SUPPORTING THE WHOLE CHILD DURING A PANDEMIC RESPONSE

cairn
The path to healthy schools.

COMMUNITY

COMMUNITY

Health Education

Physical Education & Physical Activity

Community Involvement

Nutrition Environment & Services

Family Engagement

Health Services

Employee Wellness

Social & Emotional Climate

Physical Environment

Counseling, Psychological, & Social Services

COORDINATING POLICY, PROCESS, & PRACTICE

IMPROVING LEARNING AND IMPROVING HEALTH

HEALTHY

SAFE

CHALLENGED

ENGAGED

SUPPORTED

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Introduction of Toolkit

The changing landscape for school planning during a global pandemic calls for an unprecedented level of collaboration and coordination in school communities to best serve students' health and academic needs. Districts are working hard to assess the changing landscape of what the day to day of their school community looks like during a global pandemic and with regard to social justice and racial equity. Districts are considering ways to support their staff, students and family communities, how to provide academic support their staff, students and family communities, continue to provide academic support in a rigorous way and ensure all students are getting what they need to thrive; whether that means access to meals, access to the internet or social/emotional learning opportunities.

In 2014, Centers for Disease Control and Prevention in partnership with ASCD revised the former Coordinated School Health Model into the Whole School, Whole Community, Whole Child (WSCC) model to provide a framework in which schools and districts would work to increase collaboration, coordination, consistency around school health issues.

The Whole School, Whole Community, Whole Child (WSCC) model combines and builds on elements of the traditional coordinated school health approach and the whole child framework by:

- Responding to the call for greater alignment, integration, and collaboration between education and health to improve each child's cognitive, physical, social, and emotional development.

- Incorporating the components of a coordinated school health program around the tenets of a whole child approach to education.

- Providing a framework to address the symbiotic relationship between learning and health. [1]

Even if your school or district does not fully adhere to the WSCC framework as part of overall district accountability measures, it still offers a community-based approach to decision-making and a useful conceptual framework for understanding where your school community can better collaborate to meet students' physical, mental, and social emotional needs.

The goal of this toolkit is to provide a resource that allows schools and districts to review current tools (guidance documents, research, etc.) organized by component in order to create next steps and action plans related to the pandemic response. The toolkit is an exercise for local schools to consider existing supports and services as well as new opportunities for school health through the lens of each WSCC component.

Each module aligned to each WSCC Component includes:

- Overview

- Resources and guidance when applicable

- Collaboration opportunities with other components to make a system, ensuring efficiency

- Prompts and tables that encourage reflection for school education leaders, or school/district councils to see their own connections, gaps, next steps and considerations

This toolkit includes ten documents that align to the Whole School, Whole Community, Whole Child (WSCC) Framework to ensure a comprehensive approach and emphasizes the need for collaboration and coordination of people, policy and practice in a school to support the whole child. If you are unfamiliar with this framework, we encourage you to learn more by visiting ASCD's website. The resource that follows is unique because it demonstrates how integrating a systems-thinking approach to efforts to support students, staff, and the broader community ensures that all components are working together towards a common goal of thriving, healthy students.

Introduction of Toolkit

We hope that education leaders (Superintendents, School Board Members, Principals) and other staff and partners would complete these exercises for planning purposes. The District or School Wellness Council might use their meeting time to go through each section and review and process for next steps.

Directions for Using this Toolkit:

1. Determine who will review and complete each component

2. Complete exercises within each component before completing the table below

3. Bring all components together and prioritize next steps

4. Use table and questions below to prioritize steps

5. Implement!

Below is a graphic organizer that allows schools and districts to compile and prioritize their next action steps based on the discussions and work for each of the separate component considerations. An effective outcome from using this toolkit would be a prioritized to-do list of ways to increase collaboration and coordination among staff and partners to best meet the needs of students and communities during a time of many unknowns. Thinking through what action steps your school or district might take now, in three months, in six months or a year can help educators plan and implement the best practices for creating a healthy and safe education community. The first two lines of the graphic organizer provide examples.

DESIRED OUTCOME	ACTION STEP	ASSOCIATED COMPONENT/ KEY STAFF	CONCRETE METRIC	TIMEFRAME (now? 3 months? 6 months? A year?)
Support for Employee Mental Health	Complete a staff wellness assessment	Employee Wellness/HR Staff	Action plan with 3 next steps informed by assessment	Within 3 months
Student access to breakfast and lunch meals	Connect Food Service staff with local adult volunteers Establish a plan for adult meal pick up Establish a plan for delivery (use of volunteers)	Nutrition and Environment Services/ Food Service Director	Increased meal participation	Now

Introduction of Toolkit

What leadership support is needed?

What existing policies and structures can support your efforts?

How might you address resistance and create buy-in from school and/or community partners?

How can different components intersect to leverage efficiency or resources?

What is one take away you have related to completing this toolkit?

For support and more information, we need to contact:

Health Education

Overview of the component

When taught by qualified, trained teachers, health education helps students acquire the knowledge, attitudes, and skills they need for making healthy decisions now and throughout life. Teachers play a critical role when it comes to health literacy during a pandemic. In fact, health teachers have been teaching social/emotional learning skills and disease prevention for over 100 years in health education! One of the ways we encourage all school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets.

This framing or lens, ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting health education.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.

(ASCD, http://www.ascd.org/whole-child.aspx)

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school health education curriculum and instruction support and reinforce the health and well-being of each student by addressing the physical, mental, emotional, and social dimensions of health.
Safe	Our school teaches, models, and provides opportunities to practice social-emotional skills, including effective listening, conflict resolution, problem solving, personal reflection and responsibility, and ethical decision making.
Engaged	Our curriculum and instruction promote students' understanding of the real-world, global relevance and application of learned content.
Supported	Every member of our school staff is well-qualified and properly credentialed.
Challenged	Each student in our school has access to challenging, comprehensive curriculum in all content areas.

Health Education

Considerations for Health Education

When students receive quality health education, their skills in preventing the spread of COVID-19 and learning how to access help, identify symptoms and advocate for others is increased. Do your students have the opportunity to learn the following content and following content and practice the following skills?

Below is a table of examples of what a comprehensive K-12 health education curriculum would cover related to disease prevention, intervention and postvention.

