Come to PPIECESS:

Foundational Elements of a Therapeutic Milieu

A Guide for Integrated Educational
and Social-Emotional Classrooms

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Introduction

"None of us is as strong as all of us."
Positive Environment Network of Trainers (PENT)

Come to PPIECESS is the result of over a year of multi-agency collaboration between Chico Unified School District, Butte County SELPA, and the Diagnostic Center of Northern California. Through the process of developing this classroom tool new relationships were formed and the project took on a new life through the collective wisdom and collaboration of the team.

The project began with the goal of implementing current research in supporting students with emotional and behavioral disorders in self-contained therapeutic classroom settings. In the early stages of classroom consultation and attempts to infuse evidence-based approaches, it became clear that the success or strife of a program often depends on a teacher or team's innate skills and experience. Adding to the dilemma is the high teacher and support staff turnover in these challenging classroom settings. Given these realities the multi-agency team sought to create a living document that could act as a guidance tool for staff working in these settings that would support implementation of best practices regardless of prior skill set.

The final result of this effort are the seven foundations of an integrated educational and social-emotional classroom. These foundations were identified through natural reflection of good classroom practices, as well as review of current research in behavioral support, emotional development/regulation, trauma-informed supports, and supporting adult learning. The term "Come to pieces," means something has been designed so that it can be divided into smaller parts. The intent of the Come to PPIECESS resource and accompanying classroom checklist is to support teams in identifying where the strengths and growth areas lie within a classroom and address these areas in a clear, systematic, and collaborative way.

In the coming school year and beyond, this resource will be vetted in the integrated educational and social- emotional classrooms in Chico Unified School District. We are encouraged by the interest we've received already for comparable programs in Butte County and hope to see this approach adopted on a broader scale. Thank you for your interest in this resource. We hope it supports positive outcomes for your students.

I would like to thank Butte County SELPA and the Diagnostic Center for allowing their talented staff to support this project. It is proof that when we pool resources and support each other's efforts great things can be accomplished. This multi-agency collaborative approach was well worth the time and energy and I hope other districts will feel encouraged to reach out and work together with supportive entities.

Eric Snedeker
Director, Educational Services, Chico Unified School District

NOTE: The original Come to PPIECESS framework was updated in the 2020-21 school year through collaboration with Butte County SELPA and its member LEAs, and the Diagnostic Center North. An additional "S" was added to the name, so it is now "Come to PPIECES**S**."

Acknowledgements

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Program Foundation 1: Positive Reinforcement

A robust and cohesive means of delivering reinforcement to students which is clear, consistent, and meaningful is an essential part of a functioning EBD classroom. A properly implemented positive reinforcement system serves as a means to help shape student behavior, provide clarity of expectations, promote prosocial engagement between staff and students, and contribute to a positive classroom culture and environment. Classrooms which demonstrate high ratios of positive-to-negative interactions between staff and students are able to increase the number of teaching and learning opportunities that enhance students' meaningful engagement (Rathel, Drasgow, Brown, & Marshall, 2014). In addition, classroom environments which focus on positive reinforcement decrease instances of staff and teacher burnout (Reinke, Herman, & Stormont, 2012).

One of the most common mistakes when using reinforcement is a lack of specificity (Allday, et al., 2012). In addition, irregular or illogical delivery, lack of meaningfulness to the student, low frequency, and poor timing also impact the effectiveness of reinforcement. Positive reinforcement should always be specifically stated, contingently given, desired by the student, given frequently enough to maintain the positive behavior, and given immediately after the desired behavior (PENT BIP Desk Reference). Once a behavior is learned through consistent and immediate access to reinforcement, fading to an intermittent schedule of reinforcement provides for longest lasting maintenance of the behavior change (Hogarth & Villeval, 2010).

Positive reinforcement systems can be conceptualized as a concrete, token economy system as well as whole-class interactions that promote relationship building. Classroom staff must be committed to promoting a positive environment and have self-monitoring evaluative tools in place to assure proper minimum 4:1, positive to negative interaction ratios. The means of delivering reinforcement to students must be tangible and contingencies must be clearly understood by both staff and students. Students must have means of monitoring their own progress in the reinforcement system by tracking their earning of points/reinforcers, such as stamp cards, a "bucks" system, or other classroom points as well as receiving regular feedback from staff.

A goal for all children is to help them develop an intrinsic ability to regulate their behavior, as well as a motivation to do well and find value in healthy relationships with others. Unfortunately, children come to our classrooms in varying states of executive functioning and relational deficit, which may significantly impact their inherent ability to regulate their behavior and make sound choices. Positive reinforcement is a tool that not only provides external motivation to help students stay on track toward their goals, but, implemented with fidelity, helps promote genuine connection between students and staff. Eventually, these attachments and the feelings they elicit become the most

reinforcing thing we can offer, reducing the need for external contingencies, and helping students manage frustration more easily (Perry, 2001).

To support Positive Reinforcement, there should be an intentional focus on professional development, including coaching and modeling, in the areas of reinforcement, programs such as the Nurtured Heart Approach, and PBIS. School staff must receive support and training related to successful inclusive practices. Additionally, all school staff, including administrators and general education teachers, must recognize the connection between student motivation and self-esteem, and equity in access to the general education instructional program and less restrictive special education classroom settings to the maximum extent possible. All school staff should work intentionally to ensure students are positively reinforced for their effort and participation within all educational settings.

The following classroom elements are intended to provide guidance in the development and implementation of a meaningful and effective positive reinforcement system.

Classroom Elements

1.0 Whole class reinforcement systems are developed, reviewed, and utilized regularly.

Environmental examples:
- The means by which students earn points are clear, concrete, and immediate. For example, at younger ages, every student can have an individual stamp card with stamps given when specific reinforcement is given.
- There is a visual representation that depicts the elements of a reinforcement system (resource 1).
- Each individual student has the opportunity to earn motivating activities or items at least daily based on their positive classroom behavior.
- A person visiting the classroom can see evidence of specific and meaningful reinforcement being given within five minutes of entering the classroom.
- Students can explain how they earn reinforcement and accurately describe their progress in the system.
- The schedule of reinforcement should be often enough so that all students are accessing reinforcement multiple times per day.
- There are established procedures for creating and monitoring data collection procedures

Teacher role examples:	**Clinician role examples:**	**School Psychologist role examples:**	**Paraprofessional role examples:**
- Teach and review reinforcement systems with students. - Reference the reinforcement motivators to redirect unwanted behavior. - Empower other staff in the classroom to	- Give students reinforcement. - Assist in modeling appropriate reinforcement procedures for support staff. - Support the teacher in regular review of reinforcement systems with students.	- Support the teacher in regular review of reinforcement systems. - Model appropriate reinforcement for support staff. - Empower other staff in the classroom to give reinforcement.	- Give students reinforcement. - Support teacher in regular review of the reinforcement systems with students. - Reference the reinforcement motivators to redirect unwanted behavior.

give reinforcement (i.e., points or tokens). ● Model appropriate reinforcement for support staff. ● Create a written protocol for implementing reinforcement system (**resource for protocol outline/template)** ● Update and review written protocol with support staff as needed	● Reference the reinforcement motivators to redirect unwanted behavior.		● Prepare materials needed to keep the reinforcement system up-to-date ● Provide behavior check-ins and follow through with student earning of reinforcement when requested by the teacher

1.1 Individual reinforcement for adherence to rules and expectations are explicit (resource 2), predetermined, consistently followed through on, and logically tied to the appropriate behavior.
Environmental examples: ● Each student has a designated way to earn reinforcement (i.e., point card, token board). ● Students are explicitly told what they are doing correctly when given reinforcement. ● Reinforcement is given immediately following desired behaviors

Teacher role examples:	Clinician role examples:	School Psychologist role	Paraprofessional role

● Design reinforcement criteria. ● Model delivering reinforcement to individual students in response to appropriate behaviors. ● Provide feedback to support staff on time and nature of reinforcement.	● Work with the teacher to determine reinforcement criteria. ● Model delivering reinforcement to individual students in response to appropriate behaviors. ● Provide feedback to support staff on timing and nature of reinforcement.	**examples:** ● Work with the teacher to determine reinforcement criteria. ● Provide feedback to support staff on timing and nature of reinforcement.	**examples:** ● Work with the teacher to determine reinforcement criteria. ● Model delivering reinforcement to individual students in response to appropriate behavior.

1.2 Ongoing reinforcement assessments (resource 3 & 4) are conducted and results are documented where staff can access.
Environmental examples: ● Individual student binders containing reinforcement inventories as well as summary information of preferred reinforcers ● Saliency of chosen reinforcers are frequently checked and, when needed, new reinforcers chosen, based on assessment. ● Parent information and, if applicable, systems are integrated into student plans and contingencies.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
● Create and maintain reinforcement binders which are	● \Connect home reinforcement system to school	● Work with the teacher to determine reinforcement criteria.	● Provide feedback to the teacher

easily accessible for all staff. ● Regularly administer reinforcement surveys. ● Link reinforcement to parent/home systems, where appropriate.	contingencies. ● Assist the teacher with maintenance of reinforcement binder. ● Provide feedback to the teacher regarding possible reinforcers and meaningfulness.	● Provide feedback to support staff on timing and nature of reinforcement.	regarding possible reinforcers and meaningfulness of current reinforcers.

1.3 Students are involved in setting their own behavioral goals (resource 5).
Environmental examples: ● Daily discussion with students regarding behavior targets ● Data is collected and reviewed, as appropriate, with students prior to determining behavior goals. ● Behavior goals are stated in terms of appropriate skills, rather than inappropriate behaviors. ● Behavior goals are revisited during the day and updated, as needed.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
● Designate time in schedule for students to establish and re-visit behavior goals as well as	● Assist students with development of meaningful behavioral goals. ● Prompt re-visiting	● Assist the teacher and clinician with helping students set behavioral	● Assist students with development of meaningful behavioral goals.

review relevant data. • Collect relevant behavior data and make it understandable to students.	of individual goals consistent with classroom schedule and as needed.	goals. • Collaborate with the teacher about strategies for student data collection.	• Prompt re-visiting of individual goals consistent with classroom schedule and as needed.

1.4 Students are involved in monitoring their own behavior.

Environmental examples:
- Individual data tracking sheets are created for each student's individual behavior goals (resource 5 & 6).
- Procedures are developed for students to monitor and/or reflect on their behavior performance (i.e., check-in following difficult tasks, or identified times to track on-task behavior).

