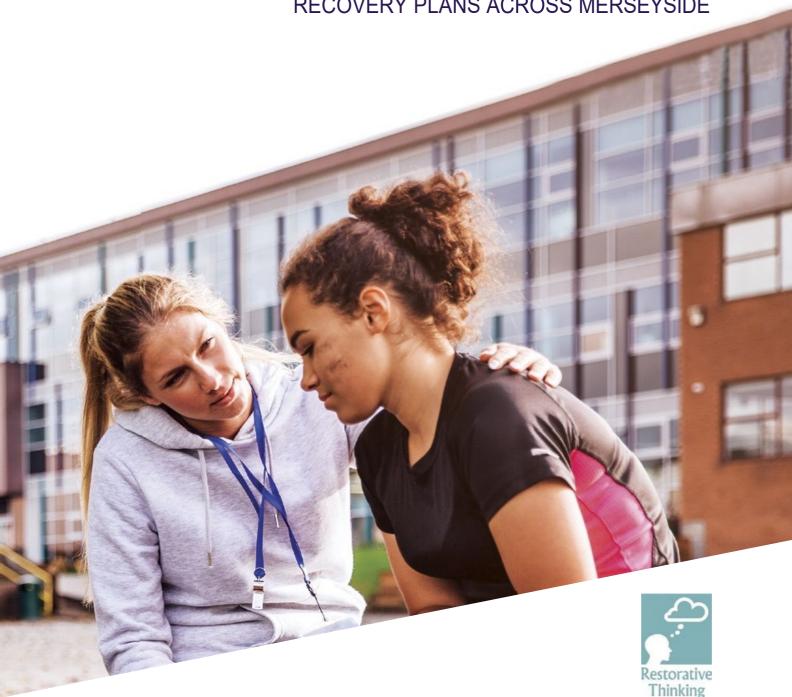


TRAUMA INFORMED APPROACHES FOR VULNERABLE PUPILS

SUPPORTING COVID19 SCHOOL RECOVERY PLANS ACROSS MERSEYSIDE



This Guidance has been produced as part of Restorative Thinking's delivery of the Merseyside Violence Reduction Partnership project:

TRAUMA-INFORMED STRATEGIC SUPPORT FOR SCHOOLS

This document provides an overview, and some detail, of what happened through the project, detailing challenges and successes, and the learning that took place.

The intended audience of this guidance includes Merseyside VRP partners, schools that took part in the project, schools across Merseyside and further afield.



ABOUT THE AUTHORS

Restorative Thinking is a Social Enterprise providing training, coaching, consultation, intervention programmes and evaluation in the fields of restorative and relational practice. The directors, Lesley Parkinson and Chris Straker, work with Police and Crime Commissioners, Local Authorities, Children's and Adult Services, Prisons and Probation Services.

Restorative Thinking is a restorative organisation, holding the Restorative Service Quality Mark (RSQM) and the Training Provider Quality Mark (TPQM); most recently (November 2018) awarded, with Liverpool City Council, the i-Network Innovation Award for 'Transforming and Innovating Public Services' for a two year pilot with Children's Services, introducing and implementing whole school restorative practice with Liverpool primary, secondary and special schools.



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MERSEYSIDE VRP PROJECT PROVIDING TRAUMA-INFORMED STRATEGIC SUPPORT FOR SCHOOLS

This project set out to support mainstream educational establishments in strategically responding to their most vulnerable young people who have experienced disadvantages during the Covid-19 pandemic using a trauma-informed approach.

The project has drawn on key research, theory and evidence of Adverse Childhood Experiences (ACEs) and trauma-informed practice to consider, with each school, a Recovery Plan to support the most vulnerable pupils, specifically those affected by the COVID-19 pandemic.

As part of their trauma-informed response, schools were encouraged to draw on restorative and relational practice, using deliberate language and behaviours to foster the right conversations with children and teenagers.

Restorative Thinking's engagement and input with each school was needs-based and was dependent on Covid-related factors such as restrictions with regard to:

- an external trainer visiting a school to deliver training;
- staff absence, often due to testing positive for Covid-19;
- balance of Continuing Professional Development (CPD) needs versus potential for staff burnout.