Health Education Standard #1 Content students should have the opportunity to *learn*…	Examples of skills K-12 students should have the opportunity to *practice*…
Recognize that wearing a mask reduces my risk of COVID-19. *Explain* that washing my hands with soap and water for at least 20 seconds reduces my risk of COVID-19. *Describe* that minimizing contact with people to the best of my ability reduces my risk of COVID-19. *Recite* the symptoms of COVID-19.	**Health Education Standard #2** • *Identify* how I'm influenced by media, peers, laws, policies, social norms, family and myself on COVID-19 issues and information. **Health Education Standard #3** • *Identify* when I need help and information • *Analyze* the validity of resources about COVID-19. **Health Education Standard #4** • *Communicate* how I'm feeling (mentally, emotionally & physically) to a trusted adult. • Collaborate with people I live with on rules to protect infection or diminish risk from COVID-19. **Health Education Standard #5** • *Post, share, & communicate* clear, health-promoting messages on COVID-19 related situations. • *Ask* for help when I need it. • *Post* assertive, health-promoting, valid, relevant and accurate messages on social media. • Effectively *use* refusal skills related to COVID-19 situation (i.e., pressure to not wear a mask when safer to do so, influences that may put you at risk). **Health Education Standard #6** • *Develop* a goal to prevent COVID-19, or reduce the spread of it by identifying barriers to achieve a goal, developing action steps, monitoring progress and reflecting. **Health Education Standard #7** • *Accept* that I am personally responsible for my own health and behaviors. • Practice healthy behaviors (i.e., wash hands, take my temperature regularly, social distance in public, get tested, wear a mask, stay home, minimize contact with others) **Health Education Standard #8** • *Advocate* for my own health and the health of others.

Health Education

Our Local Considerations

What are the healthy behaviors and health skills you would like to see your students demonstrate right now?

What are some additional prioritized health topics that should be addressed during this school year to set students up with the knowledge and skills needed to be healthy and safe right now?

How does Health Education intersect with other components in this document? For example, while the health teacher teaches nutrition/ healthy eating, how can they collaborate with the Nutrition and Environment Services?

List three action steps to help promote, support or create a K-12 Comprehensive Health Education Program.

Resources

Society of Health and Physical Educators. School Reentry Considerations: K-12 Physical Education, Health Education, and Physical Activity.

ETR: HealthSmart comprehensive Health Education curriculum

Return to School Guidance

New York State: Recovering, Rebuilding, and Renewing, The Spirit of New York's Schools; Reopening Guidance

American Academy of Pediatrics: COVID-19 Planning Considerations: Guidance for School Re-Entry

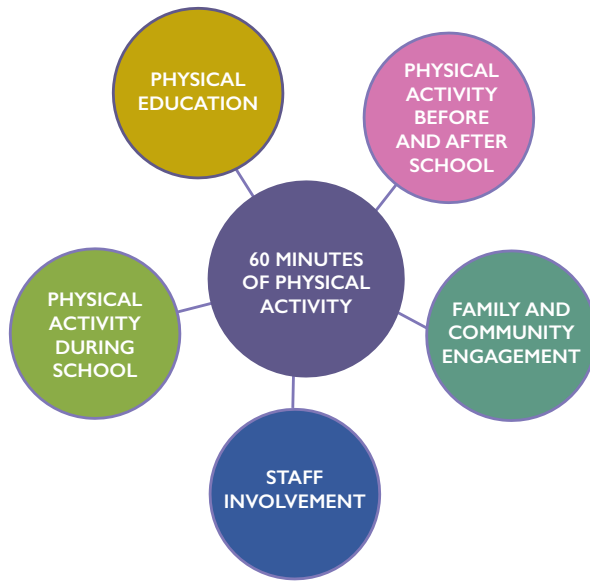Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

Centers for Disease Control and Prevention: Preparing K-12 School Administrators for a Safe Return to School in Fall 2020

Physical Education and Physical Activity

Overview of the component

All students should receive 60 minutes of physical activity a day as critical to resilience and recovery, especially during a pandemic or traumatic event. Physical education is a component of the 60 minutes a day recommendation, as is classroom movement activity energizers, recess, before/after school activities, intramurals, staff involvement and family and community engagement opportunities.

This multi-component approach is used widely and called Comprehensive School Physical Activity Program (CSPAP).

PHYSICAL EDUCATION

PHYSICAL ACTIVITY BEFORE AND AFTER SCHOOL

60 MINUTES OF PHYSICAL ACTIVITY

PHYSICAL ACTIVITY DURING SCHOOL

FAMILY AND COMMUNITY ENGAGEMENT

STAFF INVOLVEMENT

Students need opportunities for both physical education and physical activity, not only for the health benefits, but also for the connection to improved academic performance, social emotional learning and the power to engage students, families and communities. It is important to differentiate between *physical education* and *physical activity*. Physical education is an academic subject where students learn the skills and knowledge to be physically active. Physical activity is bodily movement of any type and may include recreational, fitness and sport activities such as jumping rope, playing soccer, lifting weights, as well as daily activities such as taking a walking, riding a bike, or gardening. Schools can encourage physical activity throughout the school day by offering recess and classroom-based physical activity opportunities. Additional opportunities for physical activity can occur through before/after school activities such as encouraging active commuting, physical activity clubs, intramurals and informal recreation.