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Teach students age-appropriate methods of tracking their own behavior. • Develop age-appropriate materials for students to use in self-tracking. • Provide time in	• Support student reactions and regulation to the tracking of their behavior. • Review individual and group progress with students.	• Collaborate with teachers about data tracking sheets • Remain informed and up-to-date with student behavior progress	• Review individual and group progress with students.

schedule and necessary script/structure for self- tracking. ● Collect relevant behavior data and make it understandable to students.		● Problem solve with the teacher and student when behavior is not improving	

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Program Foundation 2: Predictable Boundaries

"Predictable boundaries" refers to the way we proactively create behavioral limits as well as our response to student behaviors. "Children do better when they have a clear understanding of the rules and when there is a degree of predictability in adult and environmental response" (Wolpow, Johnson, Hertel, & Kincaid, 2009, p.37). Predictability builds a sense of safety and is a vital element in helping students regulate, which in turn allows students to access learning.

Predictability can increase a sense of safety in relationships and in the environment. When children feel safe, they are able to move from a "fight or flight" response to healthy development (Blaustein & Kinniburgh, 2010). When expectations are clear and consistent we are helping mitigate the impact of trauma, previous chaotic environments and/or behavioral disturbance by eliminating guesswork on what may be happening next. This is calming to the nervous system, reduces hyperarousal, and improves the likelihood of acquiring learning.

Predictable responses also keep us from re-traumatizing kids. "Sanctuary trauma" is the condition that results when trauma victims turn to those from whom they hope to find safety only to encounter a reception that is not as supportive as anticipated (Wolpow et al, 2009, p. 13). The likelihood that children and their families will experience school-based sanctuary trauma has a direct correlation to how well staff are informed about trauma's impact on relationships, behavior, and learning. If staff is poorly informed about the role of predictable boundaries, traumatic experiences may be exacerbated (Wolpow, et al., 2009). Inconsistent behavior management practices, unclear rules and expectations regarding appropriate behavior, and disagreement and inconsistency of implementation among staff members can unintentionally contribute to the development of emotional and behavioral problems, exacerbate trauma, and result in academic failure (Sprague, Cook, Browning Wright, & Sadler, 2008; Wolpow et al. 2009).

Proactive implementation of boundaries should be predictable, consistent, and posted in a prominent location. Teaching and reviewing consequences reinforces consistency and expectations and should therefore occur regularly. Blaustein & Kinniburgh (2010) suggest using "positive reinforcement rather than limits to shape behavior whenever possible" (p. 92). Further, "limits are most appropriate when they are immediate, related, age-appropriate, proportional, and delivered in a calm and respectful voice" (Wolpow et al., 2009, p.16).

Predictability necessitates that all staff are clear about the steps involved and their role in any response to behavior. This includes the development of reinforcement procedures, appropriate staff responses based on the intensity of the behavior, and how and when to access administrative support. Responses to challenging behaviors should provide the least amount of energy as possible to non-adherence of boundaries. Clarity with boundaries reinforces consistency and the avoidance of power struggles (Blaustein & Kinniburgh, 2010).

To support Predictable Boundaries, there should be an intentional focus on professional development, including coaching and modeling, in the areas of impact of trauma and traumatic stress, as well as training related to successful inclusive practices which should extend to all appropriate school staff. Additionally, all school staff, including administrators and general education teachers, must understand the importance of effective strategies that can create a sense of safety and belonging while providing consistent expectations for academics and behavior.

Equity in access and participation in other educational settings on the comprehensive campus must be normalized, and staff should work to ensure students understand that to the extent possible, their ability to successfully transition to less restrictive environments will be essential to post-school outcomes. Where appropriate, IEP goals should focus on building tolerance and coping skills toward increasing student independence.

The following classroom elements and environmental examples outline practices of predictable boundaries in a classroom.

Classroom Elements

2.0 Behavioral expectations for the classroom and other school settings are posted, taught, reviewed, and known by each student including procedures for free time and transitions (Resources 1 & 2)

Environmental examples:
- Each classroom environment has clear behavioral expectations, e.g., reading area, regrouping area (resource 3), academic stations.
- Each school setting has clear behavioral expectations, e.g., bathroom, hallways, cafeteria.
- Staff respond to requests and behavior through reference to expectations and procedures.
- A behavioral array (resource 4) that lists non-compliance behaviors from least impactful to most impactful including consequences
- Reactive strategies are taught and practiced by adults in the environment.
- Behavioral expectations are consistently applied by adults in the environment including how to respond to adherence and non-compliance to expectations.
- The teacher, school staff, and clinician regularly communicate expectations and consequences to parents/caregivers, especially as a proactive measure.
- A variety of instruction including role play is used to teach expectations.
- A way to track success with meeting expectations, e.g., student self-reports (resource 5), teacher data collection (resource 6)
- A substitute cheat sheet/binder exists to outline expectations, consequences, and procedures for all positions in the classroom (e.g. teacher, clinician, support staff.
- Transition prompts are posted in appropriate locations, e.g., line order posted on the door, etc.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Collaborate with the clinician and aides to determine expectations and	• Collaborate with the teacher and paraprofessionals to determine expectations and	• Review program expectations and procedures with the teacher.	• Collaborate with the teacher and clinician to determine expectations and

procedures.	procedures.	● Provide feedback to the teacher and staff about their follow through with set expectations and procedures.	procedures.
● Advocate for establishing academic expectations and procedures during collaboration.	● Advocate for establishing social and emotional expectations and procedures during collaboration.	● Review sub binder.	● Follow through with all expectations and procedures, including during times led by aide (stations, PE, etc.)
● Post, teach, and follow through with all expectations and procedures.	● Follow through with all expectations and procedures, including during times led by clinician (group.)	● Work with the teacher to determine the behavioral array for non-compliance behaviors.	● Ask for and provide feedback regarding on-going se and success or need to adjust expectations and procedures as a team.
● Allow and ensure all classroom staff follow through with all expectations and procedures.	● Allow and ensure all classroom staff follow through with all expectations and procedures.	● Model, through role play, how to teach behavioral expectations to students and how to apply them for staff.	● Ensure substitute paraprofessionals have access to expectations and procedures.
● Ensure site and district administration are familiar with expectations and procedures.	● Ask for and provide feedback regarding on-going use and success or need to adjust expectations and procedures as a team.	● Model appropriate reinforcement for the teacher, clinician, and paraprofessional staff. .	
● Ask for and provide feedback regarding on-going use and success or need to adjust expectations and procedures as a team.	● Ensure substitute clinicians and support staff have access to expectations and procedures.		
● Ensure substitute			

support staff and teachers have access to expectations and procedures.			

2.1 Intervention for behavior problems occurs early in the sequence to prevent escalation.

Environmental examples:
- Adults know early behavior indicators for individual students.
- There is a non-verbal or quiet cueing system for adults to communicate about student needs.
- Employing environmental supports such as providing low light, reducing noise, increasing/decreasing proximity, and varying settings.
- Use of de-escalation and crisis management strategies (resource 7) are used (e.g., integrated experience and verbal de-escalation continuum) (resource 8).
- Classroom staff response sequence will be reviewed and posted, if appropriate, in a prominent location in the classroom.
- Common use of language regarding affect regulation is used, such as: "I see your body is…"
- Redirection to learned problem-solving strategies is used by staff
- Reminders of the reinforcement procedure.
- 'Skill of the Week' is used to support adults learning specific responses in the sequence.
- Student self-management strategies are routinely taught and reviewed.

Teacher role examples:	**Clinician role examples:**	**School Psychologist role examples:**	**Paraprofessional role examples:**
- Manage pacing of instruction and environmental supports. - Collaborate with	- Collaborate with the teacher and aide to determine and/or teach behavior response sequence.	- Collaborate with the clinician, teacher, and classroom staff to determine individual	- Collaborate with the teacher and clinician to determine individual behavior

clinician, and classroom staff, to determine individual behavior response sequence, problem-solving strategies and reinforcement procedures. ● Ensure site and district administration are familiar with responses. ● Ensure aides are familiar with response and that they follow through with response, problem-solving strategies, and reinforcement procedures. ● Ensure substitute support staff and teachers have access to expectations and procedures.	● Develop, model, utilize, and review common language regarding affect regulation. ● Collaborate with the teacher and aide to determine individual student problem-solving strategies and reinforcement procedures. ● Follow through with the identified interventions while the teacher is leading instruction. ● Ensure caregivers are familiar with how staff will respond to student behavior.	behavior response sequences, problem-solving strategies and reinforcement procedures. ● Ensure that all staff are trained in de-escalation and crisis management strategies. ● Schedule regular coaching. ● Provide professional development in the area of behavior management for all staff.	response sequence. ● In collaboration with the classroom team, develop, model, utilize, and review common language regarding affect regulation. ● Collaborate with the teacher and support staff to determine individual student problem-solving strategies and reinforcement procedures.

2.2   Minimal social engagement occurs around unwanted behaviors.
Environmental examples:

- Staff should have procedural awareness of who should address student behaviors or emotional needs during class instruction. To maintain the flow of teacher-led instruction, paraeducators and clinicians should be the first line of support rather than the teacher.
- Staff should collaborate and role-play appropriate ways to respond to unwanted behaviors that minimize social engagement.
- Staff should learn to set effective limits with minimal engagement (resource 9).
- Model and role play strategies to provide an effective and un-energetic means to redirect unwanted behavior (e.g. Nurtured Heart Approach concept of "Reset" (resource 10).
- Staff should attempt to be attuned to their own emotional states and request to swap out with other staff if becoming too emotionally escalated by student behavior.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Lead team discussions about setting effective limits, introducing "Resets" or similar concepts, and team awareness of handling power struggles with students. - Develop procedures for requesting team support/duty swap. - Be aware of staff arousal signs and	- Collaborate with the team to identify "preferred staff" to address student behaviors during instructional time. - Reinforce procedures of requesting team support/duty swap. - Collaborate with the team regarding effectiveness of response to behaviors and adjustment as	- Collaborate with the team regarding effectiveness of response to behaviors and adjustment as needed. - Provide support and feedback to the team regarding use of support/duty swap procedures. - Make sure all staff are trained in the Nurtured Heart Approach (NHA) or another similar program.	- Respond to student behaviors as indicated by team collaboration. - Reinforce procedures by requesting team support/duty swap - Support during requested support/duty swap.

proactively support breaks for staff to minimize energy given to unwanted behaviors. ● Ensure site and district administration are familiar with responses. ● Ensure aides are familiar with response and that they follow through with response, problem-solving strategies, and reinforcement procedures.	needed. ● Provide support and feedback to the team regarding use of support/duty swap procedures.	● Observe in classrooms and collect data on NHA/similar program implementation. ● Schedule regular coaching meetings with staff to discuss/train on the NHA/similar program.	

2.3 Behavior Intervention Plans (BIP) or Direct Treatment Protocols (DTP) include prevention, teaching, reinforcement, responses to behavior, and communication provisions for students who require them.

Environmental examples:
● BIP/DTP summary sheets are available to general education teachers and paraprofessionals.
● Frequent opportunities exist for students to select reinforcers through use of a reinforcement inventory (resources 11,12).