The Restorative Thinking team were able to respond to changing needs and work closely with schools to ensure training sessions were arranged at times to fit in with wider schedules and took place face to face or virtually via Zoom or Microsoft Teams.

There was also the opportunity for key members of staff to have telephone conversations and e-mail communication as often as necessary to unpick cases to help refine restorative practice principles and skills.

Some schools paused their traditional CPD programme of direct training/coaching and instead opted for written guidance and/or an overview of a particular school policy.

The e-Learning course on offer also helped schools fulfil their CPD obligations with staff in flexible ways and schools were grateful of a short course that could be accessed on a date and at a time that suited individuals.

CHRONOLOGY OF EVENTS

- SEPTEMBER 2020: Open 2-day training event to explore ACEs, trauma-informed practice and restorative practice;
- SEPTEMBER 2020: Literature Review created to signpost information and resources of ACE and trauma-informed practice, particularly with relevance to Covid-19. This became a 'working' document with Merseyside VRP, schools and Restorative Thinking updating the review;
- SEPTEMBER 2020: Consultation with each school to identify their intended outcomes from this project and to formulate a 'Recovery Plan';
- OCTOBER 2020: Restorative Thinking's e-Learning course: 'Restorative Practice and the Return to School' adopted by four project schools.
- OCTOBER DECEMBER 2020: Minimal face to face training; strong take-up of targeted zoom training and coaching sessions; e-mail and telephone consultation;
- JANUARY MARCH 2021: Open zoom sessions around Covid-19 themes; short written guidance; individual school zoom training/coaching; telephone, e-mail consultation;
- MAY 2021: Intended date for publication of Guidance document.

SCHOOLS TAKING PART

Kirkby High School*

St Edmund Arrowsmith Catholic High School*

Sacred Heart Catholic High School

Holy Spirit Primary School

Birkenhead Park School*

Mosslands School*

New Heights School(PRU) Primary/Sec – SEM

Woolton High School – Secondary – Special SEMH

St Cuthbert's Catholic High School

Cowley International College

^{*} Schools with an asterisk also took part in MVRP's Intensive Mentor programme for those on the cusp of permanent exclusion, delivered by Merseyside Youth Association.

TRAUMA-INFORMED PRACTICE

Trauma-informed practice in schools seeks to address the barriers to engagement and learning that those affected by trauma can experience. A trauma-informed school is able to engage with, and respond to, children and teenagers who suffer with trauma and/or mental health problems.

A key part of this project has been increasing the understanding and confidence of school staff to work effectively with children impacted by trauma and adversity. The detail is in the quality of relationships that staff have with children, young people, teenagers.

Relationships matter and every contact with someone who has experienced adversity and trauma can be an opportunity for healing and growth. We have explored the importance of taking time to actively listen to children and young people, understand what lies behind the behaviour/s they present with, and avoid jumping to conclusions, making assumptions or offering solutions.

Working in a trauma-informed way does not mean asking children and young people about their experiences of trauma; it is an understanding of the impact of trauma on the brain and body; how this manifests in day to day behaviours; how best to respond. To work in an adversity and trauma-informed way is to be sensitive to the wider context of the person's life, and how this impacts them, and any guidance and support we might be able to give them.

Examples of trauma-informed practice that have been part of this project include:

- Providing teachers with information about how best to engage with children/ young people to help regulate their emotions and build positive relationships. This includes helping children to identify their emotions and to check-in with themselves and others around them; to get acquainted with how they and their peers react to situations;
- Assessing and revising school policies and practices that may re-traumatise or trigger anxiety or aggression in students (such as student isolation practices);
- Providing staff with self-care strategies to help them respond to their experiences working with children impacted by adversity or trauma;
- Encouraging staff to recognise students' strengths and help students develop their own relationship and learning goals.

¹ The Impact of Enhancing Students' Social and Emotional Learning: A Meta-Analysis of School-Based Universal Interventions, J A Durlak, A B Dymnicki, R D Taylor, R P Weissberg and K B Schellinger

TRAUMA

Trauma refers to the way that some distressing events are so extreme or intense that they overwhelm a person's ability to cope, resulting in lasting negative impact. The sorts of events that traumatise people are usually beyond the person's control.