One of the ways we encourage all school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets. This framing or lens ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting physical education and physical activity.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.
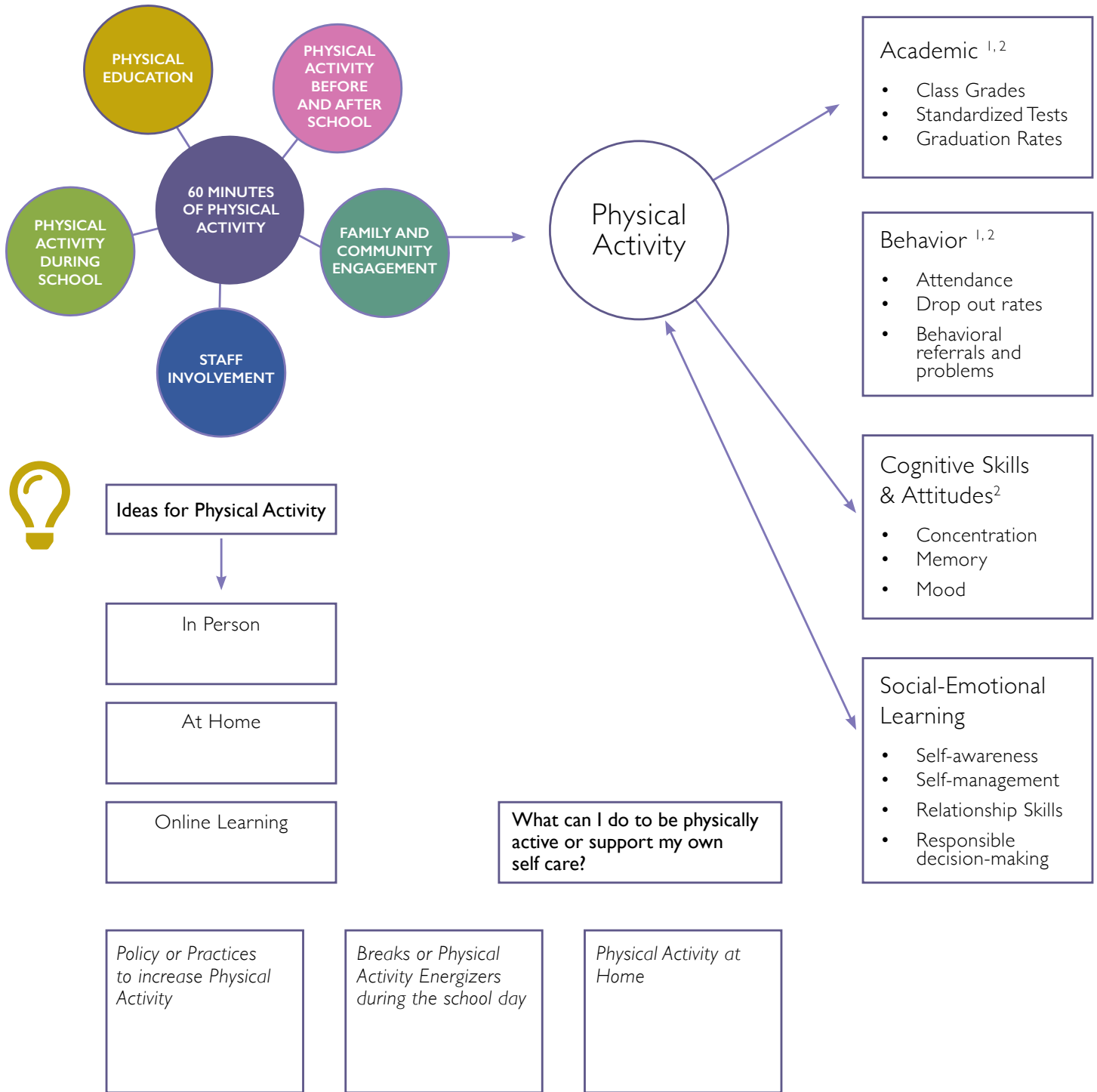
(ASCD, http://www.ascd.org/whole-child.aspx)

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school facility and environment support and reinforce the health and well-being of each student and staff member.
	Our school physical education schedule, curriculum, and instruction support and reinforce the health and well-being of each student by addressing lifetime fitness knowledge, attitudes, behaviors and skills.
Safe	Our school building, grounds, playground equipment, and vehicles meet the minimal guidelines for safety.
Engaged	Each student in our school has access to a range of options and choices for extracurricular and cocurricular activities that reflect student interests, goals, and learning profiles.
Supported	Our school staff welcome and include all families as partners in their children's education and significant members of the school community.

Physical Education and Physical Activity

Comprehensive School Physical Activity

PHYSICAL EDUCATION

PHYSICAL ACTIVITY BEFORE AND AFTER SCHOOL

60 MINUTES OF PHYSICAL ACTIVITY

PHYSICAL ACTIVITY DURING SCHOOL

FAMILY AND COMMUNITY ENGAGEMENT

STAFF INVOLVEMENT

Physical Activity

Academic [1,2]
- Class Grades
- Standardized Tests
- Graduation Rates

Behavior [1,2]
- Attendance
- Drop out rates
- Behavioral referrals and problems

Cognitive Skills & Attitudes [2]
- Concentration
- Memory
- Mood

Social-Emotional Learning
- Self-awareness
- Self-management
- Relationship Skills
- Responsible decision-making

Ideas for Physical Activity

In Person

At Home

Online Learning

What can I do to be physically active or support my own self care?

Policy or Practices to increase Physical Activity

Breaks or Physical Activity Energizers during the school day

Physical Activity at Home

[1] Centers for Disease Control and Prevention (2010). The association between school based physical activity, including physical education, and academic performance. Atlanta, GA. U.S. Department of Health and Human Services; 2010. https://www.cdc.gov/healthyyouth/health_and_academics/pdf/pa-pe_paper.pdf

[2] Centers for Disease Control and Prevention (n.d.). Health Kids. Successful Students. Stronger Communities. Improving academic achievement through healthy eating and physical activity. Retrieved from: https://www.cdc.gov/healthyschools/health_and_academics/pdf/2014_8_29_health-academics_508tagged.pdf

Nutrition Environment & Services

Overview of the component

Nutrition Environment and Services provides an opportunity for students to learn about and develop healthy nutrition skills and behaviors. It also serves as an important social setting for students and is another opportunity for schools to create an environment that promotes nutrient-rich food options and healthy eating and drinking habits. With many unknowns during COVID-19, food service personnel are looking for guidance on how to safely and effectively feed our students, whether in school or learning remotely.

Suggestions from Trust for America's Health Nutrition Policy Brief include:

• Supplement school meal programs

• Ensure food service worker safety

• Align and support other assistance programs

• Provide funding relief for school nutrition programs

Some local school efforts might be:

• Support health teachers in teaching skills-based nutrition education units (in person, remote or hybrid models)

• Utilize local, state-based support to allow greater flexibility to distribute meals to all children, regardless of their status as a student.

• Use a hybrid approach to provide meals at grab and go sites or directly delivering meals to homes.

• Deliver a week of meals at once to decrease contact and potential spread of COVID-19.

• Lunch held in classrooms or outside to minimize interaction between groups of students.

• Maintain appropriate physical distancing if the cafeteria must be used.

• Deliver grab-and-go meals to students in Pre K-K classrooms, and provide pickup points around the school for grades 1-12.

• Ensure students have access to potable water and are well hydrated.

One of the ways we encourage school educators and leaders to frame their decisions and strategies around providing meals to students is through ASCDs Whole Child Tenets. This framing, or lens, ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting physical education and physical activity. Below is a table that lists the indicators supporting nutrition/healthy eating.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.

(ASCD, http://www.ascd.org/whole-child.aspx)

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Safe	Our physical, emotional, academic, and social school climate is safe, friendly, and student centered.
Healthy	Our school culture supports and reinforces the health and well-being of each student. Our school facility and environment support and reinforce the health and wellbeing of each student and staff member. Our school supports, promotes, and reinforces healthy eating patterns and food safety in routine food services and special programming and events for students and staff.
Supported	Our school helps families understand available services, advocate for their children's needs, and support their children's learning.

Nutrition Environment & Services

Considerations for Different Scenarios

Depending on what model your school looks like, in-person with social distancing practices in place, hybrid and/or remote learning, access to meals and a safe nutrition environment is something schools need to consider.

Systems Thinking

A systems-thinking approach to implementing the procedures and policies in the resources above will help education leaders thoroughly consider how one decision impacts another. When a consistently healthy message is sent through all of the policies, programs, & processes of a school community that prioritizes students receiving nutrition services, it reinforces the message about students' health and wellness.