- Data is collected regarding frequency of problem behaviors and replacement behaviors (resource 13).
- Classroom staff is aware of triggers, language for management of behavior, and stage of regulation for each student.
- Classroom staff know what to do if the challenging behavior happens again.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Collaborate with the clinician on BIPs and/or DTPs. - Create data sheets for data collection, as appropriate. - Follow through with BIP/DTP elements and data collection. - Support paraprofessionals in their follow through of BIP environmental factors and responses.	- Collaborative with the teacher on BIPs and/or DTPs. - Follow through with BIP/DTP elements and data collection. - Utilize individual, group and milieu for skill building contained in BIPs and DTPs.	- Provide feedback about data collection, Functionally Equivalent Replacement Behaviors (FERBs) and BIP goals. - Provide professional development for teachers and clinicians for data collection, tracking and BIP writing. - Help the teacher create a BIP summary sheet for substitutes and mainstream teachers. - Support paraprofessionals in their follow-through of BIPS/DTPs by providing feedback and support as needed.	- Provide information for BIP/DTP development. - Follow through with BIP/DTP elements and data collection. - Model implementation of strategies and plans within the general education settings. - Ensure substitute paraprofessionals have access to summary sheets to support consistency in the classroom.

		● Support general education teachers regarding follow through with BIPs/DTPs through frequent communication and by providing feedback and support as needed. ● Ensure substitute clinicians have access to summary sheets to support consistency in the classroom.	

2.4 Individual consequences for non-adherence to the rules and expectations are explicit, predetermined, consistently followed-through on, and logically tied to the problem behavior.

Environmental examples:
- Consequences and steps for following through are printed, posted, and/or placed in a binder.
- All staff are familiar with expected responses or a response array as consequences and follow through independently.
- Staff actively uses the plan to refer to before non-adherence to the rules occurs.
- A system exists, (e.g., collaborative meetings, data collection systems) to measure success of consequences and the need to continue, change or eliminate the individual plan.
- Staff is familiar with options for Restorative Practices.

Teacher role examples:	Clinician role examples:	School Psychologist role	Paraprofessional role

• Collaborate with the clinician and classroom staff to develop individual plans. • Allow and ensure that paraprofessionals are familiar with, and follow through with plans. • Ensure that caregivers and site administration are familiar with the plans. • Ask for, and provide feedback regarding on-going use and success/need to adjust plans as a team. • Ensure substitute paraprofessionals and clinicians have access to "cheat sheets" for each plan in order to support consistency in the classroom.	• Collaborate with the teacher to develop individual plans. • Allow, and ensure that all paraprofessionals are familiar, and consistently follow through with individual plans. • Ask for, and provide feedback regarding on-going use and success/need to adjust plans as a team. • Ensure substitute paraprofessionals and clinicians have access to each a "cheat sheet" for each plan in order to support consistency in the classroom.	**examples:** • Collaborate with the teacher on BIP development and implementation. • Provide feedback regarding on-going use and success, or need to adjust plans as a team. • Set-up IEPs, as needed.	**examples:** • Collaborative with the teacher and clinician to develop individualized plans. • Remain familiar with and follow through with individual plans. • Ask for, and provide feedback regarding on-going use and success/need to adjust plans as a team. • Ensure substitute paraprofessionals have access to "cheat sheets" for each plan, in order to support consistency in the classroom.

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Program Foundation 3: Instructional Practice

The foundation of instructional practice gives guidance to teachers and clinicians for making decisions about what they teach and how they increase the appropriate learning behaviors and academic achievement of their students.

Academic achievement is related to a student's ability to academically engage. Students with emotional and behavioral disabilities may have difficulty engaging due to their compromised ability to pay attention, concentrate, recall, and retain new information. Students with emotional and behavioral disabilities learn through the use of effective instructional practices. For learning to take place, students must be able to demonstrate appropriate behaviors such as attending to a teacher or a task, sustaining focus, working on assignments, and participating in independent and cooperative class activities (Landrum & Kauffman, 2003).

Many instructional practices that are effective for children with emotional and behavioral disabilities are not considered feasible nor likely to be implemented with fidelity due to negative perceptions of ease of implementation and effectiveness (Nieysn, 2009). Teachers may feel that some practices are too time-consuming, and/or that they lack the resources or capacity to implement certain practices. Therefore, a gap exists between evidence-based instructional practices and those practices that are used in the classroom (Kutash, Duchnowski, & Lynn, 2009).

A challenging yet important task for teachers and classroom staff is to plan for and provide explicit, direct instruction that is high-interest, appropriately matched to each student's ability level, and pays attention to structure, sequencing, and pacing (Landrum & Kauffman, 2003). On-going progress monitoring using curriculum-based measurements and brief standardized measures is an effective practice for planning instruction and controlling the difficulty of tasks for students (Landrum & Kauffman, 2003; Vaughn & Linan-Thompson, 2003). Students also benefit from opportunities for practicing newly acquired skills (Vaughn & Linan-Thompson, 2003).

Instructional practices also support social and emotional learning. For example, students who struggle with self-management can learn how to gain awareness of their own abilities by observing, evaluating, and recording their own behavior as a way to improve attention to task, or to successfully transition between activities (Landrum et al., 2003; Niesyn, 2009). Principles of direct instruction can be applied to teaching social skills when paired with planned, guided opportunities to practice skills with contingent feedback and positive reinforcement (Landrum & Kaufman, 2003).

To support Instructional Practice, there should be an intentional focus on professional development, including coaching and modeling, on the impact of trauma, traumatic stress on

learning, and co-regulation strategies; IEP expectations; accommodations and modifications; data collection and progress monitoring; goal writing; and summative and formative assessment. Additionally, to support inclusive practices, classroom staff must work collaboratively to provide proper support to other school staff in order for students to participate successfully within less restrictive environments, which includes regular communication on instructional goals. Regardless of the educational environment, school staff should be mindful of the balance between proportional increases in rigor and expectation and student self-perception and effort. Student IEP goals should focus on increasing proficiency toward grade level standard building tolerance and coping skills toward increasing student independence.

The following classroom elements and environmental examples outline a variety of practices taken from literature on teaching students with emotional, behavioral, and learning disabilities.

Classroom Elements

3.0 A variety of instructional structures are planned for and provided, including sedentary/active, independent/group, teacher directed and cooperative models.

Environmental examples:
- Learning objectives are clearly stated for each lesson.
- Effective curriculum and strategies are used.
- High-interest materials, including technology, are used to gain student attention.
- Large skills are sequenced into small parts that can be synthesized back together.
- Lesson plan format is used such as Madeline Hunter's; I do, we do, you do.
- Both direct instruction (resource 1) and strategy instruction are used.
- Lesson goals are aligned to the California State Standards.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Develop and maintain a daily schedule (see Foundation 1). - Develop short term and long term lesson plans (resource 2). - Focus on academic achievement. - Provide intentional, varied prompting (resource 3). - Provide descriptive feedback. - Provide continuous	- Maintain attunement and student response to environment and academic expectations. - Focus on appropriate learning behaviors. - Self-management, preventative, and reactive strategies are communicated to the classroom staff. - Provide encouragement and reinforcement.	- Collaborate with the teacher on BIP development and implementation. - Provide feedback regarding on-going use and success, or need to adjust plans as a team. - Set-up IEPs, as needed.	- Collaborative with the teacher and clinician to develop individualized plans. - Remain familiar with and follow through with individual plans. - Ask for, and provide feedback regarding on-going use and

monitoring of student achievement: CBMs, student portfolios (resource 4).			success/need to adjust plans as a team. ● Ensure substitute paraprofessionals have access to "cheat sheets" for each plan, in order to support consistency in the classroom.

3.1 Student progress is routinely monitored with informal and formal assessment and the data is used to inform instructional practice.

Environmental examples:
- IEP goals are known (IEP at a Glance), or can be located and referred to by all classroom staff.
- Curriculum-based measures and formative assessments are routinely used.
- Student binders or work sample portfolios are kept to demonstrate growth over time.
- Observational data is kept on priority goals.
- Summative and formal assessments are used.
- Data is kept in an organized format including academic, behavioral, and therapeutic learning targets.
- Assessment results are used to inform selection of instructional practice and the development of priority goals.
- The Teacher and clinician can discuss how assessment results include instructional decision making.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
● Communicate IEP	● Conduct, and support		

goals to classroom staff. ● Prepare and provide individualized observation and data collection. ● Maintain records in an organized fashion. ● Prepare and provide individualized observation and data collection systems. ● Compile data and report on assessment results. ● Use assessment results to inform instructional decision making.	classroom staff in conducting, non-judgemental observations. ● Provide feedback to classroom staff on correctness of data collection systems that support therapeutic goals.	● Help the teacher maintain IEP deadlines. ● Send out IEP assessment plans for triennial assessments. ● Help the teacher and clinician develop SMART IEP goals. ● Follow up with the teacher and clinician regarding progress reports.	● With the teacher and clinician, collect a variety of behavioral and academic data. ● Assist the teacher and clinician with maintaining proper data collection systems and apply their feedback to data practices. ● Assist the teacher with informal assessment and student self-monitoring of academic progress. ● Utilize technology to locate, track, and collect a variety of data on student progress under the supervision of the teacher.

3.2 The teacher or activity is prepared when the teacher reaches the destination.

Environmental examples:
- Lessons are planned ahead of time, a lesson planning format is used.
- Paraprofessionals have specific roles and know what to do .
- Lesson/activity starts on time.
- Lesson/activity matches ability level and modality strengths of student/s.
- Lesson/activity has a clear ending marked by a schedule, timer, or clear expectations/outcomes.
- Closure is provided, such as review and/or reinforcement.
- "Travel Box" is used when students need to evacuate the room.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Communicate paraprofessional roles. - Be familiar with scope and sequence of academic area/s - Use time in between lessons/period to prepare for the next. - Provide visual support/organizer of lesson.	- Support students getting into place. - Support the teacher to maintain the pacing of the lesson by handling distractions in the environment. - Support students in between lessons/periods so that the teacher can prepare for the next lesson/period.	- Ensure that the teacher has sufficient prep time. - Support the teacher in determining when/how to evacuate the room.	- Assist the teacher with lesson preparation by preparing necessary materials, supplies, or equipment. - Facilitate the transition of students from one activity to the next through active monitoring of the classroom. - Facilitate classroom

			engagement and troubleshoot student difficulties to keep the class on track so that the lesson may be completed within the allotted time.
			● Support the teacher to maintain pacing of the lesson by handling distractions in the classroom and/or students who leave the classroom.

