 1, 2002.

TOOLS AND RESOURCES: Integrating SAP Team and Other Schoolwide Efforts

- PA Network for Student Assistance Services (PNSAS) – *Provides information, assistance, and support related to SAP for Pennsylvania school entities.*

- Pennsylvania Training and Technical Assistance Network (PaTTAN) – *Working with PDE's Bureau of Special Education, PaTTAN provides a full array of professional development and technical assistance targeted to improving student results, including efforts focused on MTSS/PBIS and culturally responsive practices.*

- Safe and Supportive Schools – Standards Aligned System (SAS) Portal – *Maintained by PDE, the SAS Portal provides relevant resources for educators in key domains, including school climate and social emotional learning.*

RECOMMENDED Developing a Plan Implementation Team

While it is advisable to have a single point person who will lead the effort, good coordination will only occur if a variety of input and points of view are considered. A team approach to the development and implementation of a school entity's Trauma-Informed Approaches Plan is recommended. In forming such a team, school entities should solicit representatives from the school community who can bring their expertise and experiences to the table so that the plan considers a variety of perspectives. Some suggested team members can include, but are not limited to, the following:

- Administrators (at both the school entity and building levels);
- Teachers;
- Student services staff;
- Education support professionals;
- School district/entity social-emotional learning and/or counseling team members;
- School counselors, school psychologists, and/or school social workers;
- School nurses;
- School security personnel;
- School entity's legal counsel;
- Parents/caregivers/families;
- Students (where age appropriate);
- Public relations and communications professionals;
- Members of the school district/entity's budget team;
- Human relations/resources personnel;
- Community partners (as they are identified);
- Local agencies and systemic partners (including law enforcement, juvenile justice, children and youth, first responders, etc.); and/or
- Others, as identified by the individual school entity.

THINGS TO CONSIDER: Establishing a Plan Implementation Team

- ***Leverage Existing Multidisciplinary Teams:*** In addition, it is likely advisable to make use of existing teams that are already established within the school entity, rather than forming a brand new one for this sole purpose. This will allow for the plan to build on existing efforts.

- ***Engaging Union Organizations and Boards:*** It is very important to engage all the union organizations (where applicable) and appropriate school-entity boards in this process. Utilizing their expertise will allow for a much easier implementation.

RECOMMENDED Conducting a Readiness Assessment

Before beginning the development of your Trauma-Informed Approach Plan, or strengthening an existing one, it is essential to determine the current state of trauma-informed policies, awareness, training, programs, and practices. The intent of this readiness assessment is to help your school entity figure out where you are now so you can determine your strengths and areas of need. It will produce a gaps analysis that will allow you to better focus your efforts and funding. Additionally, it will help you avoid duplication of what is already being done. A readiness assessment should be conducted by the plan implementation team to address key questions and collect relevant information, including the following:

- ***School Entity's Trauma-Informed Implementation Stage:*** What is the overall experience and capacity of your school entity to integrate, enhance, and/or sustain a trauma-informed approach? What is the current status of your school entity's efforts (e.g., no experience at all; universal educational awareness trainings on trauma; development of a coordinated approach; well-trained, well-experienced school community, etc.)?
    - ***Professional Development and Training:*** What trainings are currently being provided to the school entity? Who receives that training, and how often do they occur? How would you assess the quality and depth of these trainings? What could be improved?
    - ***Use of Screenings and Assessments:*** What screenings or assessments (either universal or individual) are currently being used by the school entity and/or community-based providers to evaluate social emotional skills, strengths, and needs, including those related to trauma exposure and impact?
    - ***Perceptions and Buy-in of School Community:*** Does the school entity have data available that specifically measures attitudes and feelings about perceptions, buy-in, and/or overall school culture regarding trauma and trauma-informed approaches (e.g, feedback on needed trainings and professional development as well as evaluations of their effectiveness)?

- ***Quality/Status of Other Schoolwide Frameworks and Prevention Efforts:*** What is the status and quality of your school entity's overall school prevention planning efforts and policies (e.g., drug and alcohol prevention, and behavioral health, suicide prevention, bullying, etc.), including:
    - SAP?
    - MTSS/PBIS implementation?
    - Drug and alcohol prevention?

- Mental health and behavioral health supports?
- Suicide prevention?
- Bullying prevention?
- Violence prevention?
- Teen parenting support programs?
- Other relevant initiatives?

- ***Social-Emotional Learning:*** What universal programs are in place to address the social-emotional needs of students and staff? Has the school entity administered assessments or universal screening tools to evaluate students' social-emotional skills and/or identify students with possible social-emotional or behavioral health needs? If so, what were the results?

- ***Collaboration and Quality of Relationships with Key Partners and Stakeholders, Including Parents, Caregivers, and Families:*** What collaborative efforts/partnerships are already underway that work to address critical aspects of student learning, health/well-being, and safety? How have these relationships and partnerships evolved over time? What key stakeholders need to be brought to the table for efforts related to planning, enhancing, or sustaining trauma-informed approaches within the school community? How do the school entity's current parent/family engagement strategies align with these efforts? Where are improvements needed to ensure awareness and buy-in from parents, caregivers, and families for trauma-informed approaches?

- ***School Climate:*** What efforts has the school entity made to better understand perceptions of students, staff, parents/families, and the community regarding school climate and other relevant information? What opportunities and barriers exist for improving conditions for learning, teaching, and collaborating with schools that could impact efforts to implement and sustain trauma-informed approaches?

- ***Discipline Policies, Practices, and Procedures:*** What policies and procedures are currently in place regarding student discipline? Does the school entity use discipline practices that are trauma-informed, reduce the unnecessary use of exclusion and referrals to law enforcement/juvenile justice, and/or promote positive behavior (e.g., PBIS, restorative practices, etc.)? What does the data indicate regarding disproportionate discipline?

THINGS TO CONSIDER: Evaluating Readiness for Trauma-Informed Systems

Becoming a trauma-informed school community is a systems transformation approach that will require significant buy-in and collective effort. This includes:

- Building, revising, and updating policies and procedures;
- Gaining support and collaboration from all parts of your school community;
- Selecting and implementing evidence-based training on trauma and trauma-informed approaches; and
- Other necessary actions, informed by a needs assessment, data, and other relevant information.

Throughout this process, it is essential to keep students as the focus of your school entity's efforts. While change can often be challenging, the climate and cultural shifts required by trauma-informed approaches will ultimately help adults better serve their students, families,

and communities. To make this change more approachable and less daunting, school entities should consider how they can leverage existing infrastructure and systems, such as MTSS/PBIS frameworks, SAP, parent/family/community engagement efforts, and other systems to create sustainable trauma-informed approaches.

TOOLS AND RESOURCES: Conducting a Readiness Assessment

A variety of tools are available to help school entities conduct an assessment and provide a roadmap of "next steps" to move your plan forward, including but not limited to the following resources:

- Trauma-Sensitive Schools Training Package: Leading Trauma-Sensitive Schools Action Guide, National Center on Safe Supportive Learning Environments, U.S. Department of Education.
- School Health Assessment and Performance Evaluation (SHAPE) System, National Center for School Mental Health.
- The Hexagon Tool: An Exploration Tool, National Implementation Research Network (NIRN), University of North Carolina at Chapel Hill, 2019
- Pennsylvania's Schoolwide Positive Behavior Interventions and Supports System: Training Readiness Checklist
- Wisconsin School Mental Health Needs Assessment and Planning Template, Wisconsin Department of Public Instruction.

REQUIRED Coordinating Services Based on Identified Needs

As described previously, Section 1311-B of the PA Public School Code requires that school entities include within their Trauma-Informed Approaches Plan a description of how it will ensure coordination of services:

> *(2) Coordination of services among:*
> *(i) the student and the student's family;*
> *(ii) the school; and*
> *(iii) county-based services, community care organizations, public health entities, nonprofit youth service providers, community-based organizations, organizations that provide before or after-school care and other similar groups that are located in the community.*

Beyond these minimum statutory requirements, the Committee also encourages school entities to consider the following best practices and recommendations as they identify needs and develop their Trauma-Informed Approach Plans:

- ***Identify Needs within a Tiered Screening and Interventions Framework:*** Once a Readiness Assessment has been completed, school entities should work collaboratively with stakeholders and partners to develop the next phase of implementation: identifying and assessing needs within a tiered screening and interventions framework (MTSS) and creating a plan to coordinate services among various partners.

THINGS TO CONSIDER: Confidentiality and Privacy

- ***Be Mindful of Mandatory Reporting Requirements, Privacy Issues, and Confidentiality Concerns:*** When considering screenings, assessments, referral protocols, and interventions/supports, it is important to ensure compliance with

relevant mandatory reporting laws, as well as those protecting student and family privacy. Under federal and state law, school entities' policies must maintain the confidentiality of student records, including information related to mental and behavioral health services. Programs and procedures, including referral protocols, must be mindful of student and family privacy and, ideally, youth and families from diverse background would be engaged in all aspects of policy and program development to improve likelihood of successful implementation.

- ***Parent/Caregiver/Family Buy-in and Consent***: It is critical – and often legally required – to gain the approval of parents/caregivers/families for components of trauma-informed approaches, such as screenings, referrals, and interventions. If your school entity considers taking a multi-phased approach that includes universal screening, buy-in from parents and families for those universal screening tools would be an important first step. If parents, caregivers, or families are reticent to give this permission, the trauma-informed plan implementation team can consider outreach and engagement of parent/family support groups, such as the Parent Teacher Association (PTA), groups representing the community's cultural identity(ies), LGBTQ+ advocacy and support groups, and/or Title I teams to help improve awareness and earn support for the screening process. Finally, it is important for school entities to consider and develop appropriate strategies for providing supports to students in cases where parent/caregiver/family buy-in and support is not present.

THINGS TO CONSIDER: Parent/Family Buy-in and Consent

- ***Meaningful Engagement of Parents/Families:*** Schools should provide meaningful opportunities for parents, caregivers, and families to engage in program planning, decision-making, and implementation to develop practices that will effectively address students' needs.[29] In Tier 2, families can provide critical information for identifying students in need of more support. Schools should also partner with families to address safety issues and concerns, and in any decisions related to treatment, if needed (Tier 3).[30]

- ***Education for Parents/Families:*** Together with community partners, schools can help teach parents/families about the effects of trauma and stress on students, including information about how to promote coping skills and improve their sense of psychological safety.[31] In addition, this education can help limit the likelihood of re-traumatization by helping parents/caregivers understand that if they feel trauma is a substantial issue in their or their students' lives, they can reach out to a professional who can help them appropriately assess and address needs related to trauma history.

- ***Consider Use of Universal Screening as Part of MTSS Framework:*** As described earlier in this document, universal screening is a core component of MTSS. These universal screenings are used to identify strengths and risks across a broad range of factors, including academic, behavioral, and social-emotional, in order to help identify needs and provide school-based

[29] *Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework*, The National Child Traumatic Stress Network, 2017.
[30] *Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework*.
[31] Ibid.

supports to children. Importantly, these universal screenings should focus on resilience and skills, not traumatic experiences or trauma history. It is not recommended that school entities use a trauma-specific universal screening tool (such as ACEs screening or similar tools) since this may in and of itself result in youth being traumatized or retriggering a prior trauma.

