



Developing Resilience:

A guidance document for education leaders in response to the Covid-19 pandemic



Contents

You can click on the headings on the content page to navigate to specific pages in the document

Aims of this document	3
One Small Step	4
Caring for the Carers.....	6
Promoting resilience and wellbeing at the staff/service level: Approaches that are in our control and likely to increase our sense of empowerment	7
BASIC PH: A model of resiliency and coping.....	9
Supporting Every Child Using the BASIC Ph Model.....	11
Applying the BASIC Ph to respond to children’s worries	13
Sharing information at a time of crisis: Applying the Facts, Feelings and Future model	14
The Circles of Vulnerability: Identifying who is at risk	16
Circle 1: Geographical proximity to bereavement/illness or significant event	17
Circle 2: Social proximity to bereavement/ illness or significant event	17
Circle 3: Psychological proximity to significant event/bereavement/illness or the impact of lockdown	17
Creating a Support Plan	19
Targeted Interventions	20
Concerns Around Social Distancing	21
Resources	22
Useful Media and Apps.....	22
The Educational Psychology Service.....	22
Acknowledgements	22
Appendix 2: Supporting the BASIC Ph on an individual or group level.....	24
Appendix 3: An Example Support Plan	25
References (either referred to explicitly or in the preparation of this document)	26

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Aims of this document

The coronavirus has caused significant changes to our lives.

We know from working in Newcastle schools/settings and with services that you (as leaders in schools, settings and services) have positive and supportive relationships with staff, children, young people and their families. Much good practice, supporting those in need, is already happening.

The overarching aim of this document is to help you recognise the good practice that already exists in your setting and apply it with confidence when managing this unique situation.

Supporting the resilience and wellbeing of others is dependent on prioritising our own wellbeing (as we are fundamental parts of the support network around our children, young people and families). This document helps you to consider and promote your own coping behaviours alongside those of whom you are supporting.

Specific aims of this guidance include:

1. ensuring you are confident about the support you have in place for yourself, and the children, young people and adults in your care.
2. helping you build on what is already in place to identify and support those most in need
3. providing you with a way of understanding how people support themselves during times of stress



One Small Step

As the world learns to cope with the pandemic, 'lockdown' and its aftermath our behaviours, routines, interactions, work, play, relationships and established coping mechanisms have changed.

We can describe this situation as a critical incident. Critical incidents have been defined as:

A sudden and unexpected event that has the potential to overwhelm the coping mechanisms of a whole school or members of the school community. A serious and significant event, it is likely to be outside the range of normal human experience and would be markedly distressing to anyone in or directly involved with the school community (Beeke, 2011).

It feels as though this describes our current situation well and it is hard to imagine that any of us will have experienced anything like this before.