The term 'Complex Trauma' is often used to describe the experience of multiple, chronic, and prolonged, developmentally adverse traumatic events. These traumatic events often occur within the child's caregiving system and include physical and emotional abuse, neglect and child maltreatment beginning in early childhood.²

Children may also experience trauma or adversity by observing family violence, parental separation, having a parent incarcerated or with a mental illness, or due to grief from the loss of a loved one.

A strong body of evidence shows that trauma can affect brain structures linked to learning, and the control of emotions and behaviour. These effects can make it difficult for children to engage with learning, make friends and develop positive relationships with teachers.

Trauma and adversity can also disrupt children's impulse control in the classroom and on the playground.³

Children and young people affected by trauma can become highly sensitive to subtle (as well as obvious) reminders of their previous traumatic experiences and relationships. Such reminders, and the distress that they cause, is another reason why people affected by trauma sometimes find it difficult to engage with the care, support and interventions that they need.

Typical problems caused by coping mechanisms for those experiencing trauma are:

- Limited self-awareness and ability to reflect;
- Development of negative core belief;
- Limited vulnerability and creativity;
- Creating a crippling need to compare;
- Inability to relate to connect with others.

² UK Trauma Council

³ Post traumatic growth among children and adolescents: A systematic review, D A Meyerson, K E Grant, S C Ryan, P Kilmer

Changes to the brain as a result of the trauma can lead a child/young person to become hypervigilant, or highly alert to threat (or perceived threat) around them.

This can create a number of difficulties for children, including:

- Memories that may be so vivid and immersive that they take the form of a flashback where the person loses touch with the here and now and feels that they are re-experiencing the actual event rather than simply recalling a memory.
- Higher levels of physiological arousal; we know that traumatised children may struggle to sleep, they may be jumpier, or they may lose their temper more easily than their peers.
- Intrusive memories and sensations that can be very frightening, unpleasant and overwhelming; many young people make a lot of effort to avoid thinking about the traumatic experiences they have had.

It is important to note that whilst children are negatively impacted by trauma, some can also experience post-traumatic growth in which their experience of trauma leads to learning more about themselves and their strengths. This project sought to create more opportunities for teachers to identify trauma and aim to guide children/young people towards post-traumatic growth.

Restorative Thinking asked schools to consider every interaction with a child/ young person as an opportunity for learning more about the children; and each other; this in turn slowly and gradually strengthens our relationships and creates the potential for every member of a school to feel safe and to increase their capacity to thrive.

ADVERSE CHILDHOOD EXPERIENCES (ACEs)

The project invited schools to enhance their knowledge and understanding around Adverse Childhood Experiences (ACEs). ACEs are highly stressful events or situations that occur during childhood and/or adolescence. ACEs can be a single event or incident, or prolonged threats to a child or young person's safety, security or bodily integrity. ACEs include: verbal abuse, physical abuse, sexual abuse, parental separation, mental illness, domestic violence, emotional neglect, physical neglect, alcohol abuse, drug abuse and incarceration.

They can also include other lived experiences: Covid-19; racial abuse; homophobia; socio-economic deprivation.

TYPES OF CHILDHOOD ADVERSITY



These experiences directly affect the young person and their environment, and require significant social, emotional, neurobiological, psychological or behavioural adaptation. Young people make these adaptations in an attempt to survive in their immediate environment and find ways of mitigating or tolerating the distress they are facing by using the resources available to them to establish a sense of safety or control, or to make sense of the experiences they have had.

Their reactions and responses may change and develop over time. In very broad terms, we can think about these reactions as taking one of four paths, or what we might call trajectories. These four paths are:

- RESILIENT: little impact on the person's level of distress or ability to cope with the situation - either immediately after the event(s), or later on;
- RECOVERY: initially the person may be very distressed, and really struggle to cope. Over time this decreases, and they begin to manage again;
- DELAYED: at first there may be little obvious impact of the events, but at a later stage difficulties and distress begin to develop;
- ENDURING: people experience difficulties and distress during, or soon after, the events and they remain.⁴

We should see people's reactions and responses to adverse and traumatic events as attempts to survive and make meaning in their lives.

It is important to consider that not all young people who face childhood adversity go on to develop trauma-related symptoms, or wider mental health problems.

Almost half of all adults living in the UK have experienced at least one form of adversity in their childhood or adolescence.