3.3 Affective curriculum covers intra-personal, interpersonal, and life skills which are used regularly.

Environmental examples:
- Use of social-emotional learning curriculum.
- Use of social skills curriculum.
- Self-management taught with opportunities for guided practice.
- Cooperative games are used to gain attention or practice concepts/skills.
- Practice life skills such as classroom jobs, self-care (hygiene/health), independent living skills.
- Staff use co-regulation to assist students who are not yet developmentally ready to self-regulate.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Incorporate affective curriculum with academic curriculum. - Provide visual supports (schedules, checklists, routines) to encourage generalization of skills.	- Support use of visual aides (schedules, checklists, routines) to encourage generalization of skills. - Remain engaged with students during social skills lessons. - Support the use of affective skills in a variety of contexts. - Teach the adults working with students individualized social/emotional skills strategies.	- Assist with the selection of SEL curriculum. - Model SEL instruction, as needed.	- Take a genuine interest in the lives and stories of each student. - Be mindful of one's tone of voice in communications. - Always seek to provide instruction within teachable moments. - Under the supervision of the teacher, employ appropriate visual supports and accommodations. - Take note of student triggers or barriers to their learning and be proactive by communicating these appropriately to the teacher and clinician.

3.4 Independent seat work is limited to practice skill fluency and managed effectively when used.

Environmental examples:
- Practice of skills should be at or near students' independent level.
- Independent work may be organized by student, subject, and/or color coded to increase the independent nature of the activity.
- Independent materials are consistently prepared and available.
- Use of a computer or other assistance technology.
- Independent seat work may be used as a student choice, to appropriately escape another task.
- "Independent" work may be facilitated by a peer tutor..

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Sequence the skills to be practiced (resource 6). - Collect data and work samples. - Provide daily feedback - Update and prepare materials.	- Teach self-management skills. - Support the students in re-joining the group.	- Support the teachers with structure of the day and use of independent seat work and direct instruction. - Respond to support class, as needed, to help students rejoin the group.	- Support the teacher by preparing and monitoring independent student work. - Successfully implement student behavior plans by offering student choice as needed to maintain motivation and engagement.

			- Actively monitor student work completion and pull students aside for additional remediation, as necessary. - Learn all relevant technology used by students in the classroom in order to be of greatest assistance to the teacher and students.

3.5 Students are taught and encouraged to use self-monitoring and problem-solving strategies to sustain focus and participation.

Environmental examples:
- Strategies support students building resiliency and abilities to manage instructional expectations, such as using a timer to track on task/off task behavior, graphing task completion, and comparing data from separate days to track growth.
- Protocols are used, visual supports/mnemonics are left in place for generalization.
- Explicit modeling and rehearsal of problem-solving strategies (resource 7).
- Student questions are encouraged and answered respectfully.
- Strategies are supported in a variety of settings.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Student questions are answered. - Active listening/ non-judgemental approach is used with students. - Redirect students to use practiced strategies when students are stuck.	- Use and train others on a collaborative problem-solving model (resource 8 & 9). - Dialectic questioning/ searching nature of the problem. - Support students when communicating their ideas to other adults.	Collaborate with the teacher and clinician to incorporate self-monitoring and other data sheets or visual supports.	- Model patience, persistence, and a growth mindset for students. - Build independence in students through coaching and modeling in a variety of situations. - Support the teacher in redirecting students to their daily and weekly goals for academics and behavior.

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Relatedness refers to the quality of relationships between students and adult care providers. One of the greatest predictive factors of success for high risk children is having a safe and nurturing bond with a single person (Blaustein & Kinniburgh, 2010). A critical factor in creating quality child/caregiver relationships is attunement. Attunement refers to "the capacity to accurately read the cues of others and respond appropriately" (*The Heart of Teaching and Learning,* 2009). Children who have positive, safe, and nurturing early experiences develop a broader capacity for engaging in interactions and respond accordingly (Ayala & Grove 2015). Respectful, attentive, and attuned caregiving calms the stress response system and provides emotional regulation (University of Notre Dame Shaw Center for Children & Families, 2014).

Unfortunately, many traumatized children or those with emotional/behavioral regulation difficulties become distrustful of adults or feel unsure of their safety in the school setting. In order to feel more in control they may challenge school authority or overreact to novel classroom interactions (Massachusetts Advocates for Children, 2005). Further, traumatized or emotionally disturbed children often experience delays in age-appropriate social skills. They may not know how to initiate or maintain healthy relationships with peers or adults (Massachusetts Advocates for Children, 2005). According to Van der kolk (as cited in Massachusetts Advocates for Children, 2005), children with emotional/behavioral disorders, "have problems enlisting other people as allies on their behalf. Other people are sources of terror or pleasure, but are rarely fellow human beings with their own sets of needs and desires."

If adults focus on compliance and consequences without rapport and relationships the child will not view them as a safe adult, and more power struggles are likely to ensue. There is a constant balance needed in order to, "prevent the corrections adults use from sabotaging connections they need" (Bath, 2008). When adults are mindful of this, children learn healthy boundaries and positive ways to forge relationships with others. Consequently, educational settings that do not view the child through the lens of their experience and/or trauma can unintentionally cause additional trauma when overly punitive.

It is critical for adults working with students who are trauma-exposed and/or students with social emotional challenges to focus on building authentic and compassionate peer and adult relationships when they are emotionally regulated and things are going well. This can be done by greeting students when they come to class and taking time each day to talk to students about their interests. Doing something of high interest (Resource 3) with them also helps them build relationships and stay emotionally regulated. By being mindful of the child's background and typical/atypical behavior, adults can be more supportive and responsive to them. This can be done by becoming aware of the child's nonverbal cues of potential dysregulation and intervening with supportive options (Resource 1). When children are provided choices during their day and opportunity to communicate their needs it enhances their feelings of safety and opens up additional positive relational interactions.

To support Emotional Relatedness, there should be an intentional focus on professional development including coaching and modeling in the areas of motivational interviewing, active and empathetic listening, Socratic questioning, Antecedent-Based Interventions, non-contingent reinforcement, asking open-ended questions, finding common ground, mindfulness, grounding techniques, and check-in/check-out systems. To facilitate successful inclusion within the general education program or other less restrictive settings, this is perhaps one of the most important training pieces for all school staff while also being one of the greatest areas of focus for therapeutic classroom staff to provide outward communication in support of inclusion efforts. Breaking down barriers and biases about student ability can only happen when staff learn how to interact in a thoughtful, attentive, and genuine manner.

The following classroom elements and environmental examples outline practices to help develop emotional relatedness in a classroom.

Classroom Elements

| 4.0 Staff are planned, proactive strategies to establish and maintain positive relationships with all students, including at arrival and departure. |

Environmental examples:
- All staff (teacher, aides, clinician) should have at least one positive relational interaction with each student per day. Examples include preventative emotional "check-ins," inquiry about the child as a person (i.e. his or her life and interests), and dyadic (two-way) playful interaction such as games.
- Staff greet students individually with verbal or nonverbal interactions (e.g., "Welcome back, how was recess?" with fist bumps, high fives, etc.) both at arrival, departure, and upon returning from activities outside of the class within the day (recess, lunch, mainstream).
- Staff will strive to balance positive to corrective feedback at a 5:1 ratio. Positive feedback could include verbal praise, classroom currency, or dojo points.
- Staff will engage in empathetic listening to truly understand and connect with student concerns (Resource 2).

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Focus on having positive relational interactions with each student daily. - Ensure support staff are maintaining 5:1, positive-corrective feedback ratio. - Create structured opportunities for students to give each	- In the counseling setting, take time to develop therapeutic rapport with children before addressing counseling goals. - Provide 5:1, positive-corrective feedback ratio both in the classroom and counseling setting. - In the counseling setting and	.	- Provide 5:1, positive-corrective feedback ratio both in the classroom and counseling setting. - Model giving each other and oneself positive affirmations.

other positive affirmations during the day and practice of social skills. ● Lead staff in collecting reinforcement inventories and studen interest surveys to aid in relationship development (Resource 3).	classroom create opportunities for students to give each other and themselves positive affirmations.		

4.1 Classroom staff will demonstrate attunement with students by becoming aware of their early signs of escalation and provide/adjust individualized support strategies.

Environmental examples:
- Through daily positive interactions, staff become aware of when students are in optimal arousal states for learning.
- Staff become aware of what support strategies benefit each individual student. This can be done through observation, collaboration, student/caregiver interviews.
- Regulation strategies are modeled, role played, and practiced regularly when students are not escalated before students are expected to engage independently.
- Staff may need to co-regulate (engage in the self-regulation strategy with the student) until independent self-regulation can be accomplished.
- When students show early signs of escalation (pactic, fidgeting, irritability, etc). Staff supportively help students become aware of these symptoms and prompt them to select/use a predetermined self-regulation

strategy (Resource 1).
- When students are engaging in behaviors identified in BIP/DTP documents, staff will respond as detailed in these individual student plans, and will act to specifically avoid unintentionally causing additional trauma by being overly punitive.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Become familiar with the nonverbal signs of students' various emotional states (optimal arousal, hyperarousal, hypoarousal). - The teacher and other staff collaborate so that everyone is aware of early signs of emotional dysregulation. - Through collaboration with students, the clinician ,and other staff, develop self-care plans for students so they have familiar self-regulatory strategies to engage in when needed.	- Become familiar with the nonerbal signs of students' various emotional states (optimal arousal, hypoarousal, hyperarousal). - Through group processing and individual counseling, help students become aware of their own pre-escalation symptoms. - Through group processing and individual counseling, help students expand their familiarity with various self-regulation strategies. - Model for other staff how to assist students who are		- Become familiar with the nonverbal signs of students' various emotional states (optimal arousal, hyperarousal, hypoarousal). - Participate in staff development to learn strategies for emotional regulation, helping students to expand their own familiarity with various self-regulation strategies. - Model self-regulation strategies while in the classroom and

● Model supportive intervention strategies or cue staff to intervene during instructional time.	showing signs of hyper/hypoarousal.		on campus.

4.2 Students are allowed and encouraged to communicate needs, protest, when appropriate and make choices.

Environmental examples:
- If students ask questions that seem challenging, answer the question and/or ignore the challenge, no the student.
- Staff to encourage students to communicate their needs. If students struggle with doing so in an appropriate manner, staff should prompt the student to use replacement language. If a student does not have the replacement language, it should be modeled for the student.
- Opportunities for choice are embedded throughout the day. For example, provide flexibility in a work setting within the class, choices for alternative assignments when students protest, and/or alternatives for work materials (pen, pencil, keyboard).
- Example: "Johnny, it seems like you are frustrated with your work right now. How do we request a different choice?"
- Example: "Olivia, you seem to be struggling to play tetherball with Joe without getting angry. What is another activity you could choose?"

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
● Acknowledge student	● Model active/empathetic	●	● Provide supportive

attempts to communicate their needs, even if not socially appropriate. ● Provide supportive corrective feedback when students protest or communicate inappropriately.	listening in the classroom/clinical setting when students communicate their needs. ● Provide supportive corrective feedback when students protest or communicate inappropriately. ● Model appropriate ways to communicate needs. ● When appropriate, if students do not wish to engage in a classroom task, provide choices of alternative assignments. ● Acknowledge and praise when students appropriately protest or request a choice.		corrective feedback when students protest or communicate inappropriately. ● Model active/empathetic listening in the classroom/clinical setting when students communicate their needs. ● Model appropriate ways to communicate needs. ● When appropriate, if students do not wish to engage in classroom tasks, provide a choice of alternative assignments. ● Acknowledge and praise when students appropriately protest or request a choice.