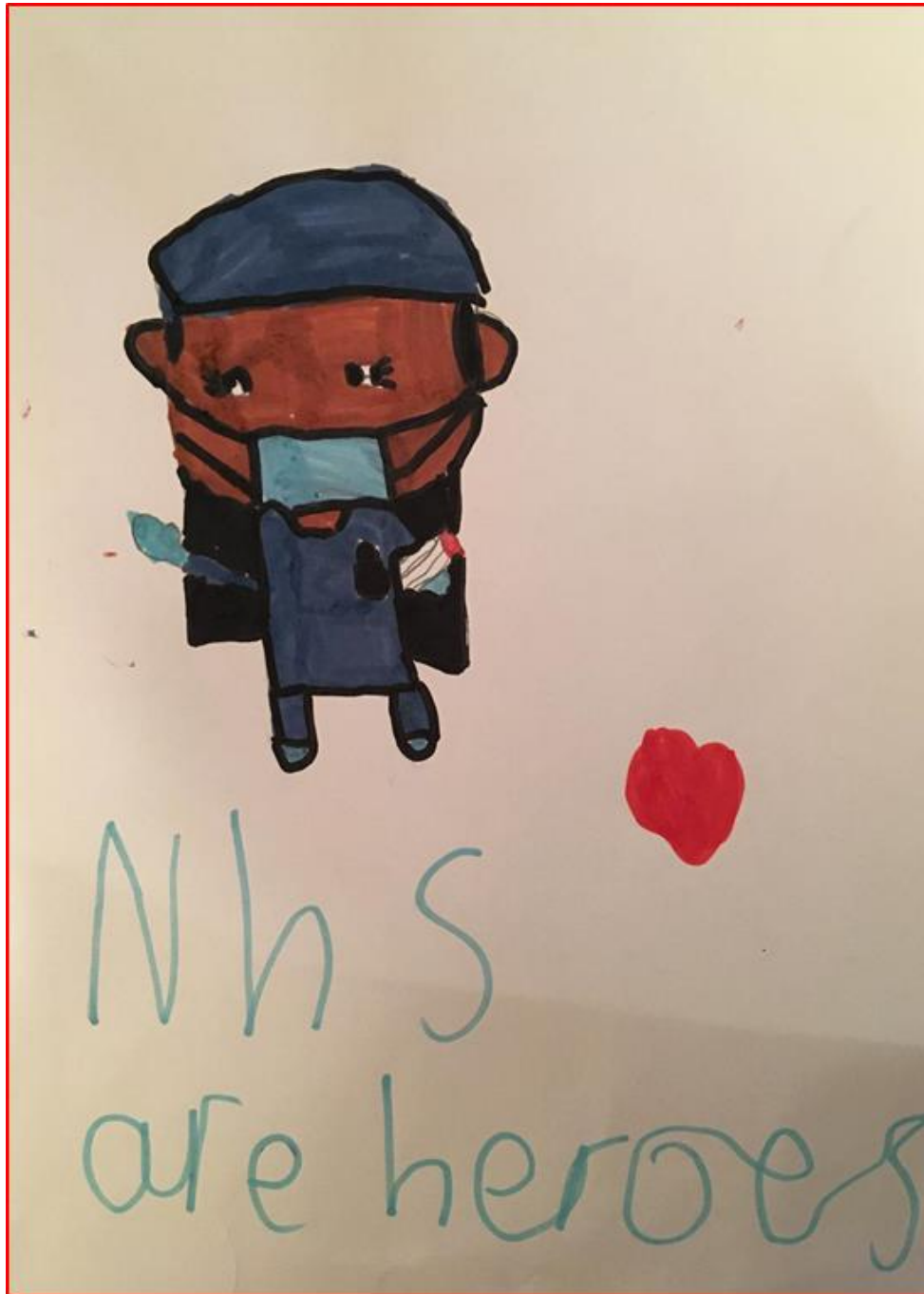
As a result of Covid-19, many children, young people and families will have experienced the loss of a previous way of life which may have offered security, safety, predictability, they may have experienced bereavements and potentially feel there has been a change in the direction of their future. This may feel overwhelming for many children, young people, parents, carers and school staff. Adapting to such a sudden, unexpected change will be a challenge for us all as we support one another and our varying needs. But it is not impossible.



The return to 'the new normal' will take time, and, as all areas of a person's life may be impacted, there will be no simple answers.

This document provides ideas from psychology to help you support your community as a whole. It provides tools to help order and work with the complex, messy problems that you are likely to experience. It is a guide, that by knowing your staff, children, parents, services and school/setting/communities you can adapt to make work for you.

It is hoped that this document is the first small step in rebuilding a confident, optimistic and resilient school community.



Caring for the Carers

Our first message is that, in order to support our city’s children and young people, we need first to prioritise adults’ wellbeing. Think of the instruction to “*put your own oxygen mask on first*”.