VULNERABILITY

As children returned to school in September 2020 following long periods of absence, there was a need to be mindful that the isolation brought about by Covid 19 lockdown may in itself have been traumatic for pupils.

The unseen link between childhood trauma and later mental health problems is called Latent Vulnerability. The word 'latent' refers to something that exists but is not yet obvious, while the word vulnerability means more likely to be harmed. So Latent Vulnerability means that a child is at greater risk of harm than may be immediately obvious to carers or professionals.

Whilst Latent Vulnerability is cause for concern, it does not automatically determine anyone's future. The brain can adapt and respond equally to new positive experiences from childhood into early adulthood and there are many windows of opportunity to help children move onto a resilient path.

Children – and their brains – adapt to survive. When a child grows up in an environment where there is abuse and neglect, their brains will be shaped by those experiences. These brain changes may not lead to an immediate mental health problem. Rather, they may help the child survive in that adverse environment.

However, these same changes may make a child more vulnerable to developing mental health problems in future everyday environments. In part, this is because the brain changes can affect a child's ability – and opportunities – to cultivate and maintain social relationships with others.

Childhood trauma is associated with a heightened response to threat cues in the amygdala. The amygdala is a small almond- shaped structure deep inside the brain that responds to salient aspects of our environment. Changes in the threat system may reflect adaptation to childhood trauma. This may show itself, further, in the following:

- Struggling to pay attention to other things making it harder to learn, and develop other important skills.
- An increased intensity in their interactions with others.
- Reduced ability to regulate emotions.
- Finding everyday challenges and stressful events harder to manage than their peers.
- Increased reactivity to social rejection.
- Withdrawing or feeling anxious even in safe environments, reducing opportunities to learn new things and build relationships.
- An increased risk of symptoms of anxiety and depression.

RESTORATIVE PRACTICE

A proven strategy to help improve relationships, attendance and attainment at schools is Restorative Practice (RP). Restorative practice places a focus on our language and behaviours, leading to key conversational skills that help children and teenagers to process their experiences in school.

"We are relational beings and trauma impacts our ability to relate with each other."

Gwynn Raimondi

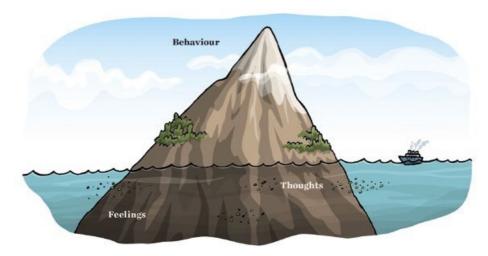
Restorative practice is a social science that studies how to improve and repair relationships between people and communities. The purpose is to build healthy communities, increase social capital, decrease crime and antisocial behaviour, repair harm and restore relationships.

Restorative practice supports, and is supported by, trauma informed practice; they are not mutually exclusive. This project has allowed us to merge these complementary practices (restorative and trauma-informed) to bring about positive outcomes for children, young people, teenagers, staff and Senior Leadership Teams.

Restorative practice provides a context in which equality, equity, tolerance and active listening thrive and where all parties can develop the skills and practices to discuss positive and negative experiences as individuals and communities. It provides a scaffold to allow complex conversations to be explored and emotions to be expressed safely.

The key elements are:

- 1. Being a **good listener**;
- 2. Talking comfortably about thoughts and feelings;
- 3. Considering behaviour as communication and knowing how to respond;
- 4. Understanding how we are all 'wired', to **better understand** and **communicate** with each other; and
- 5. Understanding how to prevent and manage conflict.



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Restorative practice also acknowledges that what we are thinking affects how we are feeling and this impacts on our behaviour. Behaviour is the part we can see and it's the part we usually react to; the more we can notice our own thoughts and feelings, the more self-aware we become. We start to develop the ability to understand the thoughts and feelings of other people, which may have been hidden from us up to that point.

Restorative practice uses a set of questions that are designed to support an understanding of the interplay between thoughts, feelings and actions. We call these questions 'Restorative Enquiry'. These questions can be used to discuss a situation where a person may have been harmed and, equally, where a person wants to discuss something positive. They can deal with the past and the present, dependent on need.