4.3 Opportunities to build positive rapport and relationships betweens students is built into the daily

schedule.

Environmental examples:
- Provide opportunities for collaborative learning and lay for students to allow practice of prosocial behaviors and fostering of positive relationships (Resources 4, 5, 6).
- Within the day, provide opportunities for students to provide positive affirmations to each other. This can be done through group counseling, classroom meetings, or prompted between students.
- During unstructured times such as lunch and recess, model and support initiation of prosocial peer interactions with classmates as well as general education peers.
- When students mainstream into the general education setting, model and support initiation of prosocial classroom interactions with general education staff and peers.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Facilitate student collaboration and cooperative engagement. Create opportunities for this instruction. - Engage students in conversation about their personal interests. - When appropriate, weave student interests into academic instruction so they are engaged and can see	- Facilitate activities in the clinical setting that promote relationships between students including practice giving each other positive recognition. - Provide opportunities for structured collaboration opportunities between students. - Without disclosing confidential information, provide staff feedback on student interests and strategies for		- Engage students in conversation about their personal interests. - Practice giving each other (staff) and students positive recognition. - Support opportunities for structured collaboration opportunities between students.

commonality with their peers.	relationship building with students.		● Provide information and feedback to all staff about student interests and strategies for relationships building.

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Transdisciplinary collaboration can be defined as "a team approach to problem solving, crisis intervention, and resource development" (Villareal & McGrath, 2013). Collaboration is a change-oriented process and therefore benefits from a cohesive team capable of consistently evaluating their ability to work together and to use feedback to strengthen the team. Goals of a collaborative, educational team include reducing systemic barriers, decreasing isolation of team members, and increasing positive student outcomes.

Members of trans-disciplinary teams often bring differences in training, responsibilities, philosophies, and professional language (Weist, et al., 2012). On-going peer and upper-level support is needed for team members to develop a shared agenda where individual skills are optimally used and/or roles reevaluated to provide both clarity and areas for shared responsibility. Collaborative team members are open to change and consider themselves both the expert and a co-learner.

Challenges to collaboration may be interpersonal or structural. Team members may have differing goals, feel territorial or competitive, or have differences in experience and philosophy (Villareal & McGrath, 2013). Staffing patterns may create inconsistencies, and teams may be allowed inadequate time to meet regularly. Cooperative or congenial relationships are characterized by team members who maintain their own territories or who engage in positive social interactions. Adversarial relationships are characterized by competition and a lack of sharing ideas. A distinction is made between these types of teams and one that is collaborative (Drago-Severson, 2009). Collaborative teams engage in respectful and courageous dialogue as a way to improve individual and group practice.

Regular meetings are needed to develop a collaborative team. Aspects of successful meetings include focused goals and procedures with support from protocols if necessary, active listening, and opportunities for members to have equitable voices. Meetings should be brief with notes kept for accountability and to demonstrate outcome. Meetings can focus on a variety of purposes such as identifying strengths, challenges, and solutions; developing peer support/relationships; safeguarding against burnout/isolation; and developing services and recommending changes. All these purposes support overall program improvement and have the potential to increase positive student outcomes.

On-going evaluation of program effectiveness and the development of evidence-based practices by collaborative teams has the potential to generalize what is learned to a larger population of students, families, and perhaps whole schools. Schools may be the only means of accessing mental health services for some students, and teams with cohesion and flexible, yet capable team members can impact the larger school community by influencing greater system change.

To support Collaboration and Cohesion, there should be an intentional focus on professional development, including coaching and modeling, in the areas of Nurtured Heart Approach, trauma-informed practices, and applied behavior analysis. Additionally, collaboration and cohesion can only happen when teams are performing at optimal levels, and therefore therapeutic classroom staff must routinely promote their own self-care in support of individual and team dynamics, as they explicitly teach students to self-regulate and attend to their own self-care. Where possible, therapeutic classroom staff must adopt a team approach to their work, each considering themselves a coach to their students, and each working to reinforce, support, and celebrate team successes within the therapeutic classroom and other educational settings.

The following classroom elements and environmental examples outline practices of a collaborative team based on planning, monitoring, reflecting, and refining practices and processes.

Classroom Elements

5.0 Integrated teaming and collaboration between teacher, clinician, school psychologist, and paraprofessionals are used to *plan* for whole-class and individual education programs.			

Environmental examples:
- The team has a mission, and/or clearly identified purpose/s that they are able to share with others.
- Success for each student is defined and easily communicated to staff and parents.
- Group norms are developed for and reviewed at meetings (Resource 1).
- Team members learn from each other through planned formal and informal staff development.
- Team members have opportunities to socialize and develop relationships.
- The team agrees on common language and approaches to use with individual students.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Communicates classroom mission/purpose to school and parent community. - IEP goals are shared with classroom and relevant school staff. - Teacher works in collaboration with the clinician, psychologist and coordinator to plan and lead staff development with paraprofessionals.	- Support teacher in communicating mission/purpose to school and parent community. - Share social/emotional objectives with classroom, administration, and relevant school staff. - Collaborate with the teacher, school-psychologist and coordinator to plan and lead staff development with	- Communicate classroom mission/purpose to school and parent community. - Social/emotional objectives are shared with the classroom and other relevant school staff. - Works collaboratively with the teacher, clinician and coordinator to plan and lead staff development for	- Attends scheduled training and incorporates learned concepts into daily practice. - Communicates classroom mission/purpose to substitute staff. - Use common language and approaches in the milieu.

	paraprofessionals. ● Model and reinforce use of common language and approaches, "in the milieu."	paraprofessionals. ● Models and reinforces use of common language and approaches in the milieu.	

5.1 A variety of observational and data collection systems are used to *monitor* staff fidelity to shared approach and student response to intervention. .

Environmental examples:
- There is routine data collection for IEP (BIP, DTP) and treatment plan goals.
- Student binders or portfolios exist for all staff to participate collecting student work samples, and collecting observational and performance data.
- Individual and group data is collected on effectiveness of intervention strategies.
- Team members provide feedback on each other about performance and effectiveness (Resource 2).

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
● Prepare and organize data collection systems such as clipboards and/or binders. ● Regularly update data collection systems, delegate responsibilities to classroom staff, and keep IEP benchmark	● Work with teacher to measure social/emotional growth through data collection. ● Model appropriate data collection such as making non-judgmental observation (Resource 3). ● Support classroom	● Work with the teacher to measure social/emotional growth through data collection. ● Model appropriate data collection methods for classroom staff, such as making non-judgemental	● Work with the teacher and clinician to measure growth through data collection. ● Model appropriate data collection methods for

progress up to date.	teacher in facilitating team meetings where staff share concerns, listen to each other, and give feedback in a sace, non-judgmental manner.	observations (Resource 3). ● Facilitate team meetings where staff share concerns, listen to each other, and give feedback in a safe, non-judgemental manner.	students and substitutes such as making non-judgemental observations.

5.2 Members of the integrated team routinely review varied data and anecdotal observations as a way to *reflect* on program effectiveness and student outcomes.
Environmental examples: ● Team members know student goals and can compare present levels of desired outcomes. ● Questioning/inquiry and dialogue are strategies used by the team to solve problems (Resource 4). ● Program strengths and challenges are regularly discussed as a way to improve practice. ● Team discusses the least restrictive environment for each student. ● Team meets regularly to seek and give support to each other/provide self-care.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
● Open-ended questioning is modeled for staff, such as: "How can we provide appropriate choice during	● Dialogue is modeled for staff as a way to think and look at issues together (Resource 5). ● Reflective practice is modeled through examining one's	●	● Regularly review student goals and provide feedback to the teacher and clinicians regarding progress using

academic instructions?" as a way to think about program effectiveness. ● Meeting agendas include opportunities for the team to review events and consider alternatives, such as providing training on behavior reports and using them as a reflective tool.	assumptions, beliefs, and values and how those inform thinking and acting (Resources 6, 7). ● Weekly check-in with classroom staff during collaboration to provide teaching of self-regulation/self-care techniques.		formal data collection systems and anecdotal notes. ● Provide regular feedback on program effectiveness and academic instruction. ● Regularly attend staff meetings and engage in transparent collaboration. ● Engage in reflective practice by examining one's assumptions, beliefs, and values and how those inform thinking and acting.

5.3 As classroom leaders, the teacher, clinician and psychologist routinely share decision making to *refine* individual and classroom practices.

Environmental examples:
- Team members share ideas with each other and make suggestions.
- Team members encourage each other and support innovation.
- Feedback is considered when developing changes to individual and classroom practices.
- The team identifies needs and requests specific support from school administration.
- Team members take opportunities to build their own capacity through professional development and taking on reasonable challenges/new roles. .

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
● Provide a way for classroom staff to share ideas and make suggestions.	● Group norms are regularly reviewed to assure team members have a shared understanding of their "team-ness" and how to have input.	● Professional development opportunities are shared with paraprofessional staff to build their understanding of the "team-ness" and how to have input. ● Provide a way for classroom staff to positively acknowledge each other's ideas and actions.	●

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Program Foundation 6
Emotional Regulation

Emotional regulation refers to "the capacity to tolerate the sensations of distress that accompany an unmet need" (Perry, n.d.). This ability touches all areas of a child's life and has a major influence on his or her academic and social success. According to Alvord & Grados (2005) (cited in Bath, 2008), "the ability to manage emotions adaptively or to self-regulate is one of the most fundamental protective factors for healthy development." This ability allows a child to maintain their composure in the face of emotional discomfort and respond appropriately when the inevitable emotional challenges of life surface.

Children are not born with an innate ability to regulate their emotions. Rather, the process begins with external regulation from an attuned caregiver. When a baby's cries are soothed by an attuned adult, the process of emotional regulation development begins. As this process repeats over the course of development, the child becomes better able to tolerate distressing situations. This process also creates a positive attachment with the caregiver which becomes critical for the child's future social and relational success.

However, many factors such as "genetic predisposition, developmental insults (such as lack of oxygen in utero), or exposure to chaos, threats, and violence" (Perry, n.d.) cause major disruptions to a child's capacity to self-regulate and therefore build meaningful attachments with others. According to Perry (2002), "Children who struggle with self-regulation are more reactive, immature, impressionable, and more easily overwhelmed by threats and violence." Because repeated exposure to traumatic stress during critical developmental periods causes a highly sensitive threat response system, even the most novel interactions can cause a child to lose control of their emotional composure. A child may seem perfectly fine prior to a behavioral incident, but in reality he or she is operating on the edge of their regulation capacity (resource 7).