Student Level Considerations Examples: • Feeding students in classrooms versus in the cafeteria.	• What is the role of nutrition services in the success of the student? • How might the health education teacher partner with food service to support students' healthy eating and drinking skills? • How can we ensure that staff and students have access to nutrient-rich meals? • How can we encourage them to make healthy choices about food and hydration?
School Level Considerations Examples: • Knowing the data around food insecurity of your local school and linking services so your students have access to nutrient-rich meals.	• How can food security efforts be teamed with other initiatives? For example, access to technology by families, health services, transportation, academic supports, community partners. • How can we ensure that staff and students have access to nutrient-rich meals? • How can we encourage them to make healthy choices about food and hydration?
District Level Considerations Examples: • Partnering with faith-based organizations to distribute meals if fully remote.	• How is the pandemic impacting access to meals in our district? • What systems are in place that support students' accessing meals no matter the school scenario (hybrid, remote, in person) • What systems are in place to keep students healthy and safe while eating at school? • What community partners might provide support?

Resources

American Academy of Pediatrics: COVID-19 Planning Considerations: Guidance for School Re-Entry

New York State Guidance: Recovering, Rebuilding, and Renewing, The Spirit of New York's Schools; Reopening Guidance

Trust for America's Health: Beyond School Walls: how Federal, State and Local Entities are Adapting Policies to Ensure Student Access to Healthy Meals During the COVID-10 Pandemic

Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

Centers for Disease Control and Prevention: Preparing K-12 School Administrators for a Safe Return to School in Fall 2020

Action for Healthy Kids: School Nutrition Waiver Information

Alliance for a Healthier Generation: COVID-19 Back to School Resources

Health Services

Overview of the component

Health services includes prevention, screening and intervention services for actual and potential health problems, including administering first aid, emergency care, management of chronic health conditions, wellness promotion and preventive services for staff, student and parents. Comprehensive health services also provides educational and counseling opportunities for promoting and maintaining individual, family, and community health. Health services is comprised of supports for the physical health of students and are typically delivered in the school setting by a school nurse or with the help of other credentialed staff such as a nurse practitioner, physicians, nurses, dentists, health educators, and other allied health personnel. Health services is a component that relies on school and community partnerships to meet students' needs.

During a pandemic, comprehensive health services plays a key role on the front lines as schools are developing, communicating, and implementing plans, protocols and procedures to ensure the safety of well and ill children and staff. Preventive actions include symptom checks; education to promote public health mitigation strategies including hygiene practices and social distancing; Personal Protective Equipment (PPE) and face coverings; management of ill persons; and deep cleaning and disinfecting of high touch surfaces. Establishing or enhancing school partnerships between health services and counseling, psychological, and social services could support an effective referral system to provide supports for students, staff, and families.

One of the ways we encourage all school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets. This framing or lens ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting health services.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children. *(ASCD, http://www.ascd.org/whole-child.aspx)*

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school facility and environment support and reinforce the health and well-being of each student and staff member.
	Our school addresses the health and well-being of each staff member.
	Our school facilitates student and staff access to health, mental health, and dental services.
	Our school collaborates with parents and the local community to promote the health and well-being of each student.
Supported	Every member of our school staff is well qualified and properly credentialed.
	Our school helps families understand available services, advocate for their children's needs and support their children's learning.

Considerations for Health Services

Systems Thinking

A systems-thinking approach to implementing the procedures and policies in the resources above will help education leaders thoroughly consider how one decision impacts another. When a consistently healthy message is sent through all of the policies, programs, & processes of a school community, it reinforces the message that keeping students healthy and safe is a priority.

Health services plays an integral role in the return to school by providing prevention, screening, and intervention services. Health services are enhanced within school and community partnerships. The purpose of this activity to examine the role of partnerships in providing prevention, screening and intervention health services.

Health Services

Directions:

Below is a chart of some of the prevention, screening and interventions from health services around Covid-19. School partners identify school personnel involved in the health services. The community partner represents partners or possible partners outside of the school who could assist or support this service. After completing the partners section, identify the potential outcomes that could result from these efforts.

Step 1. Identify action step. This could be a specific action regarding prevention, screening or the intervention/services to support your school's restart/reentry plan.

Step 2. Identify school partners and/or community partners who support the specific action step. The school partner includes individuals within the school who can support the action step. The community partner represents partners or possible partners outside of the school who could assist or support this service.

Step 3. Identify the potential outcomes that could result from these efforts. "If we implement this action the result could be……"

Examples of Health Services	Prevention	Screening	Intervention
	Healthy Hygiene Practices PPE & Face Coverings Cleaning & Disinfection Mental & Emotional Health	Daily Health Assessment	Management of ill persons Contact Tracing

Action Step (Example):	Implement effective daily health screenings for symptoms.		
	Prevention	Screening	Intervention
School Partner	Staff Education Health Education to help students complete self-assessment.	School nurse and /or screening team conducts assessments	School nurse reporting symp-toms/possible cases.
Community Partner	Parent Education and media campaign	Parent Reporting System Community partner providing thermometers	Communication with Public Health Officials
Possible Outcomes	• Reducing the number of cases • Increasing the feeling of a safe environment.	• Stop possible spread • Limit the number of staff and students exposed • Increased feeling of safety	• Stop possible spread • Begin contact tracing

Action step 1			
Topic	Prevention	Screening	Intervention
School Partner			
Community Partner			
Possible Outcomes			

Action step 2			
Topic	Prevention	Screening	Intervention
School Partner			
Community Partner			
Possible Outcomes			

Health Services

Another activity is to explore the current health services in your school, reflect using your local data to identify student needs, and determine additional opportunities to provide health services through school and community partnerships to provide prevention, screening, or intervention services

Step 1. Identify action step.

Step 2. Identify the prevention, screening or intervention services that support your action step.

Step 3. Identify current or potential school and community partners.

Step 4. Identify possible outcomes. How might this action step and services support your students, school and community.

Action step (example):	Improve dental health of students through prevention, screening and intervention.		
Topic	Prevention	Screening	Intervention
Dental Health	Oral health instruction in health education	Dental screening	Preventive/restorative care
School Partner	Health education unit in K-12		
Community Partner	Local pediatric dentists provide kits for students	Kindergarten screening health fair	Mobile dentistry partner
Possible Outcomes	• Improve dental health and hygiene • Reducing absences for emergency dental care.	• Increase the number of students receiving annual dental exam. • Identify possible dental health concerns.	• Increase the number of students receiving annual dental exam. • Treat dental health concerns. • Reduce emergency care visits. • Increase use a dental health services provided by insurance.

