Guidance for Supporting Student & Staff Socio-Emotional and Behavioral Health When Reopening Schools

REENTRY GUIDE AND TOOLKIT

August 4, 2020

Introduction

The following information is being provided to assist districts and schools in assessing, planning and implementing strategies to support student and staff wellbeing and mental health when reopening. Restart and recovery require adaptability and flexibility. Districts and schools must demonstrate a willingness to pivot in response to changing conditions and use data to sustain cycles of re-engagement and recreate foundations for learning. This guide provides a framework with actionable recommendations. School leadership teams can use this guide to plan for supporting the needs of students and adults while collaborating with district leadership to assure access to the critical resources, support, and guidance to implement their prioritized action steps.

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Guidance for Reentry through a Multi-Tiered Approach

Dr. George Sugai, a leading researcher in the field of PBiS, warns we cannot "simply turn on the light switch" and return to business as usual in the fall. However, leadership teams should avoid the inclination to respond with new tools (e.g. adding a new SEL curriculum) or collecting new data (e.g. universal screening surveys and tools) without deliberate team-based problem solving and establishing systems to support their use.

To prepare for restart and recovery, school-based teams will benefit from a framework to guide action planning and establish priorities. A Multi-Tiered System of Support will provide teams with an approach that is adaptable to needs at the student, classroom, grade or school level. Thus, as schools and districts plan for return in the fall, leaders should consider using the following MTSS key features and guiding questions to inform all levels of conversation. It may also be helpful to review the tools in the additional resources section of this document.

MTSS Key Feature	Guiding Questions:
Equitable Outcomes: All students and staff return to schools that are **consistent, safe, positive and predictable** school climates.	What outcomes do we hope to impact? What is the concern we are trying to address?
Systems: Continue to invest in systems to support high fidelity implementation across time. **Leverage existing leadership/problem-solving teams** to guide planning and implementation, and consider efficient and effective means to support educators' professional learning and wellness within current resources, experience, and expertise.	How can you leverage existing leadership teams to plan for return to school? How will staff be supported to implement our response?
Practices: Ensure a continuum of supports are available that include (1) a few evidence based and culturally responsive practices for **all students and staff** with a particular focus on building relationships and socio-emotional skills; (2) layered support to **some** that reinforce social support systems and enhance Tier 1 instruction and (3) intensive and individualized support to the **few** students whose socio-emotional and/or behavioral reactions to stress overwhelm their ability to cope and progress socially and/or academically.	What practices are already in place or need to be in place that will lead to the most equitable and biggest impact for our staff, students and families?
Data Based Decision Making: School improvement efforts, whether they occur at the district, school, classroom or student level all begin by identifying a problem and exploring data to understand the problem and develop solutions. In our current context, schools will be addressing similar yet diverse problems based on their location, district and approach during online schooling. This makes developing a list of recommended practices ineffective unless teams can establish priorities via use of an effective and efficient data-based decision making process.	What data practices are already in use, and how can these be used to inform our response? Do we have enough information to inform our response? What specific information is missing to inform our response?

Quick Start Guides

Planning for the 2020-2021 school year will be unprecedented… Students and staff are likely to have significant physical and emotional needs due to the impact of COVID-19 on communities, requiring that schools have clear, efficient, and evidence-based action plans to address these potential needs.

To support districts and teams, the following critical actions, while **not exhaustive, are meant to provide actionable steps that schools can** immediately **prioritize regardless of whether students return to remote or in-person instruction.**

District: *The following are necessary district level action steps to support the planning, development and implementation of critical SEB** practices across schools*

See: District Level Action Plan Template

Area	Prior to Return to School	Toolkit Quick Links
Critical Action #1: **Leadership Teaming**	Revisit leadership team membership. Ensure the team includes members with expertise in data science, school and community mental health staff and school nurses.	Leadership Teams
Critical Action #2: **Aligned Communication**	Revisit mission and vision and ensure messages are cohesive across the district. Develop a clear communication plan and strengthen communication routines (update contacts at district, school, community levels) Clearly communicate how school professionals should access district crisis response supports.	
Critical Action #3: **Establish an Evaluation Plan**	Focus on developing a process to evaluate and respond to immediate student needs. Focus on developing a process to evaluate and respond to immediate staff needs. Establish expectations for universal screening that prioritize school-wide and other informal data sources.	Needs Assessment Universal Screening Diagnostic Assessment
Critical Action #4 **Establish a Support Plan for Universal SEB Practices**	Based on information collected through your evaluation identify universal expected practices for all district schools. Based on identified needs of staff ensure a continuum of supports are available and communicated. Ensure educators check in with all students and families before the school year begins.	Tier 1 Supports Tier 2 and 3 Supports Staff Wellness