THINGS TO CONSIDER: Universal Screening

- ***Planning Before a Universal Screening is Administered to Ensure Readiness:*** Before moving ahead, school entities should carefully consider and decide whether they have the capacity and resources to proceed with universal screening. This includes ensuring the appropriate levels of supports and services are in place within the school to address areas of need that may emerge from the screening. For school entities at the early stages of implementation, planning informed by a readiness/needs assessment is an essential pre-requisite to screening efforts. *(Please see "Conducting a Readiness Assessment" on pages 21-23 for more information about Readiness Assessments.)*

- ***Choose Screening Tool(s) Carefully:*** After carefully planning and considering readiness, school entities should then determine what type of screening is most appropriate. School entities should consider the following as they explore options:

  - Is the screening tool reliable, valid, and evidence-based?
  - Is it free or can it be purchased for a reasonable cost?
  - How long does it take to administer and score?
  - Does it come with ready access to training and technical support for staff?
  - Does it screen what we want to know? (e.g., social-emotional skill level, type of general mental health or stress risk, resiliency/positive mental and behavioral health and well-being, academics, age range, etc.)[32]
  - Is it inclusive of all people groups (e.g. race, ethnicity, gender, gender expression or identity, sexual orientation, socioeconomic status, disability, religious identity, national origin, English language learner status, etc.)?

- ***Consider Starting Small, Then Scale Up:*** School entities at the beginning phases of implementation may want to consider starting screening efforts with a single grade or smaller pilot to gauge potential issues, such as capacity challenges, before undertaking a larger universal screening.

- ***Additional Screenings, Assessments, and Referral Protocols for Some Students (Tier 2 and 3):*** Beyond the universal screening described above, school entities should describe within their Trauma-Informed Approach Plans systems and strategies for early identification, screening, and progress monitoring for students receiving Tier 2 and/or Tier 3 supports and interventions addressing more complex needs. This should include a formal referral process that articulates how and to whom students should be referred for more specialized services, including information for school staff, parents/caregivers/families, and other relevant stakeholders. These

[32] Adapted School Mental Health Screening Playbook: Best Practices and Tips from the Field, National Center for School Mental Health, University of Maryland School of Medicine, January 2018.

specialized services will vary by school entity and community, but may include a more detailed assessment of an individual student's needs that should be conducted in a safe and confidential manner by qualified and appropriate professionals or providers. These can also include referral protocols for students identified as in need of further supports to appropriate school-based Tier 2 and/or Tier 3 interventions, or to behavioral health providers trained in dealing with traumatic responses (as appropriate) for follow-up. While the referral process may look different from one school entity to another, all schools should ensure adequate systems and resources are in place so referred students receive the supports they need. All schools should also include appropriate documentation and ensure compliance with relevant federal and state laws as well as local policies related to student and family confidentiality.

THINGS TO CONSIDER: Additional Screenings, Assessments and Referral Protocols

- ***Leave Trauma Screenings and Assessments to Well-Trained Professionals:*** A layperson (such as a teacher) should not attempt to conduct a detailed trauma assessment. This should be a role for a trained mental health staff member within the school entity or for community behavioral health providers. As mentioned previously, screenings and assessments related to trauma symptoms or trauma history should only occur at a Tier 2 or Tier 3 level, not universally (Tier 1).

- ***Distinguishing Trauma vs. Disability:*** It is important that school communities understand the difference between trauma and disability, as there are different needs for each. Without this awareness, there can be a possible overuse of disability services to address trauma due to inappropriate or over-diagnosis.

- ***Keep in Mind Youth Resiliency:*** School entities should keep in mind the resiliency of youth and recognize that not every student who experiences trauma will need service. To avoid the potential of inappropriate/over-referral, school entities should be sure to have systems and protocols in place (and outlined in their Plans) that describe how they will consider factors beyond an identified trauma or trauma history to determine need for service and supports.

- ***Be Mindful of Mandatory Reporting Requirements***: Pennsylvania's Child Protective Services Law (CPSL) establishes requirements for adults considered mandated reporters, including school employees and health care professionals, to report suspected child abuse if they have reasonable cause to suspect that a child is a victim of abuse.[33] It is unfortunately possible that during discussion or trauma assessment a staff member may receive information related to suspected child abuse, including possible abuse by a parent or family member, that has not been reported. School entities should follow the requirements of law and established policies and procedures for reporting, as well as providing support to students.

- ***Ensuring Equitable and Inclusive Services and Supports:*** Importantly, school entities should take steps to ensure that appropriate supports are available to all students they serve, regardless of background or identity (race, ethnicity, gender, gender expression or identity, sexual orientation, socioeconomic status, disability, religious identity, national origin, English language learner status, etc.).

[33] *Mandated Reporters: Frequently Asked Questions*, Keep Kids Safe, PA Department of Human Services.

TOOLS AND RESOURCES: Additional Screenings, Assessments and Referral Protocols

A variety of tools are available to help school entities identify appropriate screening, assessment, and referral protocols for students, staff, and/or families in need of Tier 2 and/or Tier 3 supports and interventions:

- ***Screening and Assessment of Child Trauma*, Child Welfare Information Gateway** - Provides multiple resources for professionals on screening and assessing trauma in children and youth in clinical and non-clinical settings (including schools).
- ***Guidance for Trauma Screening in Schools*, Defending Childhood Policy Initiative, National Center for Mental Health and Juvenile Justice (2016) –** Provides guidelines and information on the role of screening and assessment in the identification of trauma, school-based screening considerations, and suggestions for linking screening data with potential interventions within schools.

- ***Integrate Trauma-Informed Approaches Within Existing System Coordination Efforts:*** School entities should build on their existing SAP team work when developing and implementing a Trauma-Informed Approaches Plan since it is already a required process for coordinating students, families, schools, and community-based services to address a wide range of issues and barriers to student learning, including trauma.[34] School entities should refer to other schoolwide/system coordination efforts identified through their Readiness Assessment to determine additional groups/initiatives that should be engaged as part of planning and implementation work.

- ***Identify Available Services (School- and Community-Based):*** The school entity should conduct a review of the services and providers that are available both within the school community and in the community at-large, as well as potential state- and national-level resources. Recognizing the significant variation in quality and availability of services across the commonwealth, the Committee recommends that plan implementation teams conduct a "Community Mapping" process that locates unique strengths and gaps. This process should include meaningful stakeholder engagement of partners, parents/caregivers/families, and other relevant community members (law enforcement, juvenile justice, children and youth, drug and alcohol, mental and behavioral health, etc.).

THINGS TO CONSIDER: Identifying Available Services

- ***Value Beyond Addressing Trauma/Behavioral Concerns:*** Community mapping can also provide a reference for other, non-behavioral health/trauma services. Students may have basic needs that can improve their mental, emotional, and physical health both in and out of school (i.e., Maslow's Hierarchy).

[34] State law mandates that all school entities have SAP available for every grade level. If your SAP process is not fully integrated into your school community, one of your first steps should be to work with the Pennsylvania Approved SAP Training Providers to build capacity and provide trainings on the model. Your Regional Coordinator can provide support via team maintenance, as well as share information about local and statewide resources, training opportunities, etc. Grants are available to offset the cost of the trainings and for substitute teachers while personnel attend the trainings (for example, School Safety and Security Grants Program through PCCD as well as PDE's Safe Schools Grants).

- ***Meaningful, Ongoing Engagement of Partners and Key Stakeholders:*** A systems coordination approach may prove helpful in identifying available services. There are a number of models and approaches that can be incorporated into the process by school entities (e.g., Systems of Care, Communities In Schools, Community Schools, Communities That Care, etc.). Schools are encouraged to reach out to community providers on a regular basis to ensure effective collaboration and evaluate implementation (e.g., are the number of referrals sufficient, appropriateness of referrals, ways to improve communications between providers and schools, strategies to work with kids, how to improve wraparound care, etc.). Finally, school entities should also look to partner with their local first responders, in addition to children and youth agencies, to establish lines of communication to inform the school when a child has experienced trauma that has triggered a system response.

- ***Seeking Input Before, During, and After:*** Once the mapping is prepared, it should be shared with the school staff, parents and families, and community providers to gain additional information and to help identify gaps in services that need to be addressed. The plan should also allow for flexibility to be updated as community needs, capabilities, and resources evolve.

TOOLS AND RESOURCES: Identifying Available Services

A variety of tools are available to help school entities conduct a Community Mapping process or similar approach:

- School Health Assessment and Performance Evaluation System (SHAPE), National Center for School Mental Health
- Pennsylvania Network of Care, Trilogy Integrated Resources.

Establish or Update Agreements to Ensure Timely and Appropriate Referrals and Services: As part of a Readiness Assessment, school entities should identify existing partnerships and collaborative initiatives that could impact trauma-informed efforts. Where necessary, school entities should consider establishing or updating written agreements/MOUs with identified providers to ensure that each partner understands their role in the delivery of services and the requirement of coordination about what the student is receiving both inside and outside of the school. This would include the mechanisms in place for referring and handing off a student's case and the sharing of data back-and-forth on what is being provided and what results are being observed. In addition, there should be a clearly understood feedback loop developed by the plan implementation team, supported by clear school entity policies and procedures, regarding community partnerships, referrals, and ongoing communication. Counsel should be consulted in plan and policy development to ensure adherence to all relevant ethics and laws. An example of an MOU (Responding to Suicide) along with a sample Referral Flowchart (SAP) are included as Appendices C and D, respectively.

REQUIRED Ensuring Trauma-Informed Services and Addressing Secondary Trauma

As described previously, Section 1311-B of the PA Public School Code requires that school entities describe within their Trauma-Informed Approach Plans how they will ensure a trauma-informed approach to coordinated services and address secondary trauma of school employees:

> *(3) Indication of how coordinated services are provided based on a trauma-informed approach with an understanding, recognition and responsiveness to the effects of trauma on education, absenteeism and school completion, including the secondary impact of trauma on school employees.*

Beyond the minimum requirements outlined in statute, the Committee recommends that school entities consider the following as they develop this section of their Plan:

- ***Root Trauma-Informed Approaches in the "4 Rs":*** To ensure a trauma-informed approach to services, it is recommended that school entities adhere to the "4 Rs" from SAMHSA's 2014 *Concepts of Trauma and Guidance for a Trauma-Informed Approach*:
  - Realizing the widespread impact of trauma and pathways to recovery;
  - Recognizing trauma signs and symptoms;
  - Responding by integrating knowledge about trauma into all facets of the system;
  - Resisting re-traumatization of trauma-impacted individuals by decreasing the occurrence of unnecessary triggers and by implementing trauma-informed policies, procedures, and practices.

- ***Clearly Delineate Roles and Responsibilities:*** A school entity's Trauma-Informed Approach Plan should clearly delineate responsibilities of partners, while emphasizing the unique role each play in building and sustaining a trauma-informed school community. For example, teachers should not be expected to perform responsibilities that are in the purview of mental health clinicians, while school social workers, psychologists, and counselors should not be asked to take on classroom responsibilities that are the purview of educators.