The questions are as follows:

- What happened?
- What were you thinking and feeling at the time?
- What have your thoughts and feelings been since?
- Who has been affected by what's happened?
- In what way/s have they been affected?
- What needs to happen to make things right/repair the harm/move forward?

"Relationships built through restorative practice are the oxygen people and communities need to survive and thrive..." 5

⁵ J M Longo Washington and Jefferson College.

LESSONS FROM THE PROJECT SCHOOLS

CHALLENGES

All projects present challenges, both expected and unexpected. The Covid-19 pandemic presented challenges with regard to restricting face to face training/coaching delivery with schools. There was also uncertainty created by the pandemic, and the impact this would have on how schools might prioritise operational issues above staff CPD.

Another challenge was the difficulty engaging with young people, to hear their voice directly. It wasn't possible during the course of the 6-month project to engage face to face with young people to hear about the challenges and successes they experienced due to the Covid-19 pandemic and to hear their insights to this project.

SUCCESSES

Schools recruited to the project by Merseyside VRP were mostly ready to engage in September 2020. Communication by Restorative Thinking was welcomed and key points of contact were able to schedule and attend training events; contribute to the Literature Review; work with the Restorative Thinking team to identify the most effective pathway for each school to support vulnerable children affected by the Covid-19 pandemic. Schools dedicated significant staff time to this project and found creative ways to engage with Restorative Thinking as pandemic restrictions and opportunities changed daily and weekly.

By December 2020 eight schools had their Recovery Plan in place and training had taken place in school and via zoom. Several schools identified a cohort of staff to join a series of tailored zoom sessions to explore ACEs, trauma-informed practice and restorative practice. Collaborative working with Restorative Thinking led to the best solutions and outcomes for each school. There was real enthusiasm of SLT and teachers to apply restorative practice to key issues, such as attendance (particularly Covid-19 school refusers); teaching and learning; behaviour strategies; and exclusions. A number of positive outcomes for vulnerable pupils during the Covid-19 pandemic have been observed, including at one school a reduction in permanent exclusions.

Schools benefited from the project through development in four key areas:

- Effective use of Recovery Plans;
- Individual pastoral support;
- Modifications to the curriculum; and
- Modifications to the school environment.

i. EFFECTIVE USE OF RECOVERY PLANS

Each school was invited to draw up a Recovery Plan to outline the strategies and practices being drawn on to support pupils through the Covid-19 pandemic. Through their Recovery Plans, schools identified key concerns affecting staff, pupils and parents/carers in the 2020 Autumn terms:

TEACHERS

- Safety.
- Behaviour.
- Learner engagement, especially at KS4.
- Attendance.
- Inconsistency.
- Student conduct and behaviour students quick to become angered, demonstrating aggression and hostility/refusal to engage in work tasks offered.
- Student apathy.
- Demographic area Poverty, a minority of parents and students placing little value on education.
- Hyperactivity of children.
- Relationship building with 'hard to reach' pupils.
- Lack of motivation and a loss of learning habits, particularly year 11.
- Delay in social and emotional maturity over lockdown.
- Increase in extreme behaviours and violence and aggression in serious incidents.
- Impact of continued Covid-related absence.
- Students who may be feeling isolation from their peers during lockdown.

PUPILS

- Worries about lost learning.
- Social isolation/Not seeing their friends.
- Their friends not responding to them through social media/falling out with friends.
- Concerns about the health of family members and what they can do to help keep their family safe.
- Not being able to mix.
- Lack of variety in lessons.

PARENTS/CARERS

- Concerns about the missed education of their children.
- Worries about the mental development of their children and the longer-term impact it may have on them (things they are missing out on, that they may not get the opportunity to do for a long time to come).
- Concerns about the pandemic and how best to keep their child/ren safe especially when their children may be head-strong and refuse to listen.
- Progress.
- Covid-19 anxiety.
- ADHD medication reviews.
- Ability to assist pupils with work.
- Children managing the transition back into school and cope with the increased level of challenge, social demands.
- Children happier at home.

In addition to listing the key concerns of teachers, pupils and parents/carers, each school's Recovery Plan also outlined their targets with regard to supporting vulnerable pupils through the Covid-19 pandemic; supporting data; a list of what was already in place towards the intended targets, along with support already in place.