This tool is being provided for informational purposes only and should not be considered required by the Delaware Department of Education.

	Ensure coaching and training is available to implement.	
Critical Action #5 **Local Implementation Demonstrations**	Partner with schools to identify and highlight effective implementation of key practices.	

School: *The following are necessary school level action steps to support the implementation of critical practices for the return to school.*		
See: School Level Action Plan Template		
Area	Prior to Return to School	For More Information
Critical Action #1: **Leadership Teaming**	Establish a communication plan with district leadership. Utilize an existing building leadership team and reconsider team membership to ensure the team includes members with expertise in data science, school and community mental health staff and school nurses. Ensure a problem-solving team is established to connect students with immediate SEB and mental health needs to support.	Leadership Teams Problem Solving Teams
Critical Action #2: **Establish an Evaluation Plan**	Identify immediate student and staff needs with district support using broad needs assessment data. Establish systems aligned with district expectations for universal screening that prioritize school-wide and other informal data sources.	Needs Assessment Universal Screening Diagnostic Assessment
Critical Action #3: **Develop a Support Plan for Universal SEB Practices**	Maintain consistency of expected practices as appropriate and prioritize new and/ or updated supports using a data-based decision-making process. Based on identified needs of staff ensure a continuum of supports are available and communicated. Ensure educators check in with all students and families before the school year begins. The problem-solving team should explicitly outline the school's process for staff to utilize when referring students with immediate needs for support	Tier 1 Practices Tier 2 and 3 Practices Staff Wellness

*SEB = social emotional and behavioral

QuickStart Toolkit

Establish Effective Teaming and Communication Practices

Leadership Teams: District and charter leaders will need to bring together administrators, teachers, school staff, families, youth, and community partners to co-create supportive learning environments where all can feel a sense of belonging, heal, and thrive (CASEL, 2020). This use of a multidisciplinary team approach is key to planning for the reopening of schools. School districts and charter schools should convene leadership teams for crisis planning and establishing protocols and expectations. The team should specifically evaluate student learning supports and any social, emotional, and behavioral barriers to academic and behavioral success. The team should include at minimum an administrator and teacher representative and/or instructional leader, as well as student support professionals like the school counselor, school psychologist, school nurse and School-based Wellness Center representative (when applicable).

Problem Solving Teams:

Each school should have a problem-solving team that is responsible for reviewing students referred for additional support and designing/refining Tier 2 and 3 interventions. The team should include members of the school's leadership team, community partners (if possible), and school based mental health providers (e.g. school counselor, school social worker, school psychologist). As schools prepare to reopen, it is critical for the problem-solving team to:

- Outline and communicate a protocol for educators and families to use when they have concerns about a student. It may be beneficial to revisit the school's request for assistance forms and tools to ensure it matches the current context (e.g. are internalizing problems captured? do the forms work for online instruction?).
- Outline a protocol for understanding referred student needs in order to make appropriate linkage to interventions.

Evaluation Plans

It is understood that all schools are working to develop a process to identify student and staff needs in order to establish both academic and non-academic priorities when planning for a new school year. However, we must also recognize it is essential that schools are as efficient and accurate as possible during this process. Thus, a few key ideas should guide your evaluation process. Your evaluation plan should:

- Provide the data needed to immediately understand and address student/staff needs and ensure on-going monitoring after beginning instruction.
- Be representative of your district's demographics and include multiple perspectives to ensure equitable decisions are made.

When developing your evaluation plan, ensure you are only collecting (or reviewing) the data needed to address the problems you have prioritized. A simple starting point as suggested by Hess and Robbins (2011) is for teams to consider the following 4 questions:

- What is the problem we are trying to solve?