- ***Partner with Well-Qualified, Trained Providers:*** Providers who receive referrals from the school entity should be well qualified and appropriately trained on being trauma-informed. If an agency/organization is not trained but has been identified by a school entity's plan implementation team as being a good fit to meet certain identified needs, the school entity should invite that agency/organization to join in relevant professional development opportunities (both school and community based).

TOOLS AND RESOURCES: Training for Schools and Providers

- ***Training for Schools and Educators:*** The Support for Students Exposed to Trauma (SSET) training is specifically designed for educators and school personnel who are not licensed to provide mental health or behavioral health supports. The SSET training is available for free through an online platform.

- ***Training for School- and Community-Based Mental and Behavioral Health Professionals:*** For some school entities, training of their mental health professional staff serving in secondary schools in Cognitive Behavioral Interventions in Schools (CBITS) might be beneficial. Research suggests that CBITS can significantly reduce symptoms of post-traumatic stress and depression in students exposed to violence

and other trauma.[35] Bounce Back is a CBITS program available for staff serving in elementary schools. Similarly, it may also be helpful for mental and behavioral health providers to have trauma-specific expertise and training, such as Trauma-Focused Cognitive Behavior Therapy (TF-CBT).
    - Several free training resources exist to help schools and communities implement CBITS, including those linked within these *Guidelines*.
    - School entities can apply for funding to support the costs of these trainings through PCCD's School Safety and Security Grant Program, as well as consider utilizing other funding sources, such as the County Needs-Based Plan and Budget and Integrated Children's Services Plan.

- ***PDE-Approved Training Providers (Act 45 and Act 48):*** Additional information regarding Act 45 and Act 48 approved training providers, including those focused on trauma and trauma-informed approaches, is available on PDE's Continuing Education webpage.

- ***Trauma-Informed Approaches, Culturally Responsive and Inclusive Practices:*** Culturally responsive practices are embedded within all facets of the MTSS framework and should therefore be central to schools' trauma-informed approach. School completion for students from every background is of paramount importance; therefore, instruction and interactions with students of various backgrounds and identities (race, ethnicity, gender, gender expression or identity, sexual orientation, socioeconomic status, disability, religious identity, national origin, English language learner status, etc.) require the establishment of strong relationships.[36] Culturally responsive educational systems embrace cultural differences and seek to include, rather than exclude, differences. Responsive systems:

    - Are concerned with caring ethics in the professionals that serve diverse students;
    - Encourage the use of communication strategies that build on students' cultures;
    - Nurture the creation of school cultures that are concerned with deliberate and participatory educational practices; and
    - Create opportunities for educator reflection, inquiry, and mutual support around issues related to cultural/identity differences (including sexual orientation and gender identity).[37]

THINGS TO CONSIDER: Trauma-Informed and Culturally Responsive Systems

- ***Address Systemic Practices that Counter Trauma- and Cultural Responsiveness:*** In developing trauma-informed, culturally responsive and sexual/gender identity inclusive schools, entities should review policies and procedures to identify and address standard practices that may exacerbate trauma and/or adversely impact specific groups of students.[38] In Tier 3 interventions, schools should also use evidence-based practices

[35] B.D. Stein, et al., *Helping Children Cope with Violence and Trauma: A School-Based Program That Works*, RAND Corporation, 2011.
[36] *SSIP Resources*, Pennsylvania Technical Assistance and Training Network.
[37] *SSIP Resources*, Pennsylvania Technical Assistance and Training Network.
[38] *Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework*, The National Child Traumatic Stress Network, 2017.

adapted for students and their families using strategies to reduce stigma and improve efficacy.[39]

- ***Understanding the Intersections of Youth Identities and Trauma Exposure:*** While trauma affects many children, research suggests that some youth are especially at risk for exposure and adverse impacts. Students from racial and ethnic backgrounds who have suffered major intergenerational losses and violence can experience traumatic stress linked to that historical trauma.[40] Similarly, students of color are more likely to experience racial trauma from witnessing or experiencing racism, discrimination, or structural prejudice.[41] And compared with their peers, LGBTQ+ youth face an elevated risk of suicide attempts and ideation, attributed to increased stress caused by exposure to stigma, discrimination, and violence.[42] As part of efforts to plan, develop, and implement trauma-informed schools, it is essential to recognize and meet the needs of these students through culturally responsive and inclusive practices.

- ***Understand and Monitor Impact of Trauma on School Employees (Secondary Trauma):*** While educators, support staff, and other caregivers in the school community can work with students to address and respond to traumas they may have experienced in their lives, it is important to recognize that this work may cause a traumatic response in those caregivers as well. All or part of that response may result from past trauma within the caregiver's own life. As part of their trauma-informed plan, school entities should build in confidential supports and services for adults who may suffer a traumatic response. An MTSS approach for caregivers can be a way to provide this assistance, which can also build on existing employee assistance programs.[43] In addition, school entities should consider ways to monitor their staff for the possibility of compassion fatigue and/or burnout.

Figure 4. Warning Signs of Secondary Trauma[44]

Hypervigilance	Excessive alertness for potential threats or dangers at and outside of work. Always being "on" and "on the lookout."
Poor Boundaries	Lacking a balanced sense of your role so that you take on too much, step in and try to control events, have difficulty leaving work at work, or take the work too personally.
Avoidance	Coping with stress by shutting down and disconnecting.
Inability to Empathize/ Numbing	Unable to remain emotionally connected to the work.

[39] *Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework*, The National Child Traumatic Stress Network, 2017.
[40] *Addressing Race and Trauma in the Classroom: A Resource for Educators*, The National Child Traumatic Stress Network, 2017.
[41] *Addressing Race and Trauma in the Classroom: A Resource for Educators*.
[42] *Adopting a Trauma-Informed Approach for LGBTQ Youth: A Two-Part Resource for Schools and Agencies,* National Resource Center for Mental Health Promotion and Youth Violence Prevention.
[43] Note: School entities do not need to provide these services directly but should work to identify what is available and provide that information to personnel.
[44] Adapted from *Building Trauma Sensitive Schools*, National Center for Safe Supportive Learning Environments.

Addictions	Attaching to distractions to check out from work, personal life, or both.
Chronic Exhaustion/ Physical Ailments	Experiencing physical, emotional, and spiritual fatigue or inexplicable aches and pains exceeding what you expect for an ordinary busy day or week.
Minimizing	Trivializing a current experience by comparing it with another situation that we regard as more severe.
Anger or Cynicism	Using cynicism or anger to cope with other intense feelings that we may not understand or know how to manage.
Feelings of Professional Inadequacy	Becoming increasingly unsure of yourself professionally, second-guessing yourself, feeling insecure about tasks you once felt confident performing.

THINGS TO CONSIDER: Understanding and Monitoring Impact of Secondary Trauma

- ***Prioritize Self-Care and Peer Support:*** In creating a climate of care, it is important to remind staff to look out for one another and themselves. During trainings, participants should be made aware that the subject matter may bring up an emotional response and that it is OK to step away from the training if this occurs. Entities may also want to have additional supports available for the participants. All staff are encouraged to complete self-care plans prior to the beginning of any training. *(See Appendix E for a Sample Self-Care Plan example.)*

- ***Staff Confidentiality****:* While supporting educators through primary and/or secondary trauma, confidentiality among the entire school community is essential. Policies and procedures regarding confidentiality, including definitions and disciplinary actions, should be developed through consensus and implemented with fidelity by the administration.

TOOLS AND RESOURCES: Understanding and Monitoring Impact of Secondary Trauma

A variety of tools are available to help school entities increase knowledge and awareness of and monitor secondary stress:

- Professional Quality of Life Scale (ProQOL)
- School Self-Care Plan (Building Safe Schools, Trauma Sensitive Schools Training Package)
- Secondary Trauma (Child Welfare Information Gateway) - *Lists resources that outline strategies to decrease risk, address the challenges professionals face in these situations, and offer ways to cope with secondary trauma*
- Secondary Traumatic Stress (National Child Traumatic Stress Network)

- ***Create Learning and Working Environments that Prioritize Wellness:*** As part of overall efforts to establish learning and working environments that are responsive to trauma, it is essential that the school entity's board and administration understand and buy into the concern for secondary trauma and compassion fatigue before adults working directly with children begin training on being trauma-informed. This should include the development of a mission statement that recognizes the need for staff wellness, including training on social-emotional regulation that can be modeled for students and co-workers when the effects of trauma arise. School

leadership should work to create an environment that encourages employees to develop wellness/self-care plans[45] which should not be connected to individuals' performance evaluations; it is essential for staff to feel safe to share the challenges they are having without fear of retribution.

REQUIRED Utilizing Evidence-Based Approaches for Trainings, Programs, and Policies

As described previously, Section 1311-B of the PA Public School Code requires that school entities describe how they will ensure that trauma-informed approaches implemented through their plans are evidence-based:

> *(4) Utilization of evidence-based or evidence-informed approaches that are tailored to the community to ensure that data is collected and the effectiveness of the trauma-informed approaches are determined.*

In defining "evidence-based," Section 1205.7 of the PA Public School Code references the federal definition provided in the Elementary and Secondary Education Act of 1965, as amended by the Every Student Succeeds Act (ESSA):

> *Evidence-Based means an activity, strategy, or intervention that –*
> *Demonstrates a statistically significant effect on improving student outcomes or other relevant outcomes based on:*
>
> 1) *Strong evidence from at least one well-designed and well-implemented experimental study;*
> 2) *Moderate evidence from at least one well-designed and well-implemented quasi-experimental study; or*
> 3) *Promising evidence from at least one well-designed and well-implemented correlational study with statistical controls for selection bias.*
>
> *OR Demonstrates a rationale based on high-quality research findings or positive evaluation that such activity, strategy, or intervention is likely to improve student outcomes or other relevant outcomes and includes ongoing efforts to examine the effects of such activity, strategy, or intervention.*

Beyond these minimum requirements, the Committee recommends that school entities consider the following as they develop this section of their Plan:

- ***Use Multiple Data Sources and Levels:*** Data should be collected/analyzed at both the systems level and the individual level. Consistent with principles of implementation science, this data should be used to conduct an ongoing quality improvement process (e.g., use your data to determine what is working well and what may need to be adapted moving forward). Specifically, data should be collected and analyzed to measure the fidelity of implementation to determine if

[45] A Sample Staff Self-Care Plan is available through the Trauma-Sensitive Schools Training Package: Leading Trauma-Sensitive Schools Action Guide, National Center on Safe Supportive Learning Environments, U.S. Department of Education.

programming and interventions are provided in the same manner as evidence-based programs' design and evaluation.

- ***Identify Needs, Priorities, and Strategies through a Data-Driven Approach:*** Local data will need to be collected and used to determine the needs of the school community as part of the planning and implementation continuum. Using this data-driven approach, appropriate evidence-based/informed programs and trainings can be selected that meet a school entity's locally identified needs.