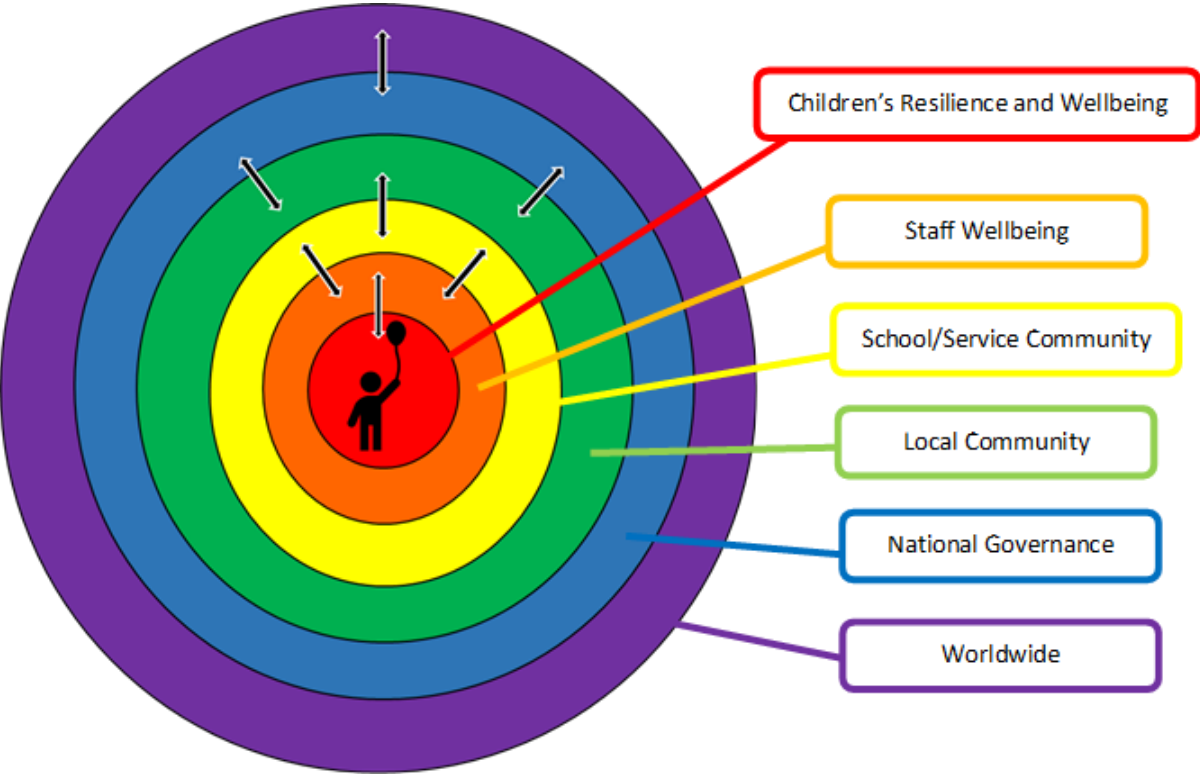
In this opening section, we offer approaches to promote staff’s wellbeing, resilience and sense of control and empowerment during crises.

Wellbeing is defined as the need for psychological, social and physical balance. When the amount of challenge in one of these areas reduces, wellbeing increases (see, for example, Dodge, Daly, Huyton, & Sanders, 2012; Day, 2008).

Resilience is defined as the ability to bend and not break through challenging circumstances.

Ecological theory (Bronfenbrenner, 2006) identifies the different levels which affect a child’s resilience and wellbeing. In the diagram below, each is represented by a different colour. The arrows indicate how a young person’s resilience/ wellbeing during adversity is affected by their interactions at each other level.

Whilst our goal as professionals is to support children’s resilience and wellbeing, you can see that this is dependent on our own wellbeing, as well as interactions and experiences happening more widely.