Therefore, it is critical that a primary focus of support for children with emotional or behavioral support needs to be on teaching and supporting them to learn new ways of effectively managing their emotions and impulses (Bath, 2008). As a result of their traumatic experiences, children often struggle with emotional identification in themselves as well as others. This may present as being overly/insufficiently attuned to emotional cues, or inaccuracy reading the emotional cues of others with "overperception of negative affect" (Blaustein, M. & Kinniburgh, K., 2010).

Children must be taught how to identify the bodily and sensory experiences attached to emotions in themselves as well as others (resources 1-3). Along with this awareness, children must be explicitly taught strategies to soothe themselves when feeling distressed. These

skills cannot be taught in the midst of an emotional incident, but instead must be introduced, modeled, and practiced so that the skill is familiar to the child in critical times of need. Teaching emotional regulation involves teaching students to listen to their bodies' signals, building an emotional vocabulary, making connections between emotions and behaviors, learning strategies to manage emotions, and practicing a variety of strategies and mindfulness techniques to help regulate emotions, increase self-esteem, and develop coping mechanisms that will help students gain control of their emotions.

To support Emotional Regulation, there should be an intentional focus on professional development, including coaching and modeling, in the areas of techniques to support emotional regulation, principles of de-escalation, and restorative practices. Program training examples could be, but are not limited to, the following: Nurtured Heart Approach, Zones of Regulation, 5-point Scale. In furtherance of inclusive practices and to ensure students will be successful in educational settings beyond the therapeutic environment, all staff must understand that children are required to come to school, that it is one of their first experiences with government, with strangers in close proximity, and with authority outside the classroom. While school should be a place of challenge, it must also be a place where students are supported to try, and try again, especially after moments of setback or dysregulation.

The following classroom elements are intended to provide a framework to help support children learn to regulate and navigate their emotional world with greater success.

Classroom Elements

6.0 Staff actively support students in emotion identification (resources 4 & 5).

Environmental examples:
- Staff models affect awareness/physiological connections with students: "I'm feeling sad today. I can tell because I don't have energy. My face is scrunched and sad thoughts keep going through my head."
- Staff infer student emotions through observation and engage in dialogue about the emotion. "Kevin, you are pacing the classroom and breaking pencils. Your fists are clenched and your face is tight. It seems like you are really angry right now."
- Staff engage students in practice identifying emotions in others. "Your friend Sam is by himself on the bench looking down and frowning. How do you think he is feeling?"
- Emotion words/pictures are posted in the classroom.
- The Social-Emotional Learning curriculum is used regularly to reinforce emotional awareness.

Teacher role examples:	**Clinician role examples:**	**School Psychologist role examples:**	**Paraprofessional role examples:**
- Generalization of emotion awareness in instruction. For example, in language arts, ask students to reflect on how a certain character may feel and why this may be the case. - Model identifying your own feelings to the class throughout the school day utilizing common classroom	- Explicitly teach students emotion identification in themselves and how to read it in other people. - Teach/model emotional awareness strategies for classroom staff so a common language is used with students.	Model identifying your own feelings to the class throughout the school day utilizing common classroom language.	- Follow the teacher's model for generalization of emotion awareness during 1:1 academic support or small group instruction (when applicable). - Model identifying your own emotions to the class throughout the

			school day utilizing common classroom language.
language.			

6.1 Staff help develop students' ability to self-regulate emotional experience through building awareness of physiological symptoms (external and internal body cues) and practicing regulation strategies (resources 1-3).

Environmental examples:
- Staff support students in self-identification of emotional state based on physiological cues (heart rate, internal body awareness). "Jack, check in with your body. How are you feeling right now?" "Sam, how's your engine running right now?"
- Staff support students in identifying subtle changes in physiological and emotional states.
- Staff take time to explore and practice self-regulation strategies with students when students are not dysregulated so that effective strategies are available and familiar when students need to use them.
- Examples of self-regulation strategies are posted in multiple places in the classroom and practiced routinely.
- Staff models appropriate self-regulation and use of strategies in response to their own emotional states. This includes utilizing "tag in" strategies to encourage teamwork and support opportunities for staff to "reset" and take breaks when needed.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Model own arousal level reflection for the students as well as appropriate regulation strategies (taking deep breaths, body	- Develop and practice SEL materials and students to help them identify their arousal signs and appropriate responses. - Share developed	- Model own arousal level reflection for the students as well as appropriate regulation strategies (taking	- Model own arousal level reflection for the student as well as appropriate regulation

movement, positive visualization, etc.) ● Teacher collaborates in developing and supporting staff in utilizing "tag in" strategies to prevent staff burnout and provide an opportunity for staff to "reset" or take a break when needed. ● Teacher and support staff will have SEL materials such as 5-point scale lanyards, have 5-point scale available in multiple environments, or use Zones of Regulation on the walls so that students have ample opportunity to communicate their arousal levels. ● Prompt students to use emotional regulation strategies	strategies with the teacher and other classroom staff so specific verbiage and regulation strategies are used with each student. ● Model own arousal level reflection for the students as well as appropriate regulations strategies (taking deep breaths, body movement, positive visualization, etc).	deep breaths, body movement, positive visualization, etc.) ● Support teacher in identifying and incorporating SEL curriculum. ● Support teacher in identifying and developing SEL materials (lanyards, 5-point scale, Zones of Regulation, etc.) to utilize. Ensure that materials are distributed to support staff.	strategies (taking deep breaths, body movement, positive visualizations, etc.). ● Review and utilize staff "tag in" strategies to help recognize and support staff "resetting" and break needs. ● Have SEL materials available in multiple environments so that students have ample opportunity to communicate their arousal levels.

when they appear to be struggling.			

6.2 Build students' ability to effectively communicate and express emotional experience.			
Environmental examples: ● Staff support students in appropriate emotion expression through prompting, redirection, and modeling. "Leyna, instead of saying go the F#%& AWAY to Frank you could tell him to give you space." "James, can you restate that using an "I" message?" ● Help students understand why communicating emotions is important. For example, being able to identify emotions and appropriately communicate them allows the student to access support and maintain relationships. ● Through attunement and rapport building, support students in identifying a safe staff person they feel comfortable expressing their feelings. ● Teach students nonverbal as well as verbal ways to communicate their emotional needs. Nonverbal communication tools could include hand gestures, eye contact, and/or 5-point scales that children can point to.			
Teacher role examples: ● Collaborate with the clinician on replacement language and phrases students are learning so	**Clinician role examples:** ● Through group and individual counseling, help students explore and rehearse replacement language and	**School Psychologist role examples:** ● Reinforce students with specific praise when they use replacement language	**Paraprofessional role examples:** ● Regularly review replacement language and phrases with the

prompting and generalization can occur outside of the clinical setting. ● Reinforce students with specific praise when they use replacement language and express feelings appropriately. ● Support classroom staff in using agreed upon redirection to replacement word strategies.	phrases to more effectively communicate their feelings. ● Through group and individual counseling, help students understand why these skills are important (e.g., to maintain relationships, to be able to get help without disrupting the classroom). ● Consult regularly with teacher and classroom staff to communicate strategies learned in counseling so that all team members can support prompting and generalization of replacement language and phrases.	and express feelings appropriately. ● Monitor and support classroom staff in using agreed upon redirection to replacement word strategies.	teacher so that student prompting is current and consistent. ● Reinforce children with specific praise when they use replacement language and express feelings appropriately.

6.3 There is a designated area or areas for students to go to when they are struggling with self- regulation. These areas are equipped with self-calming strategies that the students have been taught how to use and have practiced

Environmental examples:
- Common language for self-management is infused into classroom procedures, e.g. "reset."
- Student self-rating scales are utilized consistently.
- Regrouping procedures are explicitly taught to students, modeled, and practiced, e.g., students can reset at a desk, at the door, outside, or in a designated place in the classroom.
- Staff and students are taught how to access and support resets outside of the classroom environment (recess, cafeteria, mainstream classes, etc.)
- Regrouping areas are clearly identified, with explicit procedures/directions either posted or otherwise easily accessible.
- All staff are familiar with steps for regrouping.
- Staff redirect to regrouping procedures as warranted.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Teach and review procedures for self-management and utilizing regrouping to staff and students including how to access/utilize strategies across school environments. - Provide opportunities to debrief instances of regrouping with staff. - Ensure staff, administration,	- Teach and review procedures for utilizing regrouping during individual and group, as appropriate. - Support the teacher and paraprofessionals in developing safe reset spaces and protocols for students to reset across campus environments (mainstream classes, cafeteria, recess,	- Collaborate with the classroom teacher in the development and review of procedures for self-management and regrouping across school environments. - Collaborate with the classroom teacher in developing and reviewing procedures for school staff to debrief instances of regrouping.	- Review procedures for self-management and regrouping with the teacher. - Participate in staff debriefs to provide feedback and collaboration. - Provide opportunities for students to practice regulation

campus supervisors, and caregivers are aware of procedures. ● Collaborate with receiving mainstream teachers to support student use of resets and safe reset spaces within the general education environment. ● Encourage and positively reinforce use of appropriate self-management and regrouping (no consequences for use of skill). ● Provide opportunities for students to practice regulation strategies when they are not dysregulated.	etc.) ● Ensure staff, administration, campus supervisors, and caregivers are aware of procedures. This may include mainstream teachers when necessary. ● Encourage and positively reinforce use of appropriate regrouping. ● Provide opportunities for students to practice regulation strategies when they are not dysregulated.	● Support teacher in distributing information regarding regrouping procedures to caregivers and necessary administration and staff across campus. ● Support and monitor the classroom teacher in their collaboration with receiving mainstream teachers to support student use of resets and safe reset spaces within the general education environment. ● Encourage and positively reinforce use of appropriate self-management and regrouping (no consequences for use of skill) when in the classroom space.	strategies when they are not dysregulated. ● Prompt and support appropriate use of student resets across all school environments including mainstream classes, recess, cafeteria, etc. ● Encourage and positively reinforce the use of appropriate self-management and regrouping (no consequences for use of the skill).

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Program Foundation 7
Structure and Routine

Structure and routine are an integral part of how an effective classroom functions. The structure of a classroom is composed of the physical setting within the classroom and the procedures and routines that create effective use of the environment. Students with emotional regulation deficits and behavioral difficulties require external organization and structure within the learning environment to support their ability to feel safe and be present and calm. Classroom procedures and routines that are explicitly, clearly, consistently, and succinctly implemented across the educational day will decrease student anxiety and wasted instructional time, and increase the ability to concentrate.

The ultimate goal is that the classroom environment does not contribute to problem behaviors. There may be environmental triggers that create, impact, and add to unwanted student behavior. Therefore, structure and routine help to decrease negative behavior. Designing an effective classroom environment, including the structural components, should strive to decrease or remove as many environmental triggers of difficult behavior as possible (Epstein, Cullinan, & Weaver, 2008).

A mistake that is commonly made is believing that students need to learn to function within the environment that teachers design. However, the structure of a classroom should be developed to meet all students' individual needs. Teaching requires that the classroom environment be flexible enough to support individual students, but provides a structured and predictable framework within which learning occurs.