Figure 5. Potential Data Elements for Identifying Local Needs[46]

Stakeholders	Student Data	School Data	Educator Data
• Educators • Support staff • Students • Parents/Families • Community • Agencies • Non-profit Organizations	• Demographics • Academic Achievement • Academic Growth • Absenteeism • School Progress and Completion • Discipline • SAP • School Nurse Visits or Similar Data	• Resources • Safety • Climate • Health • Discipline	• Staffing Gaps • Evaluations of Professional Development • Identified Needs • Quality of Life and Secondary Trauma

THINGS TO CONSIDER: Suggested Data Elements to Inform Trainings, Programs, and Policies

As mentioned earlier in this guide, school entities should consider conducting a self-assessment to identify needs and establish readiness to implement a comprehensive and sustainable trauma-informed approach. School entities are encouraged to use available tools like the *Work Group Question Guide to Assess School Readiness for Change* (part of the Trauma-Sensitive Schools Training Package from the National Center on Safe Supportive Learning Environments) to evaluate their own motivations, goals, general capacity, and intervention-specific capacity. In addition, school entities should consider using data from climate surveys (such as the Pennsylvania School Climate Survey), along with available school and LEA-level data to inform decision-making.

Examples of data include:

- U.S. Census data and other sources of local/community data, including those that capture issues like community violence, homelessness, domestic violence, divorce, suicide rates, substance use, housing and food insecurity, economic stability, etc.
- Civil Rights Data Collection (CRDC) data on schools and school districts (including enrollment demographics, discipline and referrals to law enforcement, English Learner data, and other educational equity metrics)
- Student Assistance Program (SAP) reports
- School discipline referrals (including out-of-school and in-school suspensions, expulsions)

[46] Adapted from *Building Systems of Support for Excellent Teaching and Leading*, U.S. Department of Education Non-Regulatory Guidance Title II, Part A of the Elementary and Secondary Education Act of 1965, as Amended by the Every Student Succeeds Act of 2015, September 27, 2016.

- PDE Office for Safe Schools' annual reports
- Pennsylvania Youth Survey (PAYS) data and/or Youth Risk Behavior Survey System (YRBSS) data
- Aggregate data from school entity's Safe2Say Something reports
- Referrals to outside providers (mental and behavioral health, etc.)
- Number of mental health hospitalizations
- Student school climate surveys (if applicable)
- Student subgroup data (race/ethnicity, gender, economically disadvantaged, English Learner, students with disabilities, homeless children and youth, children in foster care, and military-connected students)
- Entry and exit surveys from individualized (Tier 3) intervention participants (if applicable)
- Family school climate surveys (if applicable)
- PBIS Self-Assessment Survey (measuring staff perceptions of implementation)
- PBIS Tiered Fidelity Inventory (used to assess fidelity of all three tiers of behavioral/social-emotional support)
- Early Warning System data that evaluates student and overall school data related to attendance, behavior, and course performance.

TOOLS AND RESOURCES: Evidence-Based Approaches and Related Data

A variety of tools are available to help school entities gather and analyze data and other information to determine whether a training, program, or policy is evidence-based and, importantly, a good fit for their specific needs and community.

- One source of this data can be the Pennsylvania Youth Survey (PAYS). This biennial survey is offered in the fall of odd years at no cost to any school entity. More information can be found at www.pays.pa.gov.
- PDE can also aid in the selection of evidence-based programming by connecting your entity with partners who have found approaches that have proven effective.

NOTE: More information and data sources are listed in Appendix G ("Additional Resources").

REQUIRED Selecting Professional Development and Trainings

As described previously, Section 1311-B of the PA Public School Code requires that school entities describe how they will provide professional development, training, and other supports to aid in implementing its Trauma-Informed Approach Plan:

> *(5) Professional development and support for school staff which fosters a culture in the school entity and community that is informed about how to understand, recognize and respond to trauma and address the impact of trauma on students as a secondary impact on school employees.*

Act 18 of 2019 (Section 1205.7 of the PA Public School Code) also outlines separate requirements beyond those related to applying for funding through PCCD's School Safety and Security Grant Program related to training of school employees on trauma-informed approaches:

Section 1205.7. Trauma-Informed Education

(a) School entities shall provide school employes with training on trauma-informed approaches. The following apply:

(i) Training shall address, but shall not be limited to:

- *(I) Recognition of the signs of trauma in students.*
- *(II) Best practices for schools and classrooms regarding trauma-informed approaches, including utilization of Multi-Tiered Systems of Support.*
- *(III) Recognition of the signs of the impact of secondary trauma on school employes and appropriate resources for school employes who are experiencing secondary trauma.*
- *(IV) The school entity's policies regarding trauma-informed approaches.*
- *(V) The school entity's policies regarding connecting students with appropriate services.*

(ii) Training shall be on evidence-based or evidence informed programs that are tailored to the local community and reflect current best practices related to trauma-informed approaches.

(iii) School employes required to undergo continuing professional education under Section 1205.2 or 1205.5 shall receive credit toward the school employes' continuing professional education requirements if the training program has been approved by the Department of Education.

(iv) The school entity shall make a reasonable effort to facilitate a time and location for school employes under this section to participate in the training during paid working hours or in-service training.

Beyond the minimum requirements outlined in statute for purposes of applying for School Safety and Security Grants, the Committee recommends that school entities consider the following as they develop this section of their Plan:

- ***Take a Multi-Phased Approach to Professional Development and Training:*** School entities should consider taking a multi-phased approach to training and professional development offerings that accounts for the different roles, responsibilities, and level of knowledge of staff. An initial trauma-informed training should be separate from other professional development since it will likely involve more specific and intensive staff education. Moving forward, trauma-informed work can, and should, be integrated into other professional development activities in line with the integration that will be seen in the broader school community.

- ***Provide Tiered Training Based on Level of Responsibility:*** All school personnel should receive basic training on trauma, but those individuals working more intensely and directly with students should receive more intensive training regarding trauma-informed approaches.

Figure 6. Examples of Trauma-Informed Professional Development Activities/Topics[47]

Trauma-Related Topics for All Staff
• Child development and attachment and the effects of early adversity • The neurobiology of trauma • Particular types of trauma (e.g., historical trauma, racial trauma, complex trauma) • Experiences of particular groups of students (e.g., LGBTQ youth, youth of color, refugees, etc.) • Relationship between culture and trauma (e.g., culture-specific experiences and responses) and relationship between sexual/gender identify and trauma • Secondary traumatic stress and vicarious trauma • Child and adolescent mental and behavioral health • Resilience across development • Core principles of trauma-informed schools
Skill Building for All Staff
• General trauma-sensitive practices • Trauma-informed crisis intervention and de-escalation strategies • Culturally responsive and inclusive practices that reflect various identities (race, ethnicity, gender, gender expression or identity, sexual orientation, socioeconomic status, disability, religious identity, national origin, English Learner status, etc.) • Strategies for engaging youth and families • Strengths-based approaches to working with youth • Self-care strategies • Restorative practices • Positive behavioral supports • Mental health first aid
Specialized Topics
• Classroom strategies for promoting physical, social & emotional safety (teachers) • Social and emotional competencies and curricula (teachers) • Trauma-sensitive assessment and evaluation practices (student services staff) • Evidence-based, trauma-specific mental and behavioral health interventions for addressing trauma (student services staff)

- ***Provide Training to All School Personnel, Including Non-Instructional Staff:*** While Section 1205.7 of the PA Public School Code requires that school entities provide certain enumerated school employees[48] with training on trauma-informed approaches, the Committee recommends that all school personnel be provided the selected trainings, not just staff holding certifications. It can often be the case that students feel more comfortable opening up to an education support professional, such as a bus driver, cafeteria worker, or custodial staff. It is also the case that these workers are in a position engage in re-traumatizing interactions, which might be avoided by increasing knowledge and understanding of students' exposure to trauma and its

[47] Adapted from *Building Trauma-Sensitive Schools Handout Packet*, Trauma-Sensitive Schools Training Package, National Center on Safe Supportive Learning Environments.

[48] Individuals certified as teachers, supervisors, supervising principals, principals, assistant principals, vice-principals, directors of vocational education, dental hygienists, visiting teachers, home and school visitors, school counselors, child nutrition program specialists, school librarians, school secretaries the selection of whom is on the basis of merit as determined by eligibility lists, and school nurses. PA Public School Code of 1949, Section 1101(1).

impacts. In addition, it is important to provide training to school security personnel, such as school police officers (SPOs), School Resource Officers (SROs), and school security guards, based on their interaction with students and assigned duties.

- ***Build Capacity for Preventing and Addressing Trauma:*** Ideally, the school entity's implementation plan will go beyond making all personnel aware of the impact of trauma to ensuring that everyone has the skills and intention to prevent further trauma, as well as addressing pre-existing trauma.

THINGS TO CONSIDER: Professional Development and Trainings

- ***Empowering School Staff to Translate Learning into Action:*** Implementation of programs will be more effective if teachers and other staff help shape how trauma-informed approaches will be incorporated into overall professional development plans, as well as broader comprehensive planning efforts. This should include opportunities to identify, choose, and implement various evidence-based training programs and other practices based on student needs, as well as foundational schoolwide strategies implemented at the Tier 1/Universal level.

- ***Providing Supports While Maintaining Student Confidentiality:*** Teachers and other school staff can also help in the development of procedures/practices for why, when and how to refer students to the next level of supports without needing to know what a specific student has gone through. These personnel can recognize certain behavioral and learning struggles as being potentially the result of trauma and/or behavioral or mental health problems. As mentioned earlier, it is important for school entities to have policies and protocols in place that respect student and family privacy, and that comply with confidentiality requirements provided by federal and state law.

Summary

As described throughout these *Guidelines*, the work of becoming a trauma-informed school community is significant and ongoing. By developing – or updating – a Trauma-Informed Approaches Plan with input from key stakeholders and partners, school entities will be better positioned to implement evidence-based, sustainable approaches tailored to their specific students', employees', and communities' needs.