Action step 1			
Topic	Prevention	Screening	Intervention
School Partner			
Community Partner			
Possible Outcomes			

Health Services

Action step 2			
Topic	*Prevention*	*Screening*	*Intervention*
Dental Health			
School Partner			
Community Partner			
Possible Outcomes			

Resources

School-Based Health Alliance: Covid-19 Resources

New York School-Based Health Alliance: https://nysbha.org/

New York State Association of School Nurses: https://nysasn.org/

Virtual Healthy School - https://www.cdc.gov/healthyschools/vhs/index.html

Return to School Guidance

New York State Guidance: Recovering, Rebuilding, and Renewing, The Spirit of New York's Schools; Reopening Guidance

American Academy of Pediatrics: COVID-19 Planning Considerations: Guidance for School Re-Entry

Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

Centers for Disease Control and Prevention: Preparing K-12 School Administrators for a Safe Return to School in Fall 2020

Counseling, Psychological and Social Services

Overview of the component

This component includes the prevention and intervention services supporting the mental, behavioral and social-emotional health of students. Services include direct and indirect interventions to address psychological, academic, and social barriers to learning. Services might include psychological, psychoeducational, and psychosocial assessments; direct and indirect interventions to address psychological, academic, and social barriers to learning, such as individual or group counseling and consultation; and referrals to school and community support services. Similar to health services, this component includes the prevention,

screening and intervention services provided by a range of personnel and certified staff including a school counselor, school social worker or school psychologist. This component is closely connected with school climate, health services, and health education. Counseling, Psychological, and Social Services is a component that relies on school and community partnerships as to meet students' needs.

One of the ways we encourage all school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets. This framing, or lens,

ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting counseling, psychological and social services.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.

(ASCD, http://www.ascd.org/whole-child.aspx)

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school culture supports and reinforces the health and well-being of each student.
	Our school integrates health and well-being into the school's ongoing activities, professional development, curriculum and assessment practices.
	Our school facilitates student and staff access to health, mental health, and dental services.
Safe	Our teachers and staff develop and implement academic and behavioral interventions based on an understanding of child and adolescent development and learning theories.
Supported	Each student has access to school counselors and other structured academic, social, and emotional support systems.
	Every member of our school staff is well qualified and properly credentialed.

Considerations for Counseling, Psychological, and Social Services

The return to school within a global pandemic has increased challenges, stress, anxiety and worry in our students, staff, families and communities. The evolving landscape and changing conditions of the return to school required a shift in mental health practices and the use of technology to provide supports and services. A comprehensive approach to Counseling, Psychological and Social Services will provide a network of prevention, screening and interventions to support student needs.

A Multi-tiered System of Supports (MTSS) of prevention (Tier 1), early intervention

(Tier 2) and treatment (Tier 3) can help determine the wide scope of potential services and increasing needs in a school setting. MTSS may help a school examine the referral system so staff and caring adults are able to share concerns as students receive support and services.

The chart on the next page will help you identify some of the prevention, screening and interventions from health services around COVID-19. In the Tier 1 column identify actions or priorities in each of the identified areas (provide additional areas if needed). "Partners" identify the within-

school personnel and/or community partners involved in the Tier 1 activities. The community partner represents partners or possible partners outside of the school who could assist or support this service. After completing the partners section, identify the potential outcomes that could result from these efforts. Tier 2 and Tier 3 provide space to identify existing and potential resources as well as school/community partners that support these efforts. This activity should be done in consultation with your counseling, psychological and social service partners.

Counseling, Psychological and Social Services

Prevention and Screening (Tier 1)	Mental Health & Wellness Education	Social Emotional Learning	Building Relationships	Screenings & Referrals
	Action we could take:	Action we could take:	Action we could take:	Action we could take:
	Considerations for in-person scenario:	Considerations for in-person scenario:	Considerations for in-person scenario:	Considerations for in-person scenario:
	Considerations for at-home scenario:	Considerations for at-home scenario:	Considerations for at-home scenario:	Considerations for at-home scenario:
	Partnership opportunities:	Partnership opportunities:	Partnership opportunities:	Partnership opportunities:

1. 1. What are some early intervention (Tier 2*) opportunities for us?

2. What are some treatment (Tier 3**) opportunities for us?

3. What does our referral & communication system include?

4. How do staff reach out to students in need?

5. How do we ensure the staff have mental health support?

Counseling, Psychological and Social Services

Component resources

National Center for School Mental Health:
http://www.schoolmentalhealth.org/COVID-19/

American School Counselor Association:
https://www.schoolcounselor.org/school-counselors/professional-development/learn-more/covid-update

National Association for School Psychologists:
https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center

School Social Work Association of America:
https://www.sswaa.org/covid-19-resources

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Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

Centers for Disease Control and Prevention: Preparing K-12 School Administrators for a Safe Return to School in Fall 2020

*Tier 2 Activities are mental health early interventions support students who have been identified through a systematic, equitable process as experiencing mild distress, mildly impaired functioning or as at-risk for a given problem or concern. Examples include small group interventions, brief individualized interventions, mentoring and/or low-intensity classroom-based supports.

**Tier 3 or mental health treatment address mental health concerns for students who are already experiencing significant distress or impaired functioning. Tier 3 supports include services provided by health professionals employed by the school or community organizations.

Social and Emotional Climate

Overview of the component

Social and Emotional Climate means providing a safe and supportive learning environment and the psychosocial aspects of students' educational experience that influence their social and emotional development. Social and Emotional climate is an expansive category that includes a Multi-Tiered System of Supports (MTSS) within Positive Behavior Interventions and Supports (PBIS) and social-emotional learning. Social-emotional learning is the instructional process to acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions. This guide assumes that the reader is familiar with the basics of PBIS and school climate.

The social and emotional climate of a school can affect student engagement in school activities; relationships with other students, staff, family, and community; and academic performance. Connectedness, or a students' resiliency as well as their feelings of belonging, engagement, safety and support, contribute to a positive learning environment and effective teaching and learning. The strategies, concepts, and principles for school climate transfer across learning environment.

Considerations for Social and Emotional Climate

While Social and Emotional Climate is an expansive component, we have narrowed the focus to four areas:

- Building relationships: Initiatives and strategies to develop positive student-student and teacher-student relationships.
- Emotionally safe environment: Prioritizing a social and emotionally safe, supportive, and predictable learning environment, including trauma-informed practices.
- Promoting Positive Behaviors: Developing norms, routines, expectations and strategies to promote positive behaviors.
- Social-emotional learning: The instructional process to acquire and effectively apply the knowledge, attitudes and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.

Another aspect of social and emotional climate is each student's support system. Consider how you might refine the system that connects teachers with additional supports and resources for students in need.

One of the ways we encourage school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets. This framing, or lens, ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting social and emotional climate.