Schools were also asked to consider how Restorative Thinking's input could help achieve the objectives of the Recovery Plan. Areas identified included:

- Upskilling staff increasing awareness of factors affecting behaviour and attendance for both teaching and non-teaching, pastoral staff.
- Conscience of the Relational Window and where this model fits in certain situations.
- Line of questioning when completing a restorative intervention.
- Understanding ACE's.
- To encourage RT-Lead staff to employ some of the RT classroom practice (e.g. Circles) offered through the e-learning training and apply it in their lessons.
- Improve self-esteem.
- Developing a person centred approach and trying to reduce the use of FTEs.
- Improve self-confidence.
- Using the RP questions framework to build positive relationships for praise and 'turnaround' conversations.

ii. INDIVIDUAL PASTORAL SUPPORT

Many project schools asked for 1:1 guidance and supervision with the Restorative Thinking team. Regular telephone and e-mail conversations took place to unpick how new learning was being put to use. School staff who engaged with this project were able to use the information and guidance around ACEs, trauma-informed practice and restorative practice to help navigate pupil pathways during the pandemic:

"In terms of Covid and relating it to trauma and meeting the child's needs, a beneficial part of the training was understanding trauma, ACEs and the fact that these need to be addressed before the pupil can achieve academically."

Matty Lynch, Kirkby High School

"Your comments about how to 'see beyond the behaviour' really resonated with my own feelings about how best to facilitate 'inner change'."

Martin Keenaghan, Woolton High School

"I have used this approach on a number of occasions. There was a child who had a meltdown in a lesson as he had been told off for not following instructions. He was sent outside and was refusing to co-operate.

I spoke to him, showing empathy and listened to how the child felt and showed understanding towards how he felt. I discussed the cause of it and how he could deal with it differently in the future." Case Study, Cowley International College

Clare Campbell, Director of Lower School at Sacred Heart Catholic High School, Sefton, reported a significant drop in the number of exclusions since using the approaches identified in the training: "There's an answer that we never had before." The SLT team now take 24 hours to consider alternatives to exclusion and share their ideas, often finding a different way to respond.

iii. MODIFICATIONS TO THE CURRICULUM

The Restorative Thinking team placed a focus on communicating the key areas of restorative practice that could be put to use immediately to support all pupils, including the most vulnerable children and young people. The aim was to introduce and explore the correlation between:

- ACEs and Trauma-Informed Practice;
- Circles:
- Behaviour as Communication;
- The Relational Window;
- Restorative Enquiry (including emotional literacy).

This led to modifications to school curriculums most visibly via the introduction of **circles**, both with small groups and whole classes. This structure enables individuals to support and challenge one another in solution-focused ways. Initially circles were used to facilitate conversations with pupils around thoughts and feelings as this helps pupils to process their experience/s of the pandemic.

"Our goal intention at the first stage of our implementation is to encourage pupils to be capable of talking about their thoughts and feelings. Our strategy is to use RP questions, circles mixed in with some nurture-based learning approaches."

Martin Keenaghan, Woolton High School

One secondary school is now introducing circles across the English Department, both to build social capital and as a process for teaching and learning.

Restorative Thinking's input around **Behaviour as Communication** and **Restorative Enquiry** has led to staff being able to immediately make small changes to language and behaviours in school:

"The sessions have taught me to think about the way I handle conflict with the students I teach by creating an environment whereby it is the 'norm' to admit your wrong-doings; this saves lots of time investigating who did what, in order to be able to spend more time on repairing the harm done, or teaching, rather than dealing with disputes."

Tamsin Halliwell, Cowley International College

"I think this training is very meaningful and practical. I recently used the restorative thinking strategies during phone calls with parents and parents' evening. It made the conversations more efficient and more positive."

Xing Gu, Cowley International College

"The early evidence suggest that pupils don't have repeated incidents of being dysregulated once they have had a chance to be guided through the process and likewise the pupils that are guided through the process for positive reasons go on to continue to gain good outcomes for that day."

Martin Keenaghan, Woolton High School

"Personally, I have used 'the questions' when speaking to students and parents and have found them to be a useful framework to discuss issues."

Paul Leadbeater, Cowley International College

"The restorative enquiry questions have been useful whilst on incident patrol duty. I have found 'What happened?' to be a much more useful way to start a conversation than 'Why have you been sent out?' Students seem to respond to the neutral nature of the question better. Encouraging them to reflect on how they felt at the time has also been useful."