Minimum Criteria and Considerations for Trauma-Informed Approach Plans

RECOMMENDED: Before You Get Started

- ☐ Determine where your school entity is currently in terms of the four implementation phases of trauma-informed schools and how a plan should be tailored to your specific goals and needs.
    - *Phase 1: Prepare to Adopt a Trauma-Informed Approach*
    - *Phase 2: Envision Your Trauma-Informed School*
    - *Phase 3: Align Trauma-Informed Approach with Other Evidence-Based Approaches*
    - *Phase 4: Sustain Trauma-Informed Approach*

RECOMMENDED: Using Multi-Tiered Systems of Support as a Guiding Framework for Building Trauma-Informed School Communities

REQUIRED: Designation of Individual(s) to Oversee Implementation

- ☐ Identify a lead
- ☐ Use community partners wisely
- ☐ Ensure knowledge of school and broader community
- ☐ Authority, skills, and training
- ☐ Ensure appropriate workload and scope of responsibilities

RECOMMENDED: Developing a Plan Implementation Team

RECOMMENDED: Conducting a Readiness Assessment

- ☐ Determine school entity's trauma-informed implementation stage
- ☐ Quality/status of other schoolwide frameworks and prevention efforts
- ☐ Social-emotional learning
- ☐ Collaboration and quality of relationships with key partners and stakeholders, including parents, caregivers, and families
- ☐ School climate
- ☐ Discipline policies and procedures

REQUIRED: Coordinating Services Based on Identified Needs

- ☐ Identify needs within a tiered screening and interventions framework (MTSS)
- ☐ Parent, caregiver, and family buy-in and consent
- ☐ Consider use of universal screening as part of MTSS framework
- ☐ Additional screenings, assessments, and referral protocols for some students (Tiers 2-3)
- ☐ Integrate trauma-informed approaches within existing system coordination efforts
- ☐ Identify available services (school- and community-based
- ☐ Establish/update agreements to ensure timely and appropriate referrals and services

REQUIRED: Ensuring Trauma-Informed Services and Addressing Secondary Trauma

- ☐ Root trauma-informed approaches in the "4Rs"
- ☐ Clearly delineate roles and responsibilities
- ☐ Partner with well-qualified, trained providers
- ☐ Integrate culturally responsive and inclusive practices
- ☐ Understand and monitor impact of trauma on school employees (secondary trauma)
- ☐ Create learning and working environments that prioritize wellness

REQUIRED: Utilizing Evidence-Based Approaches for Trainings, Programs, and Policies

- ☐ Use multiple data sources and levels
- ☐ Identify needs, priorities, and strategies through a data-driven approach

REQUIRED: Selecting Professional Development and Trainings

- ☐ Take a multi-phased approach to professional development and training
- ☐ Provide tiered training based on level of responsibility
- ☐ Provide training to all school personnel, including non-instructional staff
- ☐ Build capacity for preventing and addressing trauma

Questions and Contact Information

If you have any questions or need assistance while reviewing these *Guidelines*, please contact PCCD staff at RA-CD-SSSC@pa.gov.

Appendix A: Act 18 of 2019 Trauma-Informed Education Provisions

Section 102. Definitions.--When used in this act the following words and phrases shall have the following meanings:
* * *
"Trauma." Includes results from an event, series of events or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's cognitive functioning and physical, social, emotional, mental or spiritual well-being.
"Trauma-informed approach." Includes a school-wide approach to education and a classroom-based approach to student learning that recognizes the signs and symptoms of trauma and responds by fully integrating knowledge about trauma into policies, professional learning, procedures and practices for the purposes of recognizing the presence and onset of trauma, resisting the reoccurrence of trauma and promoting resiliency tailored to a school entity's culture, climate and demographics and the community as a whole.
* * *

Section 328. School Director Training Programs.

(a) Beginning in the 2018-2019 school year and in each school year thereafter, the following shall apply:

(1) Each newly elected or appointed school director shall complete, during the first year of the school director's first term, a training program made available by the Department of Education, in consultation with a Statewide organization representing school directors and a Statewide organization representing school business officials, pertaining to the skills and knowledge necessary to serve as a school director. The training program shall consist of a minimum of [four (4)] five (5) hours of instruction, including, at a minimum, information regarding the following:

(i) Instruction and academic programs.
(i.1) Best practices related to trauma-informed approaches, which shall comprise a minimum of one (1) hour of instruction.
(ii) Personnel.
(iii) Fiscal management.
(iv) Operations.
(v) Governance.
(vi) Ethics and open meetings, to include the requirements under 65 Pa.C.S. Pt. II (relating to accountability).

(2) Within one (1) year after each reelection or reappointment to the board of school directors, each school director shall complete an advanced training program made available by the Department of Education in consultation with a Statewide organization representing school directors and a Statewide organization representing school business officials. The advanced training program shall consist of a minimum of [two (2)] three (3) hours of instruction, including information on relevant changes to Federal and State public school law and regulations, fiscal management, trauma-informed approaches and

other information deemed appropriate by the Department of Education to enable the school director to serve effectively.

* * *

(b) Beginning in the 2018-2019 school year, and in each school year thereafter, the following shall apply:

(1) Each newly appointed trustee of a charter school entity shall complete, within the trustee's first year of service, a training program made available by the Department of Education, in consultation with Statewide organizations representing charter school entities, pertaining to the skills and knowledge necessary to serve as a charter school entity trustee. The training program shall consist of a minimum of [four (4)] five (5) hours of instruction, including, at a minimum, the information listed in subsection (a)(1) and information concerning Article XVII-A.

(2) During the fifth year of a trustee's service on the board of trustees and every four (4) years thereafter, each trustee shall complete an advanced training program made available by the Department of Education in consultation with Statewide organizations representing charter school entities. The advanced training program shall consist of a minimum of [two (2)] three (3) hours of instruction, including information on relevant changes to Federal and State public school law and regulations, including Article XVII-A, fiscal management, trauma-informed approaches and other information deemed appropriate by the Department of Education to enable the trustee to serve effectively.

Section 1205.1. Continuing Professional Development.

(b.1) The professional education plan of each school entity shall include a minimum of one (1) hour of required training in trauma-informed approaches.

Section 1205.7. Trauma-Informed Education.

(a) School entities shall provide school employes with training on trauma-informed approaches. The following apply:

(1) Training shall address, but shall not be limited to:

(i) Recognition of the signs of trauma in students.

(ii) Best practices for schools and classrooms regarding trauma-informed approaches, including utilization of multitiered systems of support.

(iii) Recognition of the signs of the impact of secondary trauma on school employes and appropriate resources for school employes who are experiencing secondary trauma.

(iv) The school entity's policies regarding trauma-informed approaches.

(v) The school entity's policies regarding connecting students with appropriate services.

(2) Training shall be on evidence-based or evidence-informed programs that are tailored to the local community and reflect current best practices related to trauma-informed approaches.

(3) School employes required to undergo continuing professional education under section 1205.2 or 1205.5 shall receive credit toward the school employes' continuing professional education requirements if the training program has been approved by the Department of Education.

(4) The school entity shall make a reasonable effort to facilitate a time and location for school employes under this section to participate in the training during paid working hours or in-service training.

(b) As used in this section, the following words and phrases shall have the meanings given to them in this subsection:

"Evidence-based" shall have the meaning given in section 8101(21) of the Every Student Succeeds Act (Public Law 114-95, 129 Stat. 1802).

"School employe" shall have the meaning given to the term "professional employe" in section 1101(1).

"School entity" shall mean a public school, including a school district, charter school, cyber charter school, regional charter school, intermediate unit or area career and technical school, a private school or a nonpublic school.

Section 1207.1. Postbaccalaureate Certification.

(a) Notwithstanding any other provision of law to the contrary, the Secretary of Education shall have all of the following powers and duties with regard to postbaccalaureate certification programs:

* * *

(3) Develop guidelines for the approval of flexible postbaccalaureate instructional certification programs. Such program guidelines shall address:

(i) Instruction and training in the following:

* * *

(H) Trauma-informed approaches.

Section 1217. Pennsylvania School Leadership Standards.

(a) Programs provided under section 1205.5(c) and (d) to prepare school or system leaders and for purposes of issuing administrator certificates or letters of eligibility and approved programs for the induction and continuing professional education of school or system leaders shall address:

(1) The following core standards:

* * *

(iv) Understanding the impact of trauma on a child's educational experience, the school's culture, climate and demographics and the community as a whole and applying trauma-informed approaches to inform decision-making at all levels of the system.

Section 1302-B. School Safety and Security Committee.

* * *

(b) Composition.--The committee shall consist of a chairperson and the following members:

(1) The Secretary of Education or a designee.

(2) The Attorney General or a designee.

(3) The Commissioner of Pennsylvania State Police or a designee.

(4) The Director of the Pennsylvania Emergency Management Agency or a designee.

(5) An individual appointed by the President pro tempore of the Senate.

(6) An individual appointed by the Minority Leader of the Senate.

(7) An individual appointed by the Speaker of the House of Representatives.

(8) An individual appointed by the Minority Leader of the House of Representatives.

(9) The chairperson of the commission or a designee.

(10) The Secretary of Human Services or a designee.

(11) A recognized subject matter expert in strategic security appointed by the Governor from three names submitted jointly by the President pro tempore of the Senate and the Speaker of the House of Representatives.

(12) The following members appointed by the Governor:

(i) An individual recommended by the Pennsylvania Association of School Business Officials with experience in school safety and security matters.
(ii) An individual recommended by the Pennsylvania Association of School Administrators with experience in school safety and security matters.
(iii) An individual member of local law enforcement recommended by the State Fraternal Order of Police.
(iv) A child psychologist who specializes in mental, social and emotional development of children recommended by the Pennsylvania Psychological Association.
(v) A licensed clinical social worker recommended by the Pennsylvania Society for Clinical Social Work.
(vi) An architect recommended by the American Institute of Architects of Pennsylvania with experience in school building safety and security matters.
<u>(vii) An individual who is a subject matter expert in trauma-informed approaches from a State-related institution of higher education.</u>
<u>(viii) A school principal recommended by the Pennsylvania Principals Association with experience in behavioral health matters.</u>
<u>(ix) A school nurse recommended by the Pennsylvania State Education Association with experience in behavioral health matters.</u>

(x) A school director recommended by the Pennsylvania School Boards Association with experience in school safety and security matters or behavioral health matters.

Section 1309-B. School safety and security coordinator.

* * *

(c) Specific duties.--The school safety and security coordinator shall:

* * *

(2) Coordinate training and resources for students and school entity staff in matters relating to situational awareness, trauma-informed [education awareness] approaches, behavioral health awareness, suicide and bullying awareness, substance abuse awareness and emergency procedures and training drills, including fire, natural disaster, active shooter, hostage situation and bomb threat.

Section 1310-B. School safety and security training.

School entities shall provide their employees with mandatory training on school safety and security subject to the following based on the needs of the school entity:

(1) Training shall address any combination of one or more of the following, based on the needs of the school entity:

(i) Situational awareness.

(ii) Trauma-informed [education awareness] approaches.

(iii) Behavioral health awareness.

(iv) Suicide and bullying awareness.

(v) Substance use awareness.

(vi) Emergency training drills, including fire, natural disaster, active shooter, hostage situation and bomb threat.

(vii) Identification or recognition of student behavior that may indicate a threat to the safety of the student, other students, school employees, school facilities, the community or others.

(2) Training may be provided through the Internet or other distance communication systems.

(3) Employees shall complete a minimum of three hours of training every five years.

(4) Employees required to undergo continuing professional education under section 1205.2 shall receive credit toward their continuing professional education requirements if the training program has been approved by the department in consultation with the committee.

Section 1311-B. Trauma-informed approach.

No later than August 31, 2019, the committee shall develop a model trauma-informed approach plan that shall be used by a school entity applying for a grant under section 1306-B(j)(21). The plan must include the following:

(1) Designation of at least one individual who:

(i) is assigned to the school;
(ii) oversees the implementation of the plan, integrating the coordination of services and professional development into the school entity's comprehensive plan; and
(iii) serves as a member of a school's student assistance program.

(2) Coordination of services among:
(i) the student and the student's family;
(ii) the school; and
(iii) county-based services, community care organizations, public health entities, nonprofit youth service providers, community-based organizations, organizations that provide before or after-school care and other similar groups that are located in the community.