- How do we feel about the problem?
- What data do we have (or need) to understand the problem?
- What are we going to do about it?

After defining specific problems, it becomes clear that local context will influence your district and school evaluation plans. A few examples:

- District A worries they do not have the resources to meet student needs but are unsure what those needs are. They have had a difficult time connecting and communicating with a majority of their families and students for various reasons. They realize they don't have enough data to allocate resources and focus their efforts on developing an informal needs assessment to be used across all students and staff. Results are disaggregated by school and shared with school leadership teams to support their action plans.

- District B is in a community that has experienced significant impact from COVID-19. They have established on-going communication with their families and students and are aware of those who require immediate intensive support. However, because of the widespread needs in their community they worry about missing students. This district decides to prioritize expectations around the development of a universal screening process that prioritizes a review of school-wide data. Plans are communicated with schools and professional development and coaching are provided to prepare schools to use and analyze existing data for screening.

Establish a Process to Understand Immediate Student and Staff Needs

- **Conduct a Needs Assessment**
  In addition to identifying which students and staff need support (e.g. universal screening) teams should also be collecting data that can help inform action steps around necessary systems and practices to meet immediate student/staff needs. A variety of needs assessments are described in the resources section of this document. However, a simple starting point is to design and collect a needs assessment survey that can quickly capture student, staff and family experiences with online learning and their concerns/needs as we return to school.

- **Examine SEB and Mental Health Staffing and Roles**
  The anticipated increase in need of mental health support for both students and staff will increase the demand on the current supports. Districts and charter schools should have a clear understanding of what their support staff currently do and their capacity to increase their services. To do so, Districts and Charter Schools should consider the following:

  - Compare current ratios to nationally recommended ratios.
    - School Counselors – 1:250
    - School Psychologists – 1:500-700
    - School Social Workers – 1:250

  - Examine current roles with the recommended roles of mental health support staff.
    - The Role of the School Counselor
    - School Counselor Appropriate vs. Inappropriate Duties

- The Role of School Psychologists
- The Role of School Social Workers

- Consider others with expertise who could serve as coaches to provide prioritized professional development and support to educators. Areas of expertise may include knowledge of MTSS or SEB/SEL/mental health.

- Assess other available resources, their capacity and referral process.
  - Family Crisis Therapist
  - Behavioral Health Consultant
  - School Based Wellness Center Staff
  - Contracted Mental Health Services

Establish a Universal Screening Process to Identify Student Needs
(INCLUDES ALL STUDENTS):
In the context of an MTSS approach to reentry, teams must establish a universal screening process to identify students who are experiencing significant stress or trauma as a result of COVID-19 and to inform universal supports at the school or classroom level. First and foremost, teams must realize the impact of COVID-19 may be minimal for some and it will be substantial for others. **Do not assume it will be obvious which students need support.** Some key ideas about universal screening are outlined below.

For more information on creating a screening process and how to select and implement a universal screener, see "Best Practices in Social, Emotional and Behavioral Screening An Implementation Guide" and the Delaware PBS Website.

Universal Screening:

- is conducted via a team-based approach (e.g. Tier 1 Team)
- is a process (not a tool)
- includes multiple measures such as:
  - school wide data (attendance, grades, discipline data)
  - teacher referral for support
  - additional formal and informal tools based on prioritized needs
- captures the prioritized needs of the district or school and aligns with the core instructional approach
- measures are administered, scored and interpreted against an established standard
- do not require clinical expertise to interpret (but someone with clinical expertise should be on the team)
- are interpreted at the school, class and individual level to inform decision making across all tiers of support (and not used solely to inform individual or group support)

Universal Screening COVID-19 Considerations:

- Revise or create a structured referral process to empower educators and families to recognize and identify students with worrisome stress reactions. Due to the expected high number of referrals, schools should not be using the traditional word-of-mouth or email processes. All staff should be oriented on the referral process and expected to use it.