> The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.
> *(ASCD, http://www.ascd.org/whole-child.aspx)*

Social and Emotional Climate

From ASCD's [School Improvement Tool](#)

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school culture supports and reinforces the health and well-being of each student.
Safe	Our physical, emotional, academic, and social school climate is safe, friendly and student-centered. Our school teaches, models, and provides opportunities to practice social-emotional skills including effective listening, conflict resolution, problem solving, personal reflection and responsibility, and ethical decision-making Our school provides our students, staff, and family members with regular opportunities for learning and support in teaching students how to manage their own behavior and reinforcing expectations, rules, and routines.
Engaged	Our school policies and climate reinforce citizenship and civic behaviors by students, family members, and staff and include meaningful participation in decision-making.
Supported	Our school ensures that adult-student relationships support and encourage each student's academic and personal growth. All adults who interact with students both within the school and through extracurricular, co-curricular, and community-based experiences teach and model prosocial behavior.

Climate & Culture *(behavior and relationship building)*					
Instruction Format	In-School Learning *(limited restrictions)*	In-School with Physical Distancing	Blended *(online & in-person)*	Distance Learning Synchronous	Distance Learning Asynchronus
Building Relationships					
Student-student					
Teacher-student					
Creating a Sense of Belonging					
Emotionally Safe Environment					
Promoting Positive Behaviors					
Social-Emotional Learning					

Directions: Above is a chart to help schools consider how to create a positive school climate across the possible learning environments. The purpose of the chart is not only to prioritize relationships, emotionally safe environments, positive behaviors, and social-emotional learning, but also to identify opportunities to make connections across the learning environments. The intent is not to create a new system for school climate, but to carefully consider the opportunities and priorities across the learning environments. For example, how might the instructional areas of health and physical education reinforce consistently healthy messages?

Social and Emotional Climate

Creating a positive school climate will…

How could we engage staff, families, and community to create a positive school climate within the whole school?

Are there genuine opportunities to connect to other components outlined in this document?

What resources, materials, and professional development are needed to support your initiative?

How will you effectively communicate the change in a way that increases buy-in?

Component Resources

PBIS Maryland: http://www.pbismaryland.org/resources/COVID-19-and-Remote-Learning

Center on PBIS: https://www.pbis.org/announcements/4-resources-to-support-students-during-the-pandemic

Pennsylvania Department of Education: Promoting Positive Learning Climates Online and at Home

Sanford Harmony: Sanford Harmony Social-Emotional Learning Curriculum

Return to School Guidance

New York State Guidance: Recovering, Rebuilding, and Renewing, The Spirit of New York's Schools; Reopening Guidance

American Academy of Pediatrics: COVID-19 Planning Considerations: Guidance for School Re-Entry

Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

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Physical Environment

Overview of the component

Physical Environment includes the physical space in and around the school building, as well as physical safety broadly. Healthy physical spaces include access to safe walking and biking spaces, access to safe drinking water, adequate lighting, ventilation and good air quality free of mold, dust, mildew and other toxins. A safe environment also considers other threats to the school environment such as violence, crime, traffic injuries and response to natural disasters and other emergencies.

During a pandemic, the safety of the physical environment is one of the highest priorities for school leaders. Examples of this includes physical distancing while in school and adequate handwashing facilities. There is a lot to consider when we look at preventative measures against COVID-19 and this section will share resources and links to help guide your school as you establish safe policies, practices and procedures locally.

There is a long list of tasks to get a school building safely ready for students during a non-pandemic year, so it may feel overwhelming to implement everything. This document will help you think through the items you are able to complete now, or items that may be prioritized for later. You will see a diagram that shows the intersections of variables that impact each other. One of the ways we encourage school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets. This framing or lens ensures that our students are still achieving academically, however, we consider that they they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting a safe physical environment.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.

(ASCD, http://www.ascd.org/whole-child.aspx)

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school facility and environment support and reinforce the health and well-being of each student and staff member.
Safe	Our school building, grounds, playground equipment, and vehicles are secure and meet all established safety and environmental standards.
	Our school's physical plant is attractive; is structurally sound; has good internal (hallways) and external (pedestrian, bicycle, and motor vehicle) traffic flow, including for those with special needs; and is free of defects.
	Our physical, emotional, academic, and social school climate is safe, friendly, and student centered.
Engaged	Our school policies and climate reinforce citizenship and civic behaviors by students, family members, and staff and include meaningful participation in decision making.

Considerations for Returning to School

Depending on what model your school looks like, in-person with social distancing practices in place, hybrid and/or remote learning, the physical environment plays a role in two of these.

If students are all in school remotely, the school building may be used for staff. In this case, similar safety procedures as if students were in school should be followed.

The physical environment, including policy and systems is a crucial factor in creating a healthy, safe and supportive space for students and staff.

Physical Environment

Consider the following...

- In my setting, how do the 5 ASCD tenets (healthy, safe, engaged, supported and challenged) impact each other within my school related to physical environment?

- After reviewing this document, what are two actions (policy, procedures, practices, activities) you will do to support healthy physical environments?

Asset(s)	Barrier(s)

- What resources, professional development or assistance do you need for this action?

My Action Plan

What can I implement today?	
Who can I collaborate with to support these efforts?	

What can I implement in a month?	
Who can I collaborate with to support these efforts?	

What can I implement in three months?	
Who can I partner with to support these efforts?	

Resources

American Academy of Pediatrics: COVID-19 Planning Considerations: Guidance for School Re-Entry

New York State Guidance: Recovering, Rebuilding, and Renewing, The Spirit of New York's Schools; Reopening Guidance

Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

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Employee Wellness

Overview of the component

Employee Wellness, including self-care, focuses on the health and well-being of school staff, including teachers, administrators, custodial, nutrition services, and support staff. Teaching is one of the most stressful jobs in the United States. According to a national survey, nearly half (46%) of teachers report high daily stress- tied with nurses and higher than physicians.[1] High stress at work affects teachers' health and is linked to poor teacher and student performance, lack of engagement with work, compassion fatigue, and contributes to higher burnout and turnover. There are a number of sources of stress for teachers and school staff, but vicarious trauma- a secondary trauma that occurs when people are exposed to a number of experiences of trauma through their work- is a central issue. Even prior to COVID-19, educators were becoming first responders to

situations like violence and school safety issues. The mental and emotional toll on our educators is significant.

During COVID-19, there is heightened stress and anxiety related to reopening schools, personal safety and students' health and safety. School leaders can play an essential role in creating a culture of health and safety for their employees. NPR recently released this story about teachers concerns as it related to COVID-19. OEA Choice Trusts' Blueprint for School Employee Wellness describes a 6-step process to creating a systemic, sustainable change in your school or district. Employee wellness while focused on the adults who support children, can have a positive impact on the Whole Child by ensuring students are healthy, safe, engaged, challenged, and supported even during a pandemic. One of the

ways we encourage all school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets. This framing or lens ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting employee wellness.