(3) Indication of how coordinated services are provided based on a trauma-informed approach with an understanding, recognition and responsiveness to the effects of trauma on education, absenteeism and school completion, including the secondary impact of trauma on school employees.

(4) Utilization of evidence-based or evidence-informed approaches that are tailored to the community to ensure that data is collected and the effectiveness of the trauma-informed approaches are determined.

(5) Professional development and support for school staff which fosters a culture in the school entity and community that is informed about how to understand, recognize and respond to trauma and address the impact of trauma on students as a secondary impact on school employees.

Section 1513-D. Duties of department.

The department shall have the following powers and duties:

* * *

(8) To encourage the integration of trauma-informed approaches into the program curriculum and the professional development curriculum of personnel of the eligible provider who have regular contact with children.

Appendix B: Continuum of Practices: PBIS, Restorative Practices & Trauma-Informed Approach

Level of Intensity	MTSS/PBIS Framework	Restorative Practices	Trauma-Informed Practices
Tier 1: Prevention & Skill Building	• Define/teach expectations • Proactive behavior management by making adjustments in the environments • Consequence systems with emphasis on proactive reinforcement of desired behavior • Establishment of rapport with students • Collection and use of data • Universal Screening	• Peace keeping circles for Morning Meetings • Social/emotional instruction • Staff meetings	• School climate policies that promote safe climate • Instruction in social-emotional learning, mental health literacy & suicide prevention • Predictable routines • Opportunities for choice • Adults model emotional regulation • Comprehensive School Counseling model • Sensory opportunities to manage anxiety • "Calm zones" • Universal Screening

Tier 2: Early Intervention	• Check-in/Check-out
	• Check & Connect
	• Behavior Contracts
	• Targeted Screening
	• Social Skills Curricula
	• Mentoring
	• Collection and use of small group data
		• Restorative conferencing to develop alternatives to exclusionary discipline:
		  ○ Youth/Peer court
		  ○ Peer mediation
		  ○ Conflict resolution training
		  ○ Restitution
			• Adult mentors
			• Small groups for Social/Emotional Learning & Trauma-focused Cognitive Behavior Therapy
			• Building Consultation Team
			• Staff awareness of higher-risk groups
			• Pupil services accessible and approachable
			• Screening for Trauma
			• Parent & Caregiver education

Tier 3: Intensive Intervention	• Functional assessment
	• Function-based multi-component supports
	• Wraparound and person-centered support (e.g., RENEW)
	• Use of least to most intrusive hierarchy of interventions
		• Return from suspension
		• Administrative transfer or school-crime diversion:
		  ○ Victim/offender meetings
		  ○ Family/community group conferencing
		• Restitution
			• Function-based multi-component supports
			• Wraparound and person-centered support
			• Staff avoiding "trauma triggers"
			• Lethal means restriction
			• Case management
			• Coordination with community-based treatment
			• Language based teaching approaches with multiple forms of communication (more visual)
			• Parent & caregiver training and support

Adapted from Swain-Bradway, Eber, Sprague, & Nelson (2016)

Appendix C: Sample MOU Between School Entity and Provider

This is a SAMPLE only.
Be sure to have your school entity's legal counsel review and approve any MOU prior to finalizing.

© Terri A. Erbacher, Jonathan B. Singer & Scott Poland. *Suicide in Schools: A Practitioner's Guide to Multi-level Prevention, Assessment, Intervention, and Postvention.* Routledge, 2015. Permission to reproduce is granted to purchasers of this text.

{ENTER SCHOOL OR SCHOOL ENTITY NAME}
City, State, and Zip Code

MEMORANDUM of UNDERSTANDING

BETWEEN
SCHOOL/SCHOOL ENTITY
AND
AGENCY/SERVICE PROVIDER

The purpose of this Memorandum of Understanding (MOU) is to establish agreements between the parties above. This agreement serves as an arrangement to provide comprehensive and integrated mental health treatment and crisis intervention services in the aftermath of a suicide.

Mission: This paragraph defines, in as few words as possible, the purpose of the memorandum of understanding. For example, the purpose might be to support a school district in mitigating emotional responses to a traumatic event, such as suicide.

Need for Services: Present a clear, concise statement of when the agencies services would be needed; For example, when the crisis responses by those impacted by a suicide loss exceed the school or school districts resources.

Roles and Responsibilities: Define the roles and responsibilities of the school district and the community agency. Be specific as to exactly what role responding agency personnel have within your school building and what the expectations are. (Are they running safe room groups? Seeing students individually if they are responding negatively to trauma?) As every crisis situation varies, be sure to identify who is to be reported to and who is overseeing the crisis response.

Procedures: Include any other protocols and procedures that responding personnel and school personnel should agree on and be aware of. Be specific in this paragraph about any other mutually agreed upon protocols. (Are there specific protocols for responding to a suicide loss that schools and agencies agree to utilize?) As personnel within an agency or district can change, be as specific as possible. Include any resource needs here as well.

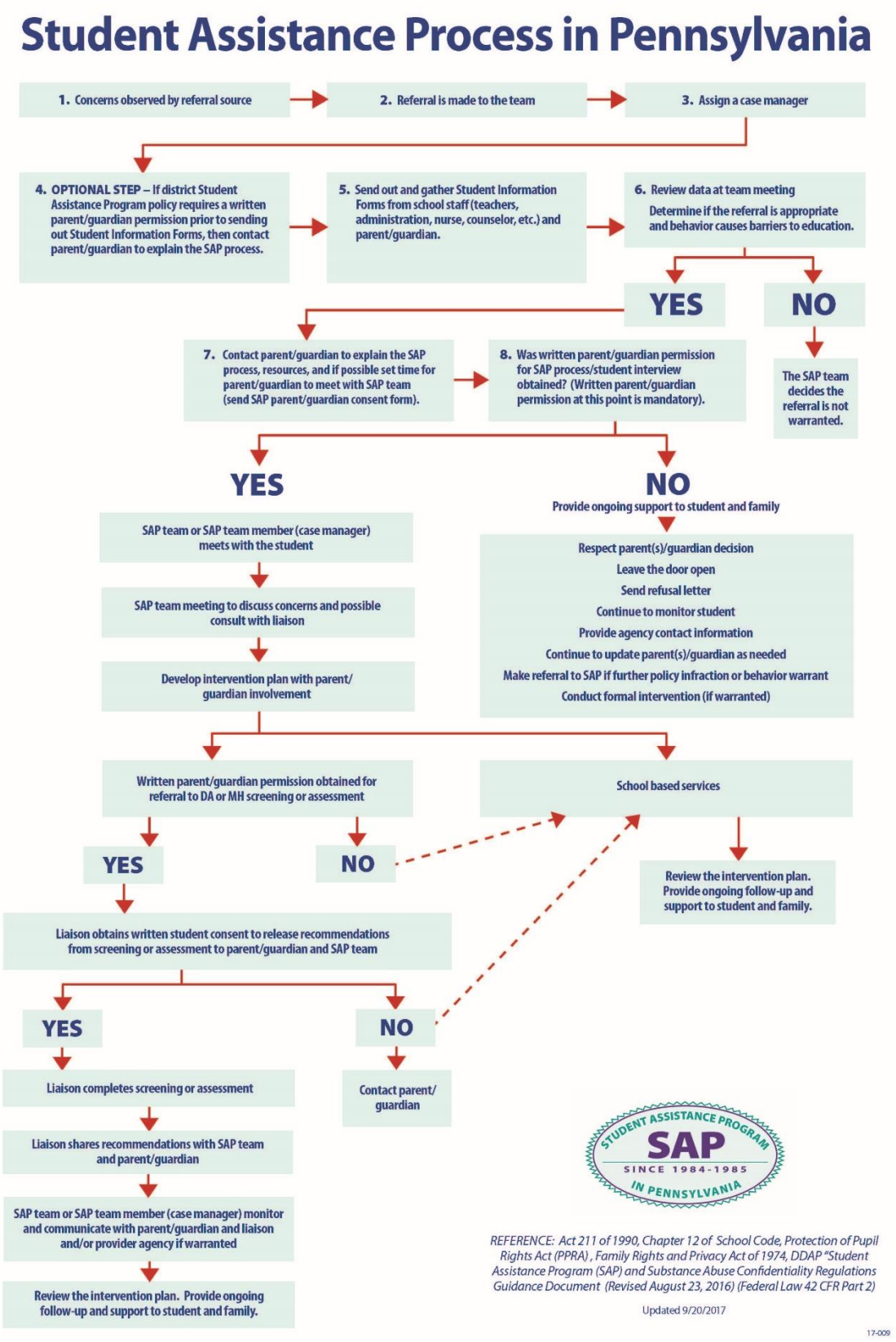
Terms of Contract/Payment: Explain payment rates for specific work as agreed upon by both parties. Be specific and include either hourly rates or payment for specific tasks completed.

Termination: In the event of termination of this MOU, each party should give or be given a 30-day notice. Include an assessment component to determine contract compliance for both parties. If the terms of the MOU are not fulfilled, allow for a termination clause to be enacted.

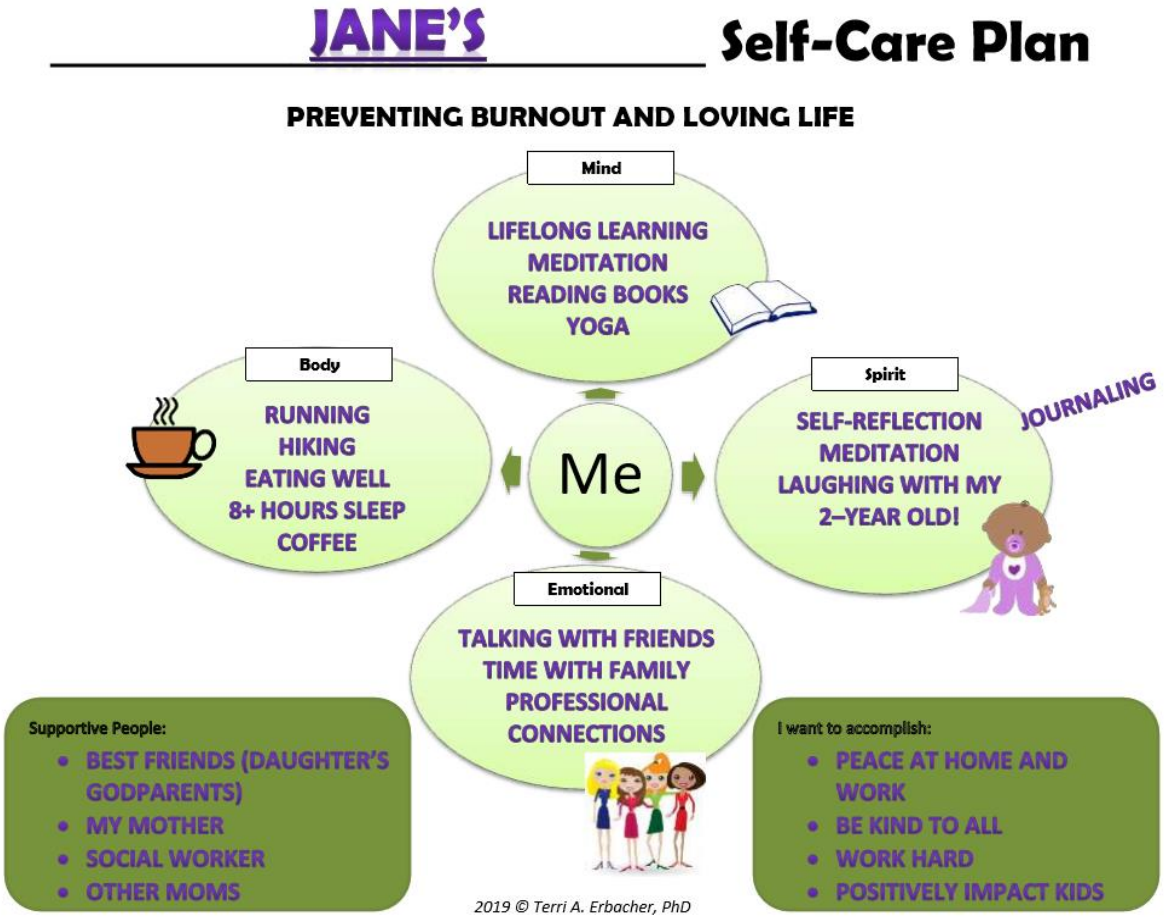
Contract Dates: Both parties agree to all items stated within this MOU. This agreement will be in effect between ___ and ___ (cannot exceed end of fiscal year) and will be reviewed annually. Any changes to this MOU can be made only with the approval of both parties.