- Utilize existing schoolwide data sources, paying particular attention to information about student engagement, such as attendance data, to ensure timely intervention for those disconnected from their school community. For an example screening tool see: sample [return to school decision rules](#).
- Collect additional screening data using a formal or informal measure only after teams have outlined the problem they are hoping to address with new data sources.
- **It is not advisable to administer a formal SEB screening measure to inform student level decisions immediately upon returning to school** as the # of students identified will likely be skewed. If a formal screening measure is prioritized use the data to inform universal and classroom level support.
- Rely on existing referral pathways and other informal measures for Tier 2 and 3 intervention.
- For a list of formal SEB screening measures see: [Systematic Screening Tools](#)(Universal Behavior Screeners)
- If an additional measure is prioritized, consider adopting a connections screener or other informal measure that captures student engagement with remote instruction and offered supports:
    - Assess supportive relationships in the school community. Use a self-report survey to identify students who maintain less than 2 connections with supportive adults in the school community
    - Also see: [Connections Screening Fact Sheet](#)
- Adding a formal screening measure should be part of a **district level initiative.** School teams invested in adopting a new tool may wish to review [the following guide](#) and work with their district level leadership team.

Establish a Process to Understand Students with Intensive Needs
(INCLUDES SOME STUDENTS):
Teams should be aware of and pay particularly close attention to students who have experienced loss, significant lifestyle disruption, food insecurity, financial insecurity, history of trauma, preexisting mental health problems, abuse or neglect etc. However, teams should also remember that individual student reaction is determined by a myriad of factors and will likely manifest in different ways requiring a consistent problem-solving approach.

For students whom you already have concerns, a problem-solving team should collect additional diagnostic measures to match the student to an appropriate intervention (understanding the least intensive intervention should be attempted first).

Some examples of **diagnostic measures** include:

- student/family interview
- additional respondent on universal screening measure
- a measure for a specific concern (e.g. PREpaRE [Psychological Trauma Risk Checklist](#))

Universal Socio-Emotional and Behavioral Health Supports (Tier 1)
- **Establish and/or Reimagine Foundational Practices:** Teams should consider the following foundational practices in combination with their evaluation data to proactively plan for reentry.

- **Prioritize Safety:** Establish universal expectations with an emphasis on teaching and practicing health promoting behaviors (e.g. handwashing).

- **Maintain Predictable Routines and Consistency:**
  - The Center on PBIS recommends that schools "go back to the basics" and teach, prompt, and acknowledge predictable routines, positive expectations and SEB skills. Bridge expectations (teach connections) across settings (e.g., home, school, community). For examples of suggested SEB and student learning practices please see: [Returning to School During and After Crisis from PBIS.org](#).
  - When developing routines and expectations, be sensitive to challenges caused by the use of masks, such as the inability to read facial cues, follow speech, as well as impacts on English-language learners and students with disabilities.

- **Foster Connectedness and Positive Relationships:**
  - Establish regular informal check-in processes with all students. These should be done virtually and/or in-person depending on the reopening plan. This sample wellness check can be done with every student. (also see: [5-minute chats with students](#)).
  - Answers to these questions help to identify the student's feelings and coping mechanisms, and **can be linked to the established referral system**:
    - "Do (did) you like staying home or do you miss going to school?"
    - If they like(d) it: "What do (did) you like about staying home?"
    - If they miss(ed) school: "What do (did) you miss about school?"
    - "How does (did) staying home all the time make you feel?" (For younger children, provide these options: relaxed, worried, bored, lonely, happy)
    - "What are some things that you've been doing (did) that are making (made) you happy or bringing (brought) you joy during this time?"
    - "Have you had (did you have) any hard days during this time where you felt really down?"
    - If yes: "What did you do to get through it?"
    - If no: "If you did have a day like that, what would you do to get through it?"
    - "If you were (are) having a hard time, who could you talk to about your feelings?"

  - Teams may wish to consider **the 2 X 10 Method**, described by Allen M. Mendler, Ph.D.: Select a student with whom you do battle. Make a commitment to spend two uninterrupted, undivided minutes of your attention each day for ten consecutive days to build a different kind of relationship. You may ask any question, elicit the student's interests or share your own during this two-minute sequence. You may not correct the student or in any way use this time to persuade the student to change his/her behavior. After 10 days, assess the relationship. Most teachers who use this method have found that initially they do about 90% of the initiating with the student. However, by the end of the tenth day, there is generally a 50-50 give and take.