> The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.
>
> *(ASCD, http://www.ascd.org/whole-child.aspx)*

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school facility and environment support and reinforce the health and wellbeing of each student and staff member.
	Our school facilitates student and staff access to health, mental health, and dental services.
Safe	Our school building, grounds, playground equipment, and vehicles are secure and meet all established safety and environmental standards.
	Our school upholds social justice and equity concepts and practices mutual respect for individual differences at all levels of school interactions— student-to-student, adult-to student, and adult-to-adult.
Engaged	Our school policies and climate reinforce citizenship and civic behaviors by students, family members, and staff and include meaningful participation in decision making.
	Our school supports, promotes, and reinforces staff professional development in the area of student engagement (both extracurricular and cocurricular).
Supported	Our school ensures that adult–student relationships support and encourage each student's academic and personal growth.

[1] Gallup (2014). State of American Schools.
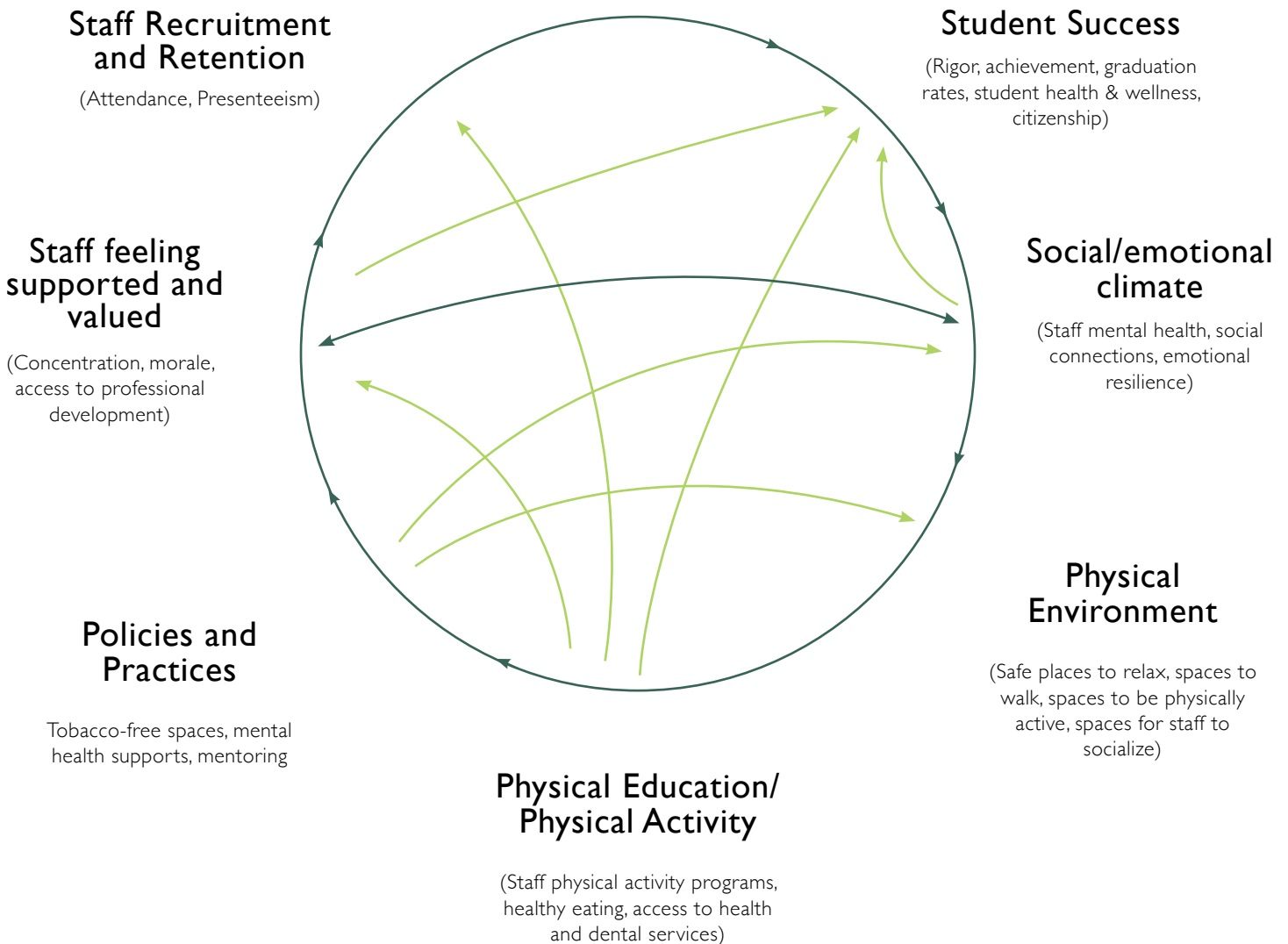
Employee Wellness

Systems Thinking & Our Local Considerations

A systems-thinking approach to implementing the procedures and policies in the resources above will help education leaders thoroughly consider how one decision impacts another. When a consistently healthy message is sent through all of the policies, programs, & processes of a school community, it reinforces the message that focusing on employee wellness is a priority.

This connections circle below demonstrate how different variables impact each other to foster a healthy, resilient school culture.

For example, when staff feel supported and valued, it impacts student success. When health policies and practices are in place, the physical environment is safer. The social emotional climate and staff perceptions of feeling supported and value impact student connection to school and their achievement as well. Staff feeling supported & valued paired with the social emotional climate may impact each other as well, causing a reinforcing loop within this diagram.

Employee Wellness

Staff Recruitment and Retention
(Attendance, Presenteeism)

Student Success
(Rigor, achievement, graduation rates, student health & wellness, citizenship)

Staff feeling supported and valued
(Concentration, morale, access to professional development)

Social/emotional climate
(Staff mental health, social connections, emotional resilience)

Policies and Practices
Tobacco-free spaces, mental health supports, mentoring

Physical Environment
(Safe places to relax, spaces to walk, spaces to be physically active, spaces for staff to socialize)

Physical Education/ Physical Activity
(Staff physical activity programs, healthy eating, access to health and dental services)

Employee Wellness

Consider the following...

Looking at the connections on the previous page, how might you support employee wellness by promoting. healthy individual behaviors, support consistently healthy policies and practices, create a healthy school climate and environment and genuinely support self-care?

Directions: In the table below, read the 3 questions and on the right side of the table, consider what you are doing related to relationships to leverage and encourage those connections to support employee wellness.

Consider the following relationships…	What you are doing to leverage and encourage them:
Staff to staff relationship-building and support?	
Leadership to staff relationship-building and support?	
Staff to family relationship-building and support?	