Chief School Administrator	Date	School Entity	
Building Principal	Date	School Building	
Community Agency Administrator	Date	Agency/Organization	

Appendix D: SAP Flowchart



Appendix E: Example of a Self-Care Plan



Appendix F: Overview of State Agencies, Programs, and Services

PA Commission on Crime and Delinquency

Blueprints for Healthy Youth Development

PCCD provides funding to assist communities in developing an extensively researched, data-driven method to select and implement high-quality, evidence-based prevention programs. These initiatives span pre-K through high school, reaching a broad range of ages, and have demonstrated the ability to prevent violence, substance use, delinquency, and trauma.

- **The Incredible Years**: A group-training program for parents and children ages 3-12 that focuses on emotional problems and parental coaching. This Blueprints Program has reduced anti-social behavior in youth by an estimated 54 percent.
- **Promoting Alternative Thinking Strategies**: The objective of this program is to raise emotional and social skills in order to lower aggression in elementary school children (ages 4-11), while expanding learning. The outcome: Sixty percent of children show increased emotional competence, 48 percent show decreased anti-social behavior, and 57 percent show improved concentration and attention.
- **Big Brothers Big Sisters**: This organization's Blueprints program, which matches mentors with at-risk youth, has decreased anti-social behavior 30 percent in the youth they serve, with 33 percent of participants less likely than those in a control group to hit someone.
- **Strengthening Families Program (SFP)**: Balancing limits with caring, SFP's initiative for youth ages 10-14 has seen a 56 percent improvement in resisting peer pressure by group members.
- **Life Skills Training—Middle School (LST)**: The LST program has resulted in a 50-70 percent reduction in use of alcohol, tobacco, and marijuana use within the study group of middle school-aged children.
- **Project Towards No Drug Abuse (TND)**: A drug prevention program for high school youth, Project TND has realized a 74 percent increase in awareness in its groups about the consequences of substance abuse and a 22 percent reduction in marijuana use.
- **Trauma-Focused Cognitive Behavioral Therapy:** TF-CBT is an evidence-based treatment for reducing emotional and behavioral symptoms resulting from trauma exposure; PCCD provides funding to support technical assistance and training for TF-CBT providers through a partnership with Penn State's EPISCenter.
- **Aggression Replacement Training (ART):** ART is a cognitive behavioral intervention program to help children and adolescents improve social skill competence and moral reasoning, better manage anger, and reduce aggressive behavior. The program specifically targets chronically aggressive children and adolescents between the ages of 12 and 17 years old. PCCD provides funding to support technical assistance and training for ART through a partnership with Penn State's EPISCenter.

A recent evaluation of these programs implemented with fidelity in Pennsylvania found a positive return on investment for the majority of these programs.[49]

[49] *Cost-Benefit Analysis for PCCD's Evidence-based Initiatives: Investing in Effective Programs to Improve Lives and Save Tax Payer Dollars*, PA Commission on Crime and Delinquency in collaboration with the Pew-MacArthur Results First Initiative, May 2019.

Pennsylvania Youth Survey (PAYS)

Since 1989, the Commonwealth has conducted a survey of school student in the 6th, 8th, 10th, and 12th grades to learn about their behavior, attitudes, and knowledge concerning alcohol, tobacco, other drugs, and violence. PCCD sponsors and conducts the PAYS every two years, in partnership with the Departments of Education and Drug and Alcohol Programs, to gather information concerning risk factors, protective factors, and changes in patterns of substance use. The PAYS Web Tool allows users to view and analyze county and state-level data by categories and variables from the three most recent PAYS administrations (2013, 2015, and 2017). Additional information about PAYS is available on PCCD's website.

PCCD School Safety and Security Grant Program

Article XIII-B (School Safety and Security) of the PA Public School Code established a School Safety and Security Committee (SSSC) within PCCD. The Committee is tasked with developing the criteria school entities should use in performing school safety and security assessments, issuing a survey to school entities to measure school safety and security preparedness, and administering the School Safety and Security Grants Program. More information about the grants program, including eligibility and application information, is available on PCCD's School Safety and Security webpage.

PA Department of Drug and Alcohol Programs

Get Help Now Hotline

Pennsylvanians can call ***1-800-662-HELP (4357)*** for information about substance use disorder treatment resources. Your call is completely confidential. This hotline, staffed by trained professionals, is available 24 hours a day, seven days a week and is available in both English and Spanish. Not comfortable calling? You can also text 717-216-0905 for assistance.

Additional information about the Get Help Now hotline as well as a ***Care Provider Search Tool*** are available on DDAP's website.

PA Department of Health

School Health

The School Health program serves all children of school age attending public, private, and non-public schools in Pennsylvania and is responsible for providing technical assistance, training, and coordination of programs and services to schools, parents/families, and the community at large regarding school health programs and services.

State law requires certain health services for all children of school age, regardless of the school setting. Those services include physical examinations and health screenings (growth, hearing, scoliosis, TB, and vision) as well as dental health.

As required by the Public School Code, the Department of Health provides reimbursement for state mandated school health services through a state formula for reimbursement. These services include medical, dental, and nursing services.

Youth Risk Behavior Surveillance System (YRBSS)

A system developed by the CDC in collaboration with representatives from state and local departments of education and health, other federal agencies, and national education and health organizations. The YRBSS is designed to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults in the United States, including:

- Behaviors that contribute to unintentional injuries and violence;
- Sexual behaviors related to unintended pregnancy and sexually transmitted diseases, including HIV infection;
- Alcohol and other substance use;
- Tobacco use;
- Unhealthy dietary behaviors; and
- Inadequate physical activity.

The YRBSS includes national, state, territorial, tribal government, and local school-based surveys of representative samples of students in grades 9 through 12. The surveys are conducted every two years, usually during the spring.

Violence and Injury Prevention

The Violence and Injury Prevention Program (VIPP) aims to prevent death and disability from intentional and unintentional injury by assessing the incidence of injury and developing programs that reduce risk of injury. The goal of these funding initiatives is to focus on policy, environmental and systems changes supplemented with evidence-based individual behavior change, when appropriate, to improve the overall health and safety of our communities. A list of the VIPP focus areas and initiatives is below:

- **Child Abuse and Neglect:** To decrease the prevalence and risk of child abuse and child sexual abuse by implementing PCAR's Parents in the Know program through the funded county/municipal health departments (CMHDs).
- **Falls Prevention:** A Matter of Balance (MOB): Managing Concerns about Falls program. Currently, we partner with eight CMHDs Allegheny, Allentown, Bethlehem, Chester, Erie, Montgomery, Wilkes-Barre and York and three regional tobacco primary contractors in North Central, Northeast, and Northwest regions to implement MOB.
- **Motor Vehicle Safety:** Based upon the communities needs the funded CMHDs chose to focus on teenage and/or mature drivers and some also provide car seat distribution and education on the latest child restraint policy.
- **Traumatic Brain Injury:** Funded CMHDs promote Concussion Wise Pennsylvania education course and promote BrainSTEPS and Concussion Management Teams in their schools and communities.
- **American Trauma Society (ATS), Pennsylvania Division:** ATS is a non-profit, statewide organization dedicated to reducing serious injuries and deaths through trauma prevention education. Programs have been developed for different ages, from pre-school children through the elderly. Examples of special initiatives are: bike derbies, helmet distribution, farm safety, falls prevention, and Stop the Bleed.
- **Pennsylvania SAFE KIDS Coalition:** Working in partnership with its local affiliates, SAFE KIDS PA seeks to reduce unintentional injuries and death to children by concerted community action, including promoting public awareness of unintentional childhood injury prevention programs and facilitating public awareness of, and appreciation for, the safety measures necessary to

protect children. SAFE KIDS PA provides technical assistance through coalition development, conferences, webinar sessions and collaboration with other agencies.

PA Department of Human Services, Office of Mental Health and Substance Abuse Services

School-Based Violence Prevention

OMHSAS has supported Youth Mental Health First Aid and Question-Persuade-Refer (QPR) trainings across the commonwealth through both the Garrett Lee Smith (GLS) Youth Suicide Prevention Grant and the System of Care Partnership. Additional trainings on suicide risk assessment, safety planning, postvention, and family engagement have also been offered to schools through the GLS grant. Staff have also provided consultation for schools on policy development, as well as the selection of staff and student education and training programs.

Crisis Resources for Youth

OMHSAS recently announced a new partnership with Crisis Text Line, a free and confidential service that is available nationally to provide support to those in crisis. Crisis Text Line may be accessed any time by texting "PA" to 741-741.

Pennsylvania Community of Practice (CoP) on School-Based Behavioral Health

This community of cross-sector stakeholders shared a commitment to the advancement of early childhood, school-age, and adult behavioral health and wellness, and is spearheaded by the PA Technical Assistance and Training Network (PaTTAN). The CoP's goal is to support schools' efforts to overcome non-academic barriers to learning for children and youth so they can successfully transition to adulthood. A primary area of focus is on the scale-up of Positive Behavior Interventions and Supports (PBIS) across the commonwealth.

PA Department of Education

PDE Office for Safe Schools

The Office for Safe Schools coordinates school safety and security programs, collection of annual school crime and violence statistics, coordination of antiviolence efforts, and the development of policies and strategies to combat school violence. The Office supports and provides technical assistance and professional development programs in a variety of areas, including crisis intervention, school police training, violence prevention, and social-emotional wellness and safety, and provides services to all school entities across Pennsylvania.