- **Build Students' Social and Emotional Competencies:**
  - To support districts in their work to expand equity-based social, emotional, and behavioral support, DDOE and DSAMH will host the Whole Child CoP (Community of Practice) for the 2020-21 School Year. For more information click here or contact Teri Lawler (teri.lawler@doe.k12.de.us)

  - Intentionally embed social and emotional competencies into the academic curriculum and ensure all staff teach and prompt these skills throughout the school day.

  - Maintain the core SEL practices/approach used in your school prior to remote instruction and adapt as necessary. For example, if you are a Leader in Me (LIM) School, build upon the LIM foundational SEL practices familiar to your staff and students when preparing for the new school year.

  - CASEL has developed a comprehensive roadmap and guidelines to support teams as they reimagine their SEL practices for reentry.

CASEL's 5 Social and Emotional Competencies and Skills We Need Now:

Self-Awareness: The ability to process our own complex emotions as we work through fears/relief of returning to school, changes in routines, and the ability to be flexible through change.
Self-Management: Students and staff will need to identify and rely on their personal strengths to find ways to cope and build resilience.
Social Awareness: Our school communities need empathy. We must understand that while one student or teacher may be relieved to go back to school, others will not be.
Relationship Skills: Students and staff need to support one another. We must offer compassion, communicate clearly with diverse people (not just those who are experiencing the same thing you are), listen to the experiences of others, and recognize when to seek help.
Responsible Decision-Making: Students must realize their actions directly impact the health of themselves and others, that real and serious consequences may result from small, everyday decisions (e.g. wearing a mask; saying no to a party invitation)

Targeted and Individual (Tier 2 and 3) Socio-Emotional and Behavioral Health Supports

Establish interventions that build upon the foundational practices established at Tier 1 and meet the immediate needs of your students based on broad needs assessment and/or universal screening data. Ensure on-going connection and communication with community partners and make linkages to supports based on your school's needs.

Crisis Response Protocols
- Develop and employ a consistent process for families and educators to report immediate concerns or request support.
- Ensure there is a system to document school response to concerns that can be utilized to follow up and monitor on-going needs.

- For more information, please see the following recorded webinar (and resources) with presenters Amanda Wells and Jon Cooper.

Connect with Community Partners: Work with community mental health, civic, and related agencies to set up and prepare resources and supports for students and staff re-entry to school.

- Each school and district should establish a point of contact who is responsible for identifying and making linkages to community partners. Ensure linkages with the following:
  o   mental health resources
  o   food pantry resources
  o   drug/alcohol resources
  o   financial resources
- Make preemptive relationships and connections with community partners before the school year begins. When making contact ask the following:
  o   What supports or services does your organization offer?
  o   What is the referral process?
- Consider joining available consortium or coalition to networking and make connections with community partners
- See the Project DelAWARE Resource Guide for a list of crisis hotlines, enrichment programs, coalitions, community organizations, State Service Centers and Behavioral Health Providers.
- See www.delaware211.org for an online guide to Human Services in Delaware.

Inventory and Establish Interventions

- **Examine Available Resources**
  Resource Mapping (Making Caring Common Project) - Resource mapping is a strategy for identifying and analyzing the programs, people, services, and other resources that currently exist in your school. This information can help school leaders better assess the needs of the school and to make informed decisions about where to focus change efforts. This guide will lead you through the process of resource mapping in four easy steps. By the end of this activity, you will have a deeper understanding of the key programs and resources related to well-being and culture that your school is already utilizing, which will give you a solid foundation for planning.

- **Prioritize Relationship Building Interventions**
  o   Establish a support system for high rates of absenteeism due to medically fragile students or family members, school refusal or mental health problems. This should include regular check-ins with students and family members.

  o   Check In/Check Out:
      ■   Adapting Check-In Check-Out (CICO) for Distance Learning

- **Prioritize Skill Building Interventions**
  o   Student Psychoeducation Groups
      ■   C-BITS and Bounceback informational video
      ■   PREPaRE Student Psychoeducational Group Information

  o   Social and Emotional Skill Building

■ Tier 2 SEL groups and interventions should (whenever possible) build upon foundational universal practices. Small group instruction will be most effective when students are provided additional instruction, practice and reinforcement of the skills being taught to all students at Tier 1.