Case Study, Cowley International College

"I feel like the Restorative Questioning has massively supported me in my role as an LSA during the pilot. Since returning from lockdown, this question has been great to use within conversations to see how children are on their return and the experience with families during lockdown. The question, "Who has been affected?" has been really useful as it allowed me see if pupils have an understanding of the effects of their behaviour on others." Hannah Simpkin, New Heights School

"During lockdown, two pupils had fallen out during lunch time.

Upon re-entering the classroom, pupil A was refusing to complete work as he was upset because of the fall out at lunch time with pupil B.

I asked pupil A to come outside the classroom and explain the harm that had been done. He told me about the altercation with pupil B and said he always played with pupil B and wanted to make friends with him as he was really upset that they had fallen out. I asked him how he thought we could do this. He said he wasn't sure. I suggested repairing the harm done by asking pupil B to join us outside and discuss what had happened. Pupil A and pupil B had a discussion about what had happened and how it had made each of them feel. They both then apologised to each other.

The harm had been repaired and both pupils went back into the classroom and completed their work."

Case Study, Cowley International College

iv. MODIFICATIONS TO THE SCHOOL ENVIRONMENT

Day to day language and behaviours help create a school's environment and, by this definition, many project schools have been able to draw on trauma-informed practice and restorative practice to improve communication and build more positive relationships through engagement with the project.

One school created a physical space to draw on the learning from this project:

"We are resourcing a room, developing the questions (happen, thought, feel), check-in pictures at breakfast club and learning from our approach on a weekly basis. So we can learn from our approach we keep a diary of how the room is used."

Martin Keenaghan, Woolton High School

Other schools made good use of the resources provided via both the Literature Review and the e-Learning course:

"We have printed the Restorative Booklet which was provided within the e-Learning and I in particular have been able to use this with students who are unsettled and learn more about what they have been through and why they are presenting the way they have been."

Hannah Simpkin, New Heights School

Changes made clearly appear to have had positive impacts on project schools alongside a recognition that there is more to be developed over the coming months:

"I look forward to the next part of the journey and how we can help and support our pupils with approaching situations in a less punitive way and more understanding, caring approach." Clare Campbell, Sacred Heart Catholic High School)

APPENDIX A

RESTORATIVE THINKING: TRAUMA INFORMED STRATEGIC SUPPORT FOR SCHOOLS

LITERATURE REVIEW

Below is a list of resources, useful when planning a Recovery Curriculum, divided into four categories:

- 1. BOOKS/READING MATERIAL;
- 2. VIDEOS;
- 3. DOWNLOADABLE RESOURCES;
- 4. REFERRALS.

BOOKS/READING MATERIAL:

WHO	WHAT	LINK	
UK Trauma Council	Additional Guidance when considering Permanent Exclusion.	www.uktraumacouncil.org/ wp-content/uploads/2020/09/ CHILDHOOD-TRAU- MA-AND-THE-BRAIN-SinglePages.pdf	
Mary Meredith	Online articles for SLT and teachers to support recovery curriculum. Relatively short articles with advice for practical strategies.	www.marymered.com	
Trauma Informed Schools	Posters to explore positive mental health and COVID 19.	www.traumainformedschools.co.uk /resources	
Department of Education, University of Oxford	School exclusion risks after COVID-19.	www.education.ox.ac.uk/wp- content/uploads/2019/11/Daniels-et- al2020_School-Exclusion-Risks- after-COVID-19.pdf	
Young Minds	Adversity and Trauma Informed Practice. 39 pages.	www.youngminds.org.uk/media/ 3091/adversity-and-trauma-informed- practice-guide-for-professionals.pdf	
Guardian newspaper	Article about trauma-informed approaches, 10/10/20.	www.theguardian.com/education /2020/oct/10/is-the-tide-turning-against- zero-tolerance-in-uk-schools	
Progressive Policy Think Tank	Making the Vulnerable Visible (link from Lyndsey Weekes, Birkenhead Park School).	www.ippr.org/blog/ making-the-vulnerable-visible	
Merseyside Violence Reduction Partnership	Additional guidance when considering permanent exclusion.	www.merseysidevrp.com/what-we-do/ education/	