In addition to supporting the ability to teach academic content, implementation of strategies that create a predictable classroom will decrease unwanted student behavior and can create educational momentum that functions to teach students appropriate behaviors. This preventative approach to behavior and classroom management decreases the need for punitive reactions to behaviors because the design of the physical and environmental classroom proactively shows students what is expected.

In order for classroom structures to be highly effective they must be an ever-present part of the moment-to-moment workings of the environment. A posted classroom schedule, effective staff scheduling, the use of cueing systems, a functional classroom set-up, and the implementation of individual schedules when needed are the components to an effectively-structured classroom.

To support Structure and Routine, there should be an intentional focus on professional development, including coaching and modeling for the teacher in designing, implementing, and modifying a classroom "master" weekly schedule that details where all staff and students will be at all times throughout the week and pairs students with appropriate staff support for mainstream opportunities and other services. Staff should also be encouraged to attend additional training on effective lesson planning, understanding learning disabilities, attentional difficulties, and executive function. They should also be allowed opportunities to observe other model therapeutic classrooms to get ideas to enhance structure and routine within their classroom environment. Training on the impact of structure and routine to mitigate trauma is also suggested.

The following classroom elements and environmental examples outline practices of structure and routine in a classroom.

Classroom Elements

7.0 There is a consistent, predictable classroom schedule posted in a visible area that organizes the day in the most productive way possible.

Environmental examples:
- The classroom schedule (resource 1) should attend to the therapeutic needs of the students.
- The classroom schedule includes daily opportunities for students to receive direct instruction in standards-based academic content areas, IEP goal specific instruction, group and independent academic activities, social/emotional instruction, and opportunity to earn reinforcement for appropriate behavior.
- A daily schedule is posted in an area of the classroom that all can clearly see.
- The classroom schedule includes the activity or subject and the time that each activity or class will occur.
- As needed, there are agendas posted within subject topics or classes to provide specificity of what will occur during the time period (i.e., what happens during "2nd period math").
- All parts of the day are scheduled including recesses/lunches, choice/free time, and transition times.
- The schedule is reviewed with students *at least* at the beginning of the day.
- The schedule is followed by classroom staff.
- When there are changes to any part of the schedule, it is discussed with the class, as soon as possible, and is noted on the posted schedule.
- Both visual and auditory timers are used to signal the start and end of each activity on the daily schedule.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
- Determine the most appropriate organization for the educational day to determine the daily schedule. - Consider student	- Consult with the teacher in discussing the organization of the classroom schedule as it relates to student therapeutic needs. - Review the schedule with students, as		- Review the schedule with students, as needed. - Support classroom students and staff

mainstream opportunities and coordinate staff to provide appropriate supports for students across school environments. ● Create, or assign the creation of, the visual schedule. ● Review the classroom schedule and any changes with staff each day. ● Maintain the consistent implementation of a predictable schedule. ● Review the classroom schedule, and any changes, with the students each morning. ● Keep track of the time and pace activities to remain on-schedule. ● Make adjustments to the schedule as	needed, especially to support emotional regulation. ● Support classroom staff in following the schedule.		in following the schedule. ● Utilize the classroom schedule to prompt students for transitions or refer to changes. ● Consult with the teacher in discussing the organization of the classroom schedule as it relates to student needs and greater campus coordination (e.g., mainstreaming schedules). ● Review the schedule with students, as needed, especially to support emotional regulation.

appropriately determined by data-based collaborative decision making.			

7.1 There is a staff schedule (resource 2) posted outlining staff duties

Environmental examples:
- Each staff member's lunch and breaks
- Each staff member's arrival and finish time
- Staff assignments (resource 2) – by location and/or by student(s) needing support – for each part of the day are included.
- Classroom procedural and organizational duties are determined and posted, in staff- only location (i.e., work preparation, data collection, cleaning/organizing).
- Schedule includes opportunities for students to access individual and group counseling sessions.
- Schedule includes what is being taught, and by whom, for all small group lessons and/or work sessions

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Create and design staff schedules that adhere to contract hours and meet student needs.	• Be aware of all staff assignments and support the teacher in all staff members being in assigned/designated	• Collaborate with the classroom teacher regarding pairing of students and paraprofessional	• Address concerns or questions with the teacher about assignments or

● Post schedule. ● Address concerns with staff about assignments. ● Change and adapt the schedule as necessary. ● Design curriculum and determine who will teach/supervise students. ● Provide the class schedule to general education teachers and administrators as needed. ● Consider staff and student pairing and make adjustments as needed to support student success and classroom cohesion.	locations. ● Run group at determined times ● Post scheduled individual session times for each student to access counseling. ● Assist with addressing staff and student concerns about assignments.	support. ● Support teacher in evaluating pairing and adjusting as needed.	schedule. ● Adhere to the set schedule (i.e., take and return from breaks at scheduled times). ● Be aware of the classroom procedural and organizational duties. ● Be aware of all staff assignments and support the teacher with all staff members being in assigned/ designated locations. ● Assist with addressing staff and student concerns about assignments.

7.2 Specific and consistent cueing systems (resource 3) are used to gain or release student attention to ensure smooth transitions.

Environmental examples:
- Cueing systems are established to get student attention (i.e., auditory or visual signal cues "freeze and look") and are used in place of individual student redirection.
- Cueing system(s) are taught and reviewed daily to ensure students and staff understand the procedure.
- Visual supports of the cueing procedure are posted and referred to by staff and students.
- When the cueing system is implemented (i.e., signal is given), classroom staff support all students and wait for appropriate student responses (i.e., looking quietly and sitting/standing still).
- Students are reminded to follow the cueing procedure, and show compliance before moving on with task, instruction or transition.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Collaborate with the School Psychologist and the Clinician to determine what auditory/visual cueing system will be utilized in the classroom.	• Collaborate with the School Psychologist and the Clinician to determine what auditory/visual cueing system will be utilized in the classroom.	• Collaborate with the teacher and clinician to determine what auditory/visual cueing system will be utilized in the classroom.	• Support the teacher in modeling and prompting students in utilizing the cueing procedure.
• Teach students and staff cueing procedures. Continue to review, model, and prompt.	• Use the same cueing system in the classroom during group counseling sessions and with student during individual counseling sessions.	• Use the same cueing system in the classroom and with students when providing individualized support.	• Use a cueing system consistently for all transitions and necessary situations to gain student attention.
• Use a cueing system consistently across	• Model and reinforce	• Model and reinforce appropriate	

environments throughout the day. ● Model and reinforce appropriate transitions. ● Determine when/if support staff in the classroom will utilize and prompt cueing procedures and train identified staff on procedures. ● Re-teach and review procedures when necessary - especially when new students or staff join the classroom. ● Collaborate with appropriate general education teachers and additional schedule staff to teach and/or provide information regarding cueing procedure.	appropriate transitions.	transitions. ● Collaborate with the classroom teacher on identifying appropriate general education teachers and additional school staff to teach and/or provide information cueing procedures.	● Re-teach and review procedures when students are not consistently responding. ● Model and reinforce appropriate response to the cueing system when in the classroom.

7.3 Each classroom environment has a clear function or purpose.

Environmental examples:
- There are designated areas within the classroom that are physically separated furniture, floor tape or by structure of the room.
- Instruction and/or activities occur in specific areas of the classroom and are predictable by location (i.e., reading table or small group station).
- There is an area designated for student use for breaks/resetting within the classroom that is different from any area used for academic instruction.
- Locations are clearly identified where choice time activities occur.
- There is an area designated for staff personal items.
- There is an assigned area for student personal items.
- There are posted expectations for what does and does not occur within each classroom environment

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Design and determine how the classroom is physically set-up so that all space is effectively used. • Assign each area of the classroom with its function and what is/is not permissible within that location.	• Collaborate with the teacher in determining the most effective design of the areas of the classroom. • Support the teacher in upholding the expectations within each classroom environment.	• Support the classroom teacher in identifying any specific student needs regarding classroom design or set-up. • Support the classroom teacher in acquiring any specific items that may be necessary to provide for student needs with regards to the	• Support the teacher in upholding the expectations within each classroom environment. • Adhere To the designated area for staff personal items.

		classroom set-up.	

7.4 Targeted students have individual schedules or routines (resource 4) which are reviewed and used as a tool to provide an intensified level of support for students needing additional organizational and planning skills.

Environmental examples:
- Students who struggle to follow the classroom schedule may have a smaller version of the schedule within their workspace to reference, especially before transitions.
- Individual schedules are accessible to students with the schedule of classes or periods of time outside of the special education classroom (i.e., mainstreaming) and DIS services.
- Individual schedules may be provided that outline each separate task within activities of the day (i.e., reading group or math) to support planning and organization to increase task completion. These schedules would be reviewed individually with students prior to starting the activity and would be reinforced upon completion.

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Collaborate with staff to determine which students are in need of individual schedules. • Create, or designate the creation of, individual schedules. • Review or assign staff to review individual schedules with	• Collaborate with the teacher to determine students who would benefit from the use of an individual schedule, especially when needed to support regulation. • Reinforce the use of individual schedules during individual/group sessions and when in	• Collaborate with the classroom teacher to ensure that each student's individualized supports and services are included in their students in accordance with their IEP. • Collaborate with the teacher to determine	• Reinforce the use of individual schedules both in the classroom and across the school campus as appropriate. • Support students by referencing their individual schedule

students throughout the day. ● Support students by referencing their individual schedule when redirection is needed.	the classroom. ● Support students by referencing their individual schedule when redirection is needed.	students who would benefit from the use of an individual schedule, especially when needed to support regulation. ● Reinforce the use of individual schedules during individual/group sessions and when in the classroom. ● Support students by referencing their individual schedule when redirection is needed.	when redirection is needed.

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Self-Care and Secondary Trauma

The work of helping students manage their trauma response and related behaviors in an educational setting is often taxing on the classroom staff in the therapeutic milieu. To that end, the practice of self-care to mitigate the impact of Secondary Traumatic Stress (herein referred to as Secondary Trauma) is vital to the health and well-being of staff and students.

Secondary Trauma can occur when individuals are exposed to traumatic narratives and first-hand accounts of traumatic events experienced by others (National Child Trauma Stress Network (NCTSN)). While the exposure to the traumatic event is indirect, Secondary Trauma can result in a variety of reactions and symptoms that are similar to those seen in individuals diagnosed with Post-Traumatic Stress Disorder (PTSD) (Lander, 2018).

For many educators, the repeated exposure to the traumatic stories they are told by the students and families they work with can have a significant impact on their social, emotional and physical health. Common Secondary Trauma symptoms experienced by teachers and school staff include withdrawing from friends and family, feeling inexplicably irritable or angry or numb, experiencing an inability to focus, blaming others, feeling hopeless or guilty about not doing enough, being unable to sleep, overeating or not eating enough, and continually and persistently worrying about students - even when at home or while sleeping (Lander, 2018).