Staff Emotional Wellness

Analogous to using a Multi-Tiered Approach to plan for student reentry, schools should utilize the same framework to identify the actions needed to ensure staff "feel physically and emotionally ready to re-enter, and are capable of supporting student needs" (Chafouleas & Marcy, 2020, p. 5).

- To begin, consider reading the following article: Staff Well-being and Prevent Burnout as Schools Reopen from UCLA which provides information and tools for returning staff to school. And consider the following questions:
  ○ Outcomes: What outcomes do we hope to impact by focusing on educator self-care? What is the concern we are trying to address?
  ○ Data: What data sources are available to understand adult needs? What data would be helpful?
  ○ Systems: What leadership team currently exists that can support adult wellness? Do our policies and communication support adult wellness?
  ○ Practices: What supports will we deploy for ALL staff (e.g. adult self-care expectations)? What additional supports are available for some (e.g. groups for staff support)? and What individual supports are available for a few (e.g. Employee Assistance Programs)?

- When developing your staff wellness plan, ensure there are systems in place to identify immediate and on-going staff needs. Some suggestions include:
  ○ Develop a "5-minute check in" analogous to the student check in process via an informal survey. Questions should provide insight into staff wellness prior to assembling in person (or remotely).
  ○ Check on your mental health team. The school's mental health team will be the first responders when it comes to supporting students and staff. This will be a challenging and exhausting time for them.
  School leaders should check in periodically, but also schedule team meetings in which they can share their experience, what is working well, what isn't working well and brainstorm potential changes.
  ○ Consider the Professional Quality of Life Scale as a measure of compassion satisfaction and fatigue. Pay particular attention to your mental health and support team (e.g. school nurses) who may be particularly vulnerable in their role.

- When responding to staff needs, ensure there is a continuum of supports available to meet the needs of all staff. Some suggestions include:
  ○ **Individual support (EAP+Work/Life Program)**: Professional Counseling Services. Members can obtain one-on-one professional counseling services, a maximum of five (5) sessions annually (plan year) per topic or concern, and, if needed, a referral to receive continued professional counseling services through the member's health care plan. When HealthAdvocate determines that a member requires more than five sessions, the

member will be transferred to receive professional counseling services through his/her health care plan where applicable co-pays/co-insurance apply. *Access: 800-343-2186 or www.healthadvocate.com/members and enter "State of Delaware" as the log in.*

- **Group Support (JFS Online: Supporting Essential Personnel):** NEW! VSTEP (Virtual Support to Essential People) is a new online support group for essential personnel to share their personal & professional hardships and triumphs. This group will include tips for self-care and managing anxiety.
    - Every Tuesday at 7AM and Thursday at 7PM.
    - FREE and open to essential personnel looking for support and a place to be heard.
    - Contact Becca for the secure access link: rmcadams@jfsdelaware.org

Additional Resources for Planning

Action Plan Template for Schools

- [Critical Actions District Level Action Plan](#)
- [Critical Actions School Level Action Plan](#)
- [School Mental Health Screening Trauma Informed Action Plan Template](#)

Roadmaps for Reopening Schools

- [PBIS Returning to School During and After Crisis Guide](#)
- [Reunite, Renew, and Thrive: Social and Emotional Learning Roadmap for Reopening School](#)

Broad Needs Assessment Resources

- [Attitudes Related to Trauma-Informed Care (ARTIC)](#) - The ARTIC, created by Dr. Courtney Baker of Tulane University and the Traumatic Stress Institute, measures professional and paraprofessional attitudes about trauma-informed care. It is available for pencil and paper use for a nominal fee. The automated version is more costly, but provides 3-year progress monitoring of implementation strategy changes and how they are perceived by stakeholders.

- [The School Health Assessment and Performance Evaluation System (SHAPE)](#) - SHAPE offers a no-cost, user-friendly online platform for individuals, schools, districts, and states to use to assess and improve their school mental health systems. SHAPE offers the tools needed to improve school mental health programming and sustainability.