VIDEOS:

WHO	WHAT	LINK
Anna Freud Centre	Videos for primary settings, introducing children to positive mental health strategies.	www.annafreud.org/schools-and- colleges/resources/talking-mental -health-animation-teacher-toolkit
NHS Scotland	This animation was developed by NHS Education for Scotland, in partnership with the Scottish Government. It is designed to be relevant to all workers within the Scottish workforce who work with children and young people. It aims to support staff to understand the impact of trauma and to know how to adapt the way they work to make a positive difference to the lives of children and young people affected by trauma. 11 minutes.	www.vimeo.com/334642616
Helping traumatised children learn	The importance of relationships and trust – students' perspective.	www.traumasensitiveschools.org/ teacher-and-student-relationships-the- power-of-trust/#.X718s3EW4zM.twitter

DOWNLOADABLE RESOURCES:

WHO	WHAT	LINK
Anna Freud Centre	Teacher toolkits with resources to help develop positive mental health with pupils and parents/carers.	PRIMARY: TALKING MENTAL HEALTH ANIMATION AND TEACHER TOOLKIT www.annafreud.org/schools-and- colleges/resources/talking-mental- health-animation-teacher-toolkit
	Assembly power point exploring positive mental health.	SECONDARY: PEER SUPPORT TRAINING PROGRAMME www.annafreud.org/schools-and- colleges/research-and-practice/peer- support-for-children-and-young-peoples- mental-health-and-emotional-wellbeing- programme
Restorative Thinking (with the Anti-Bullying Alliance)	Short e-Learning programme for parents/carers to support healthy relationships.	www.anti-bullyingalliance.org.uk/ course/4029/restorative- thinking-and-positive-relationships- preventing-and-managing-conflict
Cafcass	Downloadable pdf with resources to use with primary children to support positive mental health.	www.cafcass.gov.uk/wp-content/ uploads/2017/12/How-it-looks-to-me.pdf
Trauma Informed Schools	Posters to explore positive mental health and COVID 19.	www.traumainformedschools.co.uk /resources
Beacon House	Developmental trauma resources to use in school. Nice posters too.	www.beaconhouse.org.uk/resources
Lincolnshire County Council	Anxiety-based school refusal. Resources for parents, children, SENDCOs.	www.offschool.org.uk/secondary- school-approaches/anxiety-based- school-refusal
Home Office 'Something's Not Right'	Downloadable resources, recognising and making disclosures about abuse.	www.pshe-association.org.uk/curriculum- and-resources/resources/home-office- somethings-not-right-abuse-disclosure

REFERRALS:

WHO	WHAT	LINK
Barnardos	The See, Hear, Respond Partnership has been created specifically to help children and young people in England who are experiencing harm and increased adversity during coronavirus, by providing support to those who are not being seen by schools or other key agencies. There is no minimum threshold for referral. We will support children from pre-birth up to 18 years of age and those with special educational needs under the age of 25.	https://www.barnardos.org.uk/ see-hear-respond
Home Office	Operation Encompass. Psychologist support for children who experience domestic abuse.	https://www.operationencompass.org/
Listening Ear, Merseyside	Family 1:1 support for looked after children and foster carers.	https://listening-ear.co.uk/titanium/
Child Bereavement UK	1:1 pre bereavement and bereavement support for children and young people up to the age of 25 Month- ly drop-in Group for families Group for Young People.	http://www.st-hildas.co.uk/wp-content/ uploads/2020/05/Bereavement-Support- for-Children-and-Young-People-in-Cheshire- and-Merseyside.pdf

APPENDIX B

RECOVERY PLAN TEMPLATE

QUESTIONS USED BY PROJECT SCHOOLS TO HELP DEVELOP THEIR RECOVERY PLAN

QUESTION	ACTION	NEXT STEP/S
What's happening (what are the targets for our recovery plan)?		
Supporting data (attendance, rewards, sanctions, exclusions)		
What do teachers identify as our key current concerns?		
What do pupils identify as our key current concerns?		
What do parents/carers identify as our key current concerns?		
What do we already do?		
Which agencies support this?		
How will Restorative Thinking's input contribute towards our recovery plan?		
Next steps (with staff, pupils, parents, policies)		
Other		







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