Resources

OEA Choice Trust- https://oeachoice.com/school-employee-health-and-wellbeing/

Kaiser Permanente; Thriving Schools -
https://thrivingschools.kaiserpermanente.org/get-inspired/coronavirus-response/schools-reopening-playbook/

Family Engagement

Overview of the component

Families and school staff working together to support and improve the learning, development, and health of students. Family engagement includes a variety of meaningful activities and supports. Families are important partners in implementing a whole-child approach in schools, many of the components rely on family engagement. Family representatives should be included on school teams implementing a whole-child approach. They provide valuable insights, identify priorities and provide perspectives and cultural considerations. All families should have the opportunity to provide feedback on the school's whole-child practices and programs each year. Engagement activities may include family resources such as support groups, parent education, emergency assistance, social and health services. School Wellness Councils are one of the key ways to engage community partners.

One of the ways we encourage school educators and leaders to frame their decisions and strategies around family engagement is through ASCDs Whole Child Tenets, a framework that helped inform the New York City Department of Education's Wellness Policy.

This framing or lens ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting family engagement.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.

(ASCD, http://www.ascd.org/whole-child.aspx)

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	Our school collaborates with parents and the local community to promote the health and well-being of each student.
Engaged	Our school policies and climate reinforce citizenship and civic behaviors by students, family members, and staff and include meaningful participation in decision making.
Supported	Our school uses a variety of methods across languages and cultures to communicate with all families and community members about the school's vision, mission, goals, activities, and opportunities for students. Our school helps families understand available services, advocate for their children's needs, and support their children's learning. Our school staff welcome and include all families as partners in their children's education and significant members of the school community.
Challenged	Our school works with families to help all students understand the connection between education and lifelong success.

Family Engagement

Considerations for Family Engagement

Family engagement is a component that is connected with other components, topics, and supports. Families are critical partners in promoting healthy behaviors and a healthy school. Behaviors such as mask wearing, hand washing, and respiratory etiquette (covering coughs and sneezes) are prioritized for the school and community. Establishing clear and ongoing communication is a proactive and effective strategy to develop shared understanding of expectations, best practices, and supports to promote adoption of these healthy behaviors. Complete the questions below to consider some action steps around engaging families.

One action step we might want to consider to engage families:

What is the essential information about the action/behavior that we need to share? (Guidelines, tips, key cues)

What is the school's plan to support the action/behavior?

How can the school ensure we are communicating effectively to families (through a variety of ways, translated communications, etc.)

Developing a culture or normalizing the action/behavior encourages the healthy behavior at home, school, and in the community. Describe your strategies to support and the behavior in the school community through communication, posters, public relations, newsletters and social media.

Resources

Practitioner Toolkit: Building a "Mask Culture"

Return to School Guidance

- New York State Guidance: Recovering, Rebuilding, and Renewing, The Spirit of New York's Schools; Reopening Guidance

- New York School-Based Health Alliance: https://nysbha.org/

- American Academy of Pediatrics: COVID-19 Planning Considerations: Guidance for School Re-Entry

- Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

- Centers for Disease Control and Prevention: Preparing K-12 School Administrators for a Safe Return to School in Fall 2020

- National PTA: Coronavirus Resources

Community Involvement

Overview of the component

Community Involvement includes all of the ways that local government, university, businesses, health care organizations, clinics and providers, non-profit organizations, faith communities, culturally specific groups and others partner with a school to support the health and well-being of students and staff.

Partnerships take different forms from networking and exchanging information to a collaborative partnership including opportunities to exchange information, alignment of activities, sharing resources and enhanced capacity. The power of partnerships can be found leveraging and maximizing resources, improving outreach and support, minimizing duplication of efforts, generating support and increasing the scope of the effort. Partnerships take time, trust and energy to develop from a potential partnership to an established partner. School Wellness Councils are one of the key ways to engage community partners.

During COVID-19, there should be continued opportunities for schools to leverage their community partnerships and possibly generate new partnerships. One of the ways we encourage school educators and leaders to frame their decisions and strategies is through ASCDs Whole Child Tenets. This framing, or lens, ensures that our students are still achieving academically, however, we consider that they are also *safe*, *healthy*, *engaged*, *challenged* and *supported*, even during a pandemic. Below is a table that lists the indicators supporting community involvement.

The ASCD Whole Child approach is an effort to transition from a focus on narrowly defined academic achievement to one that promotes the long-term development and success of all children.

(ASCD, http://www.ascd.org/whole-child.aspx)

From ASCD's School Improvement Tool

Whole Child Tenet	ASCD School Improvement Indicator
Healthy	The school collaborates with parents and the local community to promote the health and well-being of each student.
Safe	The school upholds social justice and equity concepts and practices mutual respect for individual differences at all levels of school interactions— student-to-student, adult-to student, and adult-to-adult.
Engaged	The school offers a range of opportunities for students to contribute to and learn within the community at large. The school establishes formal partnerships to provide learning opportunities that address community issues and concerns. The school intentionally partners with community agencies to provide experiences to address equity gaps in accessing curriculum related experiences.
Supported	The school collaborates with community partners to promote positive adult–student relationships within and outside of schools. The school uses a variety of methods across languages and cultures to communicate with all families and community members about the school's vision, mission, goals, activities, and opportunities for students.
Challenged	Our physical, emotional, academic, and social school climate is safe, friendly, and student centered.

Community Involvement

Considerations for Community Involvement

When thinking through community involvement & partnerships during a pandemic, consider who (organizations, agencies, people, businesses) might be able to support your reopening and sustainable healthy and safe school settings through the lens of the other nine Whole School, Whole Community, Whole Child Components (WSCC). The WSCC framework offers a systemic structure to consider the health and well-being of a school community. An example may be working with a local public health department to purchase fever scanners, or leveraging an existing partnership with a local store who may be able to supply packaging to send breakfast and lunches home or offer as a pick-up and go option.

Below, select a few goals or actions related to engaging the community. Brainstorm the community partner opportunities and what next steps you have. You could even identify which of the other nine WSCC components the goal/action fits under. See the example below.

Goal/Action	Partnership Opportunity	Contacting Partner/Next Steps
Make face masks accessible to all students. *WSCC Component: Health Services*	*Local Hospital or Health Care Systems*	*See if anyone on our School Health Advisory Council has a relationship with local hospital.*

Resources

American Academy of Pediatrics: COVID-19 Planning Considerations: Guidance for School Re-Entry

New York State Guidance: Recovering, Rebuilding, and Renewing, The Spirit of New York's Schools; Reopening Guidance

Harvard School of Public Health: Schools for Health; Risk Reduction Strategies for Reopening Schools

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