Promoting resilience and wellbeing at the staff/service level:

Approaches that are in our control and likely to increase our sense of empowerment

Level of System	Possible approaches, methods and resources
<div> <div>Child Wellbeing</div> <div>(Individual child/Groups of children/Children within school community)</div> </div>	<div>To increase the child's wellbeing, we must consider how we support the adults in children's lives first</div> <div>Then, children's wellbeing can be supported using approaches for supporting resiliency in this document</div>
<div> <div>Staff Services</div> <div>(Leadership team/ Main grade Staff/ Administrative Staff / Site staff)</div> </div>	<div>Adults need time to share their experiences together (if they want to – there also needs to be space for quiet). We all have our own personal experiences that shape our understanding</div> <div>An atmosphere of open mindedness should be fostered, where the variety of an individual's perspectives are celebrated. The use of ground rules, promoting trust and confidentiality may be helpful</div> <div>It may be helpful for staff to think of three positive experiences they have had at work each day and what they did to help this happen</div> <div>Physical wellbeing, including time for sleep, rest and eating is more important than ever.</div>



School & Service Community

(Families of children and staff/Peripatetic staff members)

Support staff to...

Develop an emotional connection to the school/service community, with an emphasis on staff being a 'team'. Team building exercises and time for staff to be together without an agenda may be helpful

Develop a feeling of influence: Staff need to feel listened to and feel that their voices/views are being acted on. Group problem-solving approaches, solution circles and reflective teams may be useful tools.

Develop feelings of fulfillment: There should be different ways for staff to express their needs, including: Leadership teams having drop in sessions, designated and protected time to speak to staff when needed and more informal information sharing e.g. post-it board in the staff room

Develop a shared emotional connection: Encourage discussions to consider joint values the school/service and community feel are important to promote. Have these values changed/evolved since the pandemic? Leaders may wish to stress that within all the current uncertainty, some things are certain, such as the school/service's and community's core values and care.

Local Community

(The community in which the school/service sits Newcastle and locations within it)

Staff will feel empowered if they are given opportunities to shape local policy and practice in ways which feel meaningful to them.

Collaboration with other services in the local area as well as the community will help reduce pressure and responsibility.

National Governance

(The government/national agenda, politically, legally and professionally)

This is a time of information overload and it can feel draining to analyse and understand different information sources, which can feel contradictory. There needs to be time within our teams to acknowledge our feelings, whilst also having a focus on what is within our control.

Worldwide

(Issues which are international as well as national)

It will be important to consider/value/learn about individuals' different social and cultural understandings of the situation, alongside individuals' circumstances.

With our oxygen masks on, we now turn our attention to supporting others in different ways.

BASIC PH: A model of resiliency and coping

Research has identified that at difficult times, people's positive coping behaviours fall into six channels. These channels (shown below) spell out the acronym **BASIC Ph**. The channels of coping are broad descriptions of coping styles. Within these channels people are known to engage in many different types of coping behaviours.

