EXECUTIVE SUMMARY

Purpose
The COVID 19 pandemic has required our educational system to pivot quickly and effectively in a relatively short period of time. While the tendency is to seek “best practice” solutions to school re-entry, reality tells us that each of our schools will require a unique response to re-entry mostly because we are planning this response while still “being in it”. The NACTATR Guidelines for Re-entry into the School Setting provides an in-depth practical understanding to better prepare school personnel for re-entry into the school community; emphasizing the social and emotional well being for student and staff. While these guidelines support school teams directly, they deeply embed the understanding that this transition is an entire community “issue” and not just an “education” issue or even just a health issue. We are in a unique human experience that will require interdependent comprehensive assessment, support, and interventions encompassing multi-disciplinary collaboration.

Current Context
Government Health Departments have assumed necessary leadership regarding the management of the COVID-19 virus and schools have defaulted to their expertise. However, the emotional and trauma-generated symptoms require all disciplines engaged in the helping professions to combine their expertise, including education. The “Traumatic Event Systems (TES™) Model” and the “Crisis and Trauma-Response Continuum” denotes that during any traumatic event individuals will experience a range of responses from no impact (they are doing fine) to acute symptom development, chronic symptom development, delayed reaction, complete repression to overt traumatization. Failure to understand this reaction range has resulted in many individuals referring to any form of distress as “trauma”. Even among some professionals, one of the most misused and misunderstood words is trauma. Furthermore, differentiating between grief, loss and trauma is essential in accurately assessing and understanding the impact of the pandemic on all those impacted.

Discussion
Society often perceives school and their respective functioning similarly. For example, High Schools are generally designed and structured to transition students to post-secondary education or the workplace. Middle/ Junior high schools are structured similarly in that they support students for successful transition to high school. Though, much of the lifespan of student transition is determined by rule governed processes (curriculum, formative and summative assessment, and curriculum delivery), that navigate students through their K-12 education, the pandemic has put the breaks on the traditional flow of the education system and requires leaders at all levels to adapt and create solutions. Educational leaders have adjusted and continue to adjust to these dynamics, and what the NACTATR Guidelines for Re-entry into the School Setting equips leaders and their teams with the tools to also support the social emotional and traumatic impact of the pandemic.
These guidelines are intentionally broad to provide a range of support from “system” leaders to the professionals and para professionals who work directly with students. The document includes, but is not limited, to the following parameters:

- The Role of Local Provincial/State and Federal Governments.
- Three-Pronged School, School District and Community Assessment Through VTRA™ (Threat Assessment), TES™ (Trauma Response) and Suicide Prevention Lenses.
- School-Based Interventions for Students, Staff and Families.

The Role of Local, Provincial and Federal Government

As the world awaits the discovery of a vaccine, the role of health authorities remains important as we transition into some semblance of normalcy. Exposure to the virus will continue to preoccupy staff as we re-enter the school year. Notwithstanding the health of our staff and students, other questions are considered during the re-entry phase: Will students be ready to learn? What percentage of students will be truant or refuse to return to school? Are faculty and staff prepared? Are parents sufficiently reassured to allow their children to return to school buildings? What can we expect from all the constituents and members of the school family and what are the steps we can take to facilitate the best possible outcomes when schools restart?

COVID-19 is not only a “School Issue” it is an entire “Community Issue”. Therefore, the return of many of our citizens to school (students and staff) requires guided multidisciplinary collaboration and the leadership of local, state/provincial and federal government departments especially those who are part of education, health, crisis and trauma response teams as well as those responsible for public safety including violence and suicide prevention. The strategies around physical distancing are the tangible aspects of re-entry during the pandemic that may lower health official’s anxiety but increase that of some students and staff. Therefore, it will be managing the social-emotional and trauma response of some individuals to both the initial school disruption due to the virus, and the impact of those tangible strategies for re-entry. Strategically addressing these two dynamics is what will influence whether a return to school is functional or dysfunctional. First principle of crisis response is “model calmness” which can only be done by the adults on behalf of the students if the plan to return includes being open about the broad human response and how to thoughtfully accommodate it. At a minimum, the agency leaders should include: Health, Education, Mental Health, Child Protection, Probation, Law Enforcement, Specialist in Domestic and Relational Violence to name a few. The good news is in many communities, VTRA™ and TES™ protocols already exist to support the multi-disciplinary process recommended in the guidelines.
The strategies to reopen schools are closely connected to the recommendations made through our governing bodies, particularly Health and Community Health policies. The guidelines are intended to compliment and function adjacently to the recommendations from Provincial Health Authorities. The following 5 stages for re-entry should be considered:

**Stage 1:** Safety and building preparedness before students and teachers return.

**Goal:** Establishing procedures and cleaning protocols that support overall physical safety for students and staff. Communication plans for all stakeholders.