- [Trauma Responsive Schools Implementation Assessment (TRS-IA)](#) - The TRS-IA is a free, easy to use quality improvement tool developed by the National Child Traumatic Stress Network and the National Center for School Mental Health. The TRS-IA is an evidence-informed self-assessment that comprises eight key domains of trauma-responsive schools and districts. Upon completion of the assessment, feedback reports are generated to support schools and districts to enhance their trauma responsiveness.

- [Trauma Sensitive Schools Checklist](#) (TSSC) - The TSSC assesses the 5 components needed to have a trauma sensitive school setting. Developed by Lesley University and the Trauma and Learning Policy Initiative, the flexible framework can be used to identify entry points for sustainable change in policies and practices. The measure is available free of charge and is recommended for completion at least annually.

- [MTSS Tier 1 Evaluation (Tiered Fidelity Inventory)](#) **-** The purpose of the SWPBIS Tiered Fidelity Inventory (TFI) is to provide a valid, reliable, and efficient measure of the extent to which school personnel are applying the core features of school-wide positive behavioral interventions and supports (SWPBIS). The TFI is divided into three sections (Tier 1: Universal SWPBIS Features; Tier 2: Targeted SWPBIS Features; and, Tier 3: Intensive SWPBIS Features) that can be used separately or in combination to assess the extent to which core features are in place.

Universal Screening Resources

- School Mental Health Screening (Part 1): The Benefits and Cautions of Universal Mental Health Screening
- School Mental Health Screening (Part 2): Trauma-Informed Considerations
- School Mental Health Screening (Part 3): Is Universal Screening the Right Choice?
- The Delaware PBS Universal Screening Resources
- Top Ten Questions Answered about Universal Screening
- Systematic Screening Tools from PBS.org
- "Best Practices in Social, Emotional and Behavioral Screening An Implementation Guide"
- RESPONDING TO COVID-19: PLANNING FOR TRAUMA-INFORMED ASSESSMENT IN SCHOOLS

SEL Resources:

- Whole Child CoP for the 2020-21 School Year. For more information contact Teri Lawler (teri.lawler@doe.k12.de.us)
    - **Network Creation:** DDoE will invite district teams to engage in a networked learning opportunity focused on social-emotional learning (SEL). Teams should be composed of up to 6 people from a diverse range of roles related to whole child development and district/school leadership. Teams should include a district parent and out-of-school time or community partner.
    - **Facilitated Networked Learning:** 10-12 interactive virtual sessions* for district teams. These sessions will be delivered monthly, each running 1.5 - 2 hours in length. We will focus on content related to relationship building, student SEL, adult SEL, and trauma-informed practices in the early months to ensure that all district teams have a shared knowledge base. Later sessions will leverage the power of the network to encourage peer sharing and address specific problems of practice. All sessions will be anchored around research, promising strategies, and opportunities for interactive learning. Monthly webinars with NCSMH will be available to the entire school community to compliment Networked learning. To fully leverage the power of the network and of within-district team time, participating teams will be strongly encouraged to attend sessions live. However, all virtual sessions will be recorded and made available for those who need to catch up asynchronously. Following each meeting, all participants will receive a set of tools and resources associated with the topic covered that month.
    - **Technical Assistance:** TransformEd will provide all participating districts with up to five hours of individualized technical assistance to address topics that are unique to that district / community and provide more tailored support.

- Rethink Program:
  For a limited time, active State employees enrolled in an Aetna or Highmark Delaware health plan are eligible for Rethink. This benefit is provided at no cost. Rethink is designed to support families caring for children with learning, social, or behavioral challenges, or developmental disabilities (e.g. autism spectrum disorder, ADHD, learning disabilities, etc.), but anyone who needs parenting support can benefit from their

exclusive content. The program has no age restriction, requires no diagnosis, and is completely confidential.

Other Helpful Links

- School Reentry Considerations
- How Schools Ensure Social Connections During Physical Isolation
- Strategies to Support Self-Care for Educators
- Strategies for Trauma-Informed Distance Learning
- Supporting Mental Health During COVID-19