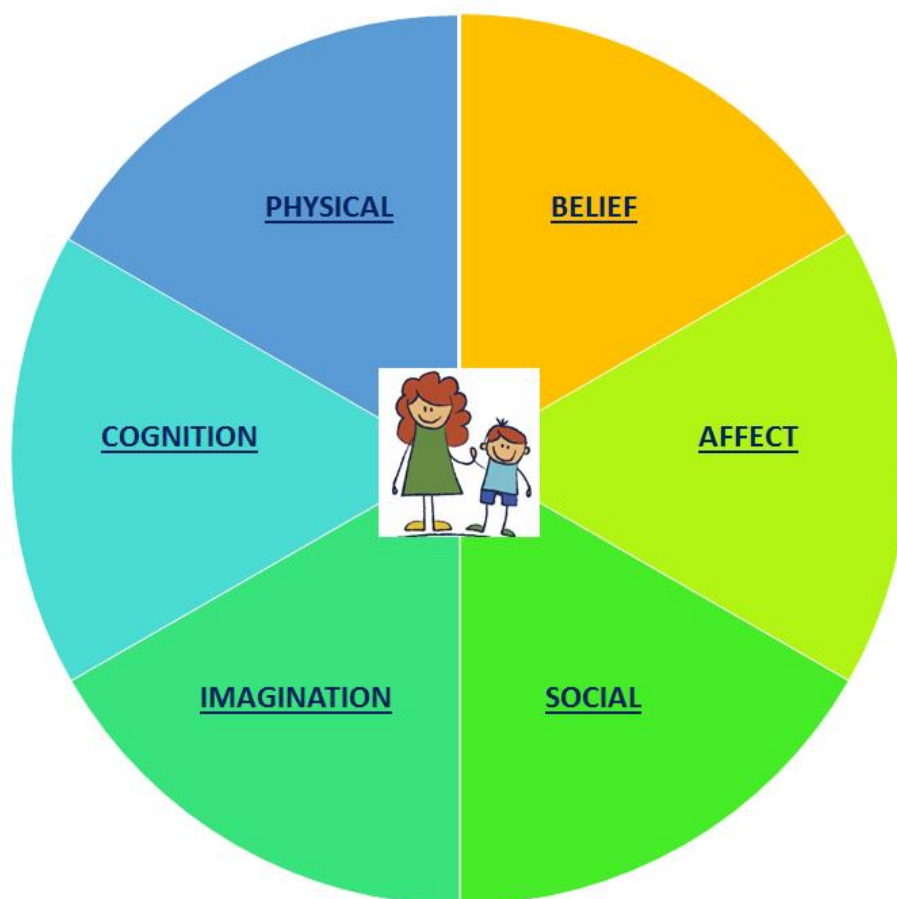
<u>BELIEF</u>	A person uses their belief system or core values as a means of coping (understanding/ reframing what has happened)
<u>AFFECT</u>	A person expresses themselves through their feelings and emotions
<u>SOCIAL</u>	A person seeks support from social relationships, friends, family, and/or members of the community
<u>IMAGINATION</u>	A person uses creativity, intuition and play
<u>COGNITIVE</u>	A person focuses on what has happened, knowing the facts and what will/might happen next
<u>PHYSICAL</u>	A person engages in physically driven behaviour such as exercise, relaxation and eating

We know that people have their preferred coping channels and will naturally adopt strategies from these channels. For example, someone who heavily relies on the cognitive channel may; read and watch the news a lot, ask questions and spend a lot of time finding out exactly what has happened and what might happen next. This can be difficult if it is at the expense of other coping behaviours.

We know that people cope better if they engage in a broad range of positive behaviours that branch multiple coping channels. This helps people to feel connected or to reconnect with the world following difficult times, it also reduces the chance they will experience difficulties in the future.

Therefore, our aim is to support people in two ways:

- 1) To understand their own coping behaviours and to normalise these for them (everyone has some coping strategies in place – we have all got this far!)
- 2) To help broaden coping behaviours and activate more coping channels