Pennsylvania Student Assistance Program (SAP)

The Pennsylvania Student Assistance Program (SAP) is a systematic team process used to mobilize school resources to remove barriers to learning. SAP is designed to assist in identifying issues including alcohol, tobacco, other drugs, and mental health issues which pose a barrier to a student's success. The primary goal of the Student Assistance Program is to help students overcome these barriers so that they may achieve, advance, and remain in school. While Student Assistance Programs exist in other areas of the country, the structure and operation of the program in Pennsylvania is a unique expression of an integrated model serving the needs of Pennsylvania families and students.

PDE Safe Schools Targeted Grants Program

PDE's Office for Safe Schools provides grant funding opportunities through the Safe Schools Targeted Grants Program. Competitive funding is available for eligible school entities to support costs associated with equipment, programs, as well as the hiring of School Police Officers and School Resource Officers. Additional information is available on PDE's Safe Schools Targeted Grants webpage.

Initiatives to Promote Positive School Climate and Social-Emotional Learning

Recognizing the importance of a positive school climate to promote academic achievement and success, the Department of Education has implemented several initiatives to ensure all students feel safe, respected, and valued in school.

- The Department has embedded culturally responsive and trauma informed concepts and competencies within professional development programs and resources available for educators throughout the commonwealth.
- In collaboration with state and local partners, Pennsylvania has worked to expand access to school-based behavioral and mental health services, which can leverage the Multi-Tiered Systems of Support (MTSS) framework and Schoolwide Positive Behavior Interventions and Supports (SWPBIS) approach.
- The Office for Safe Schools has tools and resources, including a no-cost, customizable PA School Climate Survey, to help schools measure and improve student engagement, safety, and school climate.
- In 2016, PDE launched the PA School Climate Leadership Initiative, in partnership with the PA Association of Intermediate Units (PAIU) and the National School Climate Center (NSCC). Participating schools receive training and technical assistance from a designated School Climate Regional Coordinator housed at 27 of the commonwealth's 29 Intermediate Units.
- The *PA Equity and Inclusion Toolkit*, developed in collaboration with other state agencies, organizations, and partners, focuses on strategies and actions that schools can take to address bias and discrimination in a proactive and effective manner.
- Pennsylvania is one of eight states participating in the Collaborating States Initiative, led by the Collaborative for Academic, Social, and Emotional Learning (CASEL). Through this work, Pennsylvania has developed a roadmap for schools and districts looking to embed social-emotional competencies within their curriculum, instruction, professional development, and school climate initiatives.
- Additional resources related to social-emotional learning are available for educators and administrators through Pennsylvania's Standards Aligned System (SAS) Portal.
- The PA Career Ready Skills (PA CRS) project provides educators with resources to support the implementation of Pennsylvania Career Ready Skills in the school environment. Aligned to Pennsylvania's Career Education and Work (CEW) Standards, PA CRS focuses on essential skills like self-awareness and self-management, establishing and maintaining relationships, and social problem solving skills.
- Pennsylvania identified addressing the needs of students through school-based supports and community partnerships, including through the Community Schools Framework, as a state priority for federal Title IV, Part A funding in its ESSA Consolidated State Plan. The PA Department of Education can provide guidance and technical assistance to school entities and communities to help identify ways federal and state resources can be leveraged to improve supports and services for students and families.

Appendix G: Additional Resources

Guidance Documents and Toolkits

- Addressing Race and Trauma in the Classroom: A Resource for Educators, National Child Traumatic Stress Network, 2017.
- Adopting a Trauma-Informed Approach for LGBTQ Youth: A Two-Part Resource for Schools and Agencies, National Resource Center for Mental Health Promotion and Youth Violence Prevention.
- All-Hazards School Safety Planning Toolkit, Pennsylvania Emergency Management Agency (PEMA) – *This toolkit provide guidelines and information for schools, LEAs, and communities to address a variety of crises and emergency situations that might impact their campuses.*
- Calmer Classrooms: A Guide to Working with Traumatized Children, Child Safety Commission, Melbourne, Victoria, Australia
- Child Trauma Toolkit for Educators, National Child Traumatic Stress Network
- Child Welfare—Education System Collaborations to Increase Educational Stability – Describes 10 projects funded by the Children's Bureau to build capacity, including key program interventions, overarching themes, and evaluation
- Child Welfare Information Gateway - Federal clearinghouse through the Children's Bureau of the Administration for Children and Families
- Community Schools: A Whole-Child Framework for School Improvement, Coalition for Community Schools and Institute for Educational Leadership (IEL), 2017.
- Creating Conditions for Meaningful Family Engagement from Pre-K to High School, Safe Schools Healthy Students
- Guide to Schoolwide Social and Emotional Learning, Collaborative for Academic, Social, and Emotional Learning (CASEL)
- Healing the Hurt: Trauma-Informed Approaches to the Health of Boys and Young Men of Color, Center for Nonviolence and Social Justice, Drexel University School of Public Health, 2009.
- Healing the Invisible Wounds: Children's Exposure to Violence – A Guide for Families, Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice.
- Helping Traumatized Children Learn, Trauma and Learning Policy Initiative, Massachusetts Advocates for Children and Harvard Law School, 2013.
- Look Through Their Eyes, Illinois Childhood Trauma Coalition.
- Pennsylvania Equity and Inclusion Toolkit, Pennsylvania Department of Education, April 2017.
- Professional Quality of Life Measure (ProQOL Test), Dr. Beth Hudnall Stamm, Center for Victims of Torture (CVT).
- Ready, Set, Go, Review: Screening for Behavioral Health Risk in Schools, Office of the Chief Medical Officer, Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health & Human Services, 2019.
- SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach, SAMHSA, U.S. Department of Health & Human Services, July 2014.
- SAMHSA Evidence-Based Practices Resource Center - *This new Evidence-Based Practices Resource Center aims to provide communities, clinicians, policy-makers and others in the field with the information and tools they need to incorporate evidence-based practices into their communities or clinical settings. The Resource Center contains a collection of scientifically-based*

resources for a broad range of audiences, including Treatment Improvement Protocols, toolkits, resource guides, clinical practice guidelines, and other science-based resources.

- SAMHSA Guidance to States and School Systems on Addressing Mental Health and Substance Use Issues in Schools - *This Joint SAMHSA-CMS informational Bulletin provides guidance to states and school systems about addressing mental health and substance use issues in schools. It provides examples of approaches for services in schools and describes some Medicaid authorities that states may use to cover services.*
- SAMHSA Spotlight: Mobilizing a Community for Resilience - *The SAMHSA Spotlight Series highlights different approaches to building trauma-informed, resilient communities. This issue highlights how school-based health services in Walla Walla, Washington, are treating adverse childhood experiences and building community resilience.*
- School Health Assessment and Performance Evaluation (SHAPE) System, National Center for School Mental Health, University of Maryland School of Medicine.
- School Mental Health Screening Playbook: Best Practices and Tips from the Field, National Center for School Mental Health, University of Maryland School of Medicine, January 2018.
- School Mental Health Teaming Playbook: Best Practices and Tips from the Field, National Center for School Mental Health, University of Maryland School of Medicine, March 2018.
- Strategies and Resources to Create a Trauma-Sensitive School, Wisconsin Department of Public Instruction.
- The Heart of Learning: Compassion, Resiliency, and Academic Success, Office of the Superintendent of Public Instruction, State of Washington
- Trauma-Informed Schools for Children in K-12: A System Framework, The National Child Traumatic Stress Network.
- Trauma-Informed Schools in Pennsylvania: Aligning Expansion with High-Quality Implementation, Research for Action, March 2019.
- Understanding the Links Between Adolescent Trauma and Substance Abuse, The National Child Traumatic Stress Network, June 2008.
- Using Positive Behavioral Interventions & Supports (PBIS) to Help Schools Become More Trauma-Sensitive, Wisconsin Department of Public Instruction.

Data Resources

- Civil Rights Data Collection (CRDC), U.S. Department of Education, Office for Civil Rights.
- Data and Reporting, Pennsylvania Department of Education
- Data Tools, U.S. Census Bureau
- FastStats – Child Health, CDC, National Center for Health Statistics
- Future Ready PA Index, Pennsylvania Department of Education
- Health Statistics, Pennsylvania Department of Health
- KIDS COUNT Data Center, Annie E. Casey Foundation
- Pennsylvania Youth Survey (PAYS)
- Violent Crime, U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics
- Youth Risk Behavior Surveillance System, CDC

National Organizations and Web-Based Resources

- American Academy of Child and Adolescent Psychiatry
- American Academy of Pediatrics

- American Psychiatric Association
- American Psychological Association
- Center for Mental Health in Schools
- Centers for Disease Control and Prevention (CDC)
- Child Mind Institute
- Collaborative for Academic, Social, and Emotional Learning (CASEL)
- GLSEN
- Lambda Legal: Teens and Young Adults
- National Association for Children's Behavioral Health
- National Association of School Nurses
- National Center for Transgender Equality
- National Center on Safe Supportive Learning Environments, U.S. Department of Education
- National Child Traumatic Stress Network
- National Child Traumatic Stress Initiative, Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health & Human Services.
- National Federation of Families for Children's Mental Health
- National Institute for Trauma and Loss in Children
- National Institute of Mental Health
- National Organization for Victim Assistance
- National Technical Center for PBIS
- Trauma and Learning Policy Initiative (TLPI), Massachusetts Advocates for Children and Harvard Law School
- Trauma Aware Schools, Treatment and Services Adaptation Center
- The Trevor Project
- Youth.gov

Pennsylvania Organizations and Web-Based Resources

- Association of School Psychologists of Pennsylvania
- Center for Safe Schools – *Pennsylvania-based organization provides training on a variety of school safety and youth violence prevention topics.*
- Center for Schools and Communities – *The Center for Schools and Communities is committed to improving outcomes for children and families through prevention and intervention initiatives. Staff possess diverse backgrounds in education, human services, community development, and law, as well as specialized services in program development and design, evaluation, training, and resource development.*
- Pennsylvania Coalition Against Domestic Violence (PCADV)
- Pennsylvania Coalition Against Rape (PCAR)
- Pennsylvania Human Relations Commission (PHRC) – *The PHRC enforces the Commonwealth's anti-discrimination laws, the Pennsylvania Human Relations Act (PHRA), and the Pennsylvania Fair Education Opportunities Act (PFEOA). The PHRC also provides free trainings and assistance to a wide variety of institutions, including schools and school entities.*
- Pennsylvania Positive Behavior Support Network – *Through training and technical assistance, the Pennsylvania Positive Behavior Support Network (PAPBS Network) supports schools and their family and community partners to create and sustain comprehensive, school-based behavioral*

health support systems in order to promote the academic, social, and emotional well-being of all students in Pennsylvania.

- Pennsylvania School Climate Survey – *Developed by PDE and available for free, the Pennsylvania School Climate Survey can be used to determine school climate and identify next steps. The survey tool can be adapted to meet specific needs of school entities.*
- Prevent Suicide PA
- Pennsylvania Trauma Informed Education Coalition – Resources
- Pennsylvania Training and Technical Assistance Network (PaTTAN) – *PaTTAN has developed a broad array of web-based publications, materials, and streaming media resources addressing the topics of MTSS, PBIS, and cultural responsiveness, among others.*
- Safe2Say Something, PA Attorney General's Office