As described above, self-care is a vital aspect of mitigating the impact of working with students who have experienced trauma and/or traumatic stress. The World Health Organization defines self-care as anything one can do to remain physically, mentally, and/or emotionally healthy (Lawler, 2021). Ludick-Figley further suggest examples which include activities, which are relaxing or calming, as well as spiritual or physical activities that are restorative to the doer (2016). Planned, proactive strategies to manage stressors of both students and staff throughout the work day should be prioritized, supported, and nurtured.

"Over 40% of teachers report feeling high stress every day during the school year, which ties teaching with nursing as having the highest stress rate of any career." *(Waterford.org: Why Teacher Self-Care Matters:)* Failure to incorporate self-care strategies into the daily routine of an EBD classroom misses an opportunity to model healthy life skills, at best. At worst, this lack of incorporating self-care strategies contributes to staff burn-out, potential conflict between staff and students, and may lead to long-term health related problems.

"Self-care isn't just good for the educator, but also for the students. Understanding that link between self-care and professional effectiveness can really help people understand it's not selfish," Zeller says (Harvard EdCast, 2020). "It helps educators think more objectively about situations, [and] keep more professional boundaries. It helps us set good examples for our students."

To support Self-care and increase awareness of the impact of Secondary Trauma, there should be an intentional focus on professional development. This may include coaching and modeling in the areas of self-care strategies, as well as the impact of trauma and traumatic

stress on both staff job performance and student academic success. All school staff, including administrators and general education teachers benefit from understanding the importance of strategies that support self-care and increased cognizance about the impact of trauma and traumatic stress. To support inclusive practices, classroom staff must work collaboratively to provide proper support to other school site staff in order for students to participate successfully within less restrictive environments. These inclusive practices may include regular communication on instructional goals as well as social, emotional, and behavioral goals. Student IEP goals should focus on increasing proficiency with self-regulation skills and functional prosocial behaviors.

The following classroom elements are intended to provide guidance in the development and implementation of a meaningful and effective plan to support self-care and mitigate the impact of secondary trauma.

1.0 Self- Care practices are acknowledged and supported by team to mitigate instances of Secondary Trauma

Environmental Examples:
- Initial team building and collaboration is prioritized and supported by administration at the beginning of the team - *getting started right!*
- Increased awareness of secondary trauma and the importance of self-care practices among all team members.
- Psychoeducation about secondary trauma and self-care is provided to all staff (resource 1)
- There is consistent schedule for the team to meet on a regular basis
- Common language exists for the team to discuss self-care, mental wellness, secondary trauma (resource 2)
- Awareness of the intersection of culture, race, and trauma
- Support from administration for staff to utilize self-care practices.
- Administration support Inclusion of Come to PPIECESS elements in Professional Learning Communities grade level meetings for teacher to write incident reports

Teacher role examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Collaborate with clinician and school-psychologist on team building opportunities and goals at the beginning of the year/new classroom. • Participate and promote staff attendance at Secondary-Trauma and Self-Care trainings. • Collaborate with clinician regarding presentation of	• Collaborate with teacher and school-psychologist on team building opportunities and goals at the beginning of the year/new classroom. • Provide Secondary Trauma and Self-Care training information to the teacher/staff. • Collaborate with the teacher to present Secondary Trauma and Self-Care	• Ensure that the classroom team is provided with adequate time to work on team building opportunities and classroom goals at the beginning of the year/new classroom. • Encourage and support staff participation in Secondary Trauma and Self-Care trainings. • Support teacher in inclusion of	• Engage in team building opportunities and contribute to team goals. • Attend Secondary-Trauma and Self-Care trainings. • Consistently attend, participate and contribute to staff meetings. • Utilize team language around secondary trauma and self-care

Secondary Trauma and Self-Care psychoeducation at staff meeting at beginning of school year. ● Develop protocol with clinician for staff hired mid-year to receive secondary trauma and self-care psychoeducation. ● Coordinate consistent, predictable weekly staff meetings that incorporate elements of trauma-informed meetings. ● Incorporate opportunities for all staff to check in at staff meetings utilizing previously taught and modeled secondary trauma and self-care check-ins. ● Prompt and utilize team language around secondary trauma and self-care during staff meeting check-ins. ● Model, prompt, and support staff use of self-care practices throughout the day. ● Develop protocol with	psychoeducation at a staff meeting early in the year. ● Develop protocol with the teacher for staff hired mid-year to receive secondary trauma and self-care psychoeducation. ● Support teacher in implementing elements of trauma-informed care during weekly staff meetings. ● Model use of secondary trauma and self-care language in staff meeting check-ins. ● Model, prompt, and support staff use of self-care practices throughout the day.	trauma-informed meeting principles during weekly staff meetings. ● Support consistent staff meeting attendance by ensuring that paraprofessional staff are compensated for attendance. ● Model, prompt, and support staff use of self-care practices throughout the day. ● Develop protocol with the teacher for classroom coverage to allow for timely incident report completion.	during staff meeting check-ins. ● Model, prompt, and support staff use of self-care practices throughout the day.

the school psychologist for classroom coverage to allow for timely completion of incident reports.			

2.0 Self care during contact hours

Environmental Examples:
- ○ Taking breaks as scheduled and when needed
- ○ Take care of physiological needs (food, physical comfort, water)
- ○ Matrix posted to where staff are at all times
- ○ Procedures established for way to tap out
- ○ Procedures for appropriately processing incidents
- ○ Staff check-in system
- ○ Utilizing other campus spaces for lunch/break: staff lounge
- ○ Minimizing work (emails, texting, calls) when not on contract hour time

Teacher roles examples:	Clinician role examples:	School Psychologist role examples:	Paraprofessional role examples:
• Model and prompt taking appropriate breaks throughout the day. • Prioritize creation of staff and student classroom schedule (matrix) at the beginning of the year	• Model and prompt taking appropriate breaks. • Contribute to the classroom matrix schedule by collaborating with the teacher regarding group and individual	• Model and prompt taking appropriate breaks. • Collaborate with the classroom teacher in the creation of staff/student classroom (matrix) schedule at	• Take scheduled breaks and additional breaks as needed throughout the day to support well-being. • Utilize and follow the classroom matrix schedule.

and update as needed. ● Review matrix schedule with any substitute staff at the beginning of the day to support continuation of consistent schedule and appropriate break times.. ● Collaborate with the classroom team to develop a system for staff to recognize and utilize a "tap out" procedure. Model and prompt procedure. ● Collaborate with administration at the beginning of the year to establish procedure for processing incidents. Teach, review and prompt procedure with classroom staff. ● Prioritize development of a staff check-in system with the clinician at the beginning of the year. Teach, model, and prompt check-in system. ● Gather information about "staff only" locations on campus.	counseling times at the beginning of the year. ● Support teacher and administration in development of procedure for staff to process classroom incidents. ● Collaborate with the teacher and at the beginning of the year to support the development of a staff "check in" system. Model and prompt system. ● Model and prompt use of "staff only" spaces on campus to support quality staff breaks. ● Model healthy work boundaries. Limit work-related communication outside of working hours to emergency only.	the beginning of the year. ● Support teacher and classroom staff in the development of a "tap out" procedure. ● Collaborate with the teacher on the development of procedure to process incidents with a clearly defined role for administration in supporting time and place for staff to process incidents and complete any necessary paperwork. ● Support staff use of "staff only" spaces on campus during breaks. ● Model healthy work boundaries. Limit work-related communication outside of working hours to emergency only. Do not expect classroom staff to answer calls, texts, or emails outside of working hours.	● Collaborate on development of "tap out" procedure. Support, model and prompt use. ● Support, prompt, and utilize procedure to process classroom incidents. ● Support and consistently utilize a staff "check-in" system. ● Utilize and prompt use of "staff only" areas on campus during breaks and lunch. ● Model healthy work boundaries. Limit work-related communication outside of working hours to emergency only.

Review options for break locations with classroom staff. Model and prompt use of "staff only" spaces on campus to support quality staff breaks. ● Model healthy work boundaries. Limit work-related communication outside of working hours to emergency only. Do not expect classroom staff to answer calls, texts, or emails outside of working hours.			

3.0 Self care during teaming

- ■ Spend time at beginning of year to establish culture of meetings
- ■ WRAP plans
    - ● WRAP is…
    - ● Setting Up a Wellness Action Plan
- ■ Resources for personality type things for culture,
    - ● Enneagrams
    - ● True Colors for Work
- ■ Have a common team vision for the program - include all voices
    - ● Vision statements
    - ● Individual and Team "Why's"

- ■ Time to establish relationships, rapport and development of procedures

- ○ Ongoing teaming
    - ■ Agenda which includes check-in
    - ■ Three principles of SEL/Trauma informed meeting practices (Welcoming Ritual, Engaging Communication practices, optimistic closer) (Resource)
    - ■ Google Drive for notes and agenda
    - ■ Establish who can be in charge of meetings
    - ■ Para professionals can add to agenda
    - ■ Meeting times include whole staff
    - ■ Opportunities for skill use by staff that can be used with class or students
    - ■ Modeling breathing or grounding
- ○ Time to process incidents
- ○ Staff check-in system
- ○ Time spent thinking about self-care plan and how doing
- ○ "Buddy system" within staff to support self-care/vent/process

4.0 Self care at home

- ○ Self-care activities of choice
    - ■ Time in nature
    - ■ Time with friends/family
    - ■ Time with pets
    - ■ Utilize WRAP activities
- ○ Connection with "Buddy"

5.0 Resources for staff

- ● BCOE Universal Wellness Website
    - ○ BCOE Wellness Communities & Be Well Newsletters

- [BSSF Health and Wellness Center](#)
  - [Employee Assistance Program](#)
- District resources?
- Online resources
  - National Child Traumatic Stress Network
    - [Secondary Traumatic Stress: A Fact Sheet for Child-Serving Professionals](#)
    - [Self Care for Educators](#)
  - Secondary Traumatic Stress: Building Resilience in Staff
    - [Self-Care Assessment](#)
  - Child Trauma Academy
    - Dr. Bruce Perry's [The Cost of Caring](#)
  - Workshops for the Helping Professions
    - [Transforming Compassion Fatigue into Compassion Satisfaction: Top 12 Self-Care Tips for Helpers](#)
  - The ABCs of Managing Secondary Trauma
    - [Awareness, Balance, and Connecting](#)
  - British Columbia Government
    - [Self Care and Strategies by Organizations to Support Wellness](#)
  - The Trauma Stewardship Institute
    - [Laura van Dernoot Lipsky Story](#)
    - [Beyond the Cliff TED Talk](#)
  - US Department of Veteran's Affairs
    - [Provider Strategies for Coping with Burnout and Secondary Traumatic Stress](#)
    - [Self Assessment](#)
  - University at Buffalo: School of Social Work
    - [Self-Care Starter Kit](#)

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