**Stage 2:** Scheduling Teacher, Faculty and Staff Only Days – Organize Group Alike and All School Meetings Giving Every Adult time to meet and talk together.

**Goals:** Creating opportunities for each group to identify ways in which COVID 19 has changed their lives, jobs, work to reach consensus within each group on 3 to 4 new ways or modifications of essential tasks.

**Stage 3:** Parent/Caregiver Consultation.

**Goals:** In our work supporting communities in the aftermath of high-profile tragedies, one of the best interventions has been to harmonize ALL of the adults (school staff, community professionals and parents/caregivers) into a single system committed to supporting our children and youth.

**Stage 4:** Students Return

**Goal:** Providing Psychological First Aid to students and staff will assist in identifying the reasons why students are not attending school. The information that will come of these initial interventions will serve the goal of more successfully returning all students to the educational (classroom, etc.) setting and to more structured learning.

**Stage 5:** Restore All School Activities, School Wide Policies, Procedures, Programs and Community Partnerships and Work on Modifications Needed to Increase Attendance and Enhance Learning.
THREE-PRONGED SCHOOL, SCHOOL DISTRICT AND COMMUNITY ASSESSMENT

The fields of Violence Threat Risk Assessment, Crisis and Trauma Response, and Suicide Prevention are inseparably connected. With proper multidisciplinary collaboration and the inclusion of good assessment of the dynamics between family, school and the community, teams can plan interventions that can result in more lasting gains.

Grounded in the fundamentals of threat assessment, trauma response and suicide prevention education and training, the comprehensiveness of the three-pronged assessment provides school-based teams with the essentials for trauma informed data driven re-entry. For counselling teams, assessment tools such as: Coronavirus Impact Scale, Psychological First Aid for students, and Psychological First Aid for staff, are provided but are only one part of the overall assessment. Dr. Marleen Wong, University of Southern California and NACTATR Senior Advisor, provides practical counsel in her article Psychological First Aid (PFA) for Schools, Teachers and Students. Complementing this counsel, School-based teams are provided with a ten-step assessment process that is complimented with a four-step community based data collection tools that include: macro system dynamics (geography, demographic based analysis) to micro dynamics that inform both school and community professionals on the impact of dynamics (e.g. isolation) associated with the pandemic (See Flow Chart at the end of this document).

COMMUNITY AND SCHOOL-BASED INTERVENTIONS

“The better the data, the better the assessment, the better the assessment the better the intervention.”

J. Kevin Cameron.

Bearing the weight and responsibility of supporting the students’ well-being is the responsibility of all stakeholders not just schools. Multi-disciplinary teams that share information, collate data at both the community and school-based level, and match that data to appropriate resources minimizes the overall impact of returning to school while continuing to be exposed by the virus. This prolonged exposure requires teams to adapt and pivot based on multiple data ranging from the individual student, their family, and even the communities they live. Educators must also consider the dynamics and climate of their own schools as they match resources to student need. Dr. William Pollack, Harvard University and NACTATR Senior Advisor, provides valuable recommendation on the importance of creating open school systems and supportive climate in the article entitled, Bystanders to School Violence/Upstanders for Safety & What they Can Teach us as Schools Reopen During/After the Pandemic. To that end, the guidelines provide comprehensive instructional videos and supplementary articles for use by counselling and student services members of schools, districts and community professionals on: a) family dynamic b) assessment using genograms c) geographic macrodynamic mapping and d) school dynamics. Tying all the assessment and interventions together is a suggested 5-day schedule (pp.36-39) to assist administrators and their respective teams in the implementation of the guidelines.
CONCLUSION

The *Guidelines for Re-Entry into the School Setting During the Pandemic* when used properly, are meant to lower the stress placed on school administrators and their teams during this unprecedented time in the world’s history. They are to formally activate all resources available to schools, districts and the community in a structured and trauma-informed way. Although school administrators maintain the lead, they do so with a process that guides those around them to stay the course of supporting and educating students through thoughtful and guided practice that meets the needs of each “individual” school.

To Review this comprehensive Guidelines or review the detailed “Table of Contents” please click this Image.
School / Site Based VTRA & TES Teams

Steps:
2) Review Resource Allocation Pyramid, Primary & Secondary support systems.
3) Collate gathered data.
4) Collate gathered data with prior data derived using the Resource Allocation Pyramid from the start of the quarantine.
5) Review new set of data and collaborate with Community / School VTRA & TES Team Leads where appropriate or needed.
6) Assess pre COVID-19 Functioning of students, families, and schools.
7) Where necessary, Consult with Community / School VTRA & TES Team Leads.
8) School based teams begin to match Resources to Risk.
9) Consult where necessary and

Community / School VTRA & TES Team Leads

Steps:
1) Conduct Macro Assessment.
2) Conduct Micro Assessments.
3) Triage High-Risk Cases.
4) Consult where necessary on cases with the School / Site Based VTRA & TES Teams.