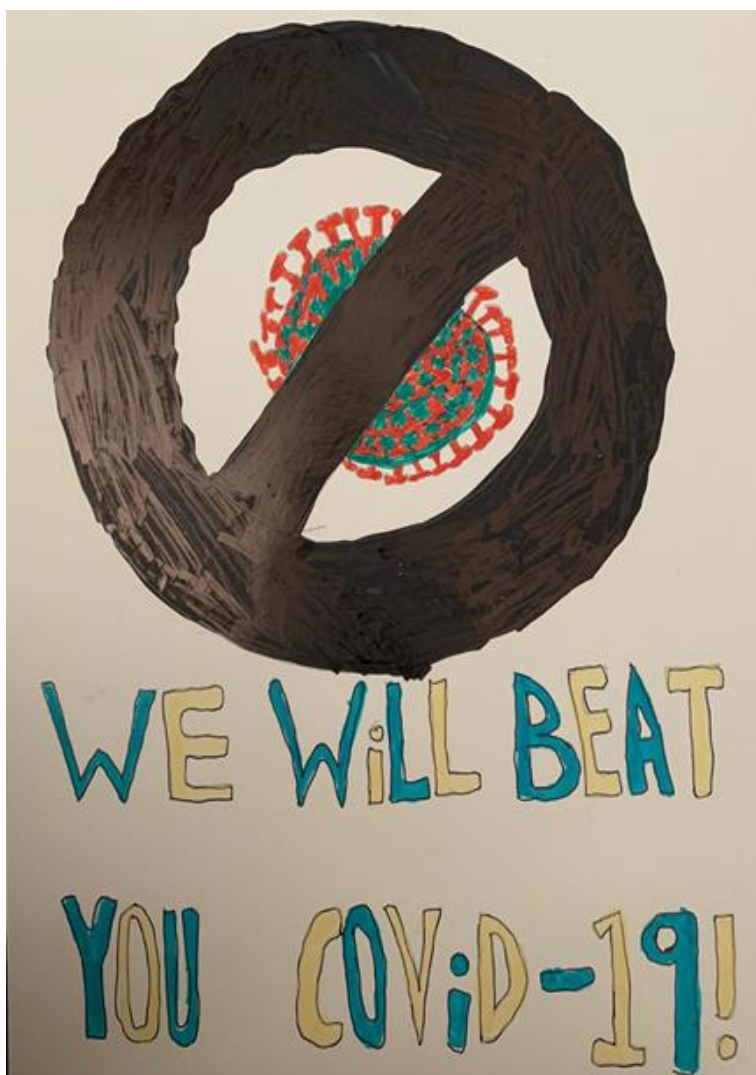


By teaching children and adults about their own coping, and strategies for moving forward (coping better) we are also increasing their self-awareness, their awareness of others and providing tools/learning for them to use now and in the future. The BASIC Ph provides a framework for this.

- This document gives practical ideas to support all children to broaden their coping behaviours on a universal level (page 11).
- For those children who need something additional and different, further targeted support ideas for the individual or group level are in the appendix, page 24

Supporting Every Child Using the BASIC Ph Model

The table on the next page provides practical ideas for developing all children's resilience and wellbeing using the BASIC PH as a framework



BELIEF

- Consider future goals together
- Celebrate and recognise positive qualities in ourselves and each other
- Talk about 'things that matter to me' – plan ways to sprinkle these into your day
- Talk about or record things you are grateful for
- Use assemblies as opportunities for sharing celebrations and recognising shared values
- Provide children with opportunities to be involved in decision-making
- Take time to talk about kindness – plan small acts of kindness throughout the day and recognise kind acts in each other

AFFECT

- Support children's understanding by naming emotions – 'I'm wondering if you're feeling...'
- Validate these feelings – 'It's okay to feel...'
- Support children to recognise their feelings, how their body feels when they experience different emotions and to develop strategies to regulate their emotions (using tools such as Zones of Regulation)
- Allow children time and a safe space to ask questions and share their feelings in different ways (such as the use of feelings boxes, Circle Time).
- Plan time each day for children to take part in mindfulness activities, possibly using Apps/websites (such as The Smiling Mind) or mindfulness colouring

SOCIAL

- Remind children that you are there for them to talk to ('keeping in mind' strategies might be helpful, such as asking a child to look after a pen for you, letting them know you will get it back from them later)
- Plan 'getting to know you' activities
- Create opportunities for informal, fun interaction
- Create opportunities which involve modelling and teaching of social skills, such as turn-taking activities or structured playground games
- Provide activities that involve working together to achieve a shared goal
- Provide opportunities to promote autonomy (for example class jobs and roles)

IMAGINATION

- Create opportunities for free play as well as role play and small world play (for older children this might be through the use of drama or activities such as 'hot-seating' and 'freeze-framing' when learning about topics)
- Share stories together (perhaps through the use of a story time session or an audiobook) and provide time for reading for pleasure
- Mindfulness activities – using Apps/websites, mindfulness colouring, breathing techniques, relaxation time, yoga, peer massage
- Encourage expression through use of art and free story writing (writing activities for time capsules could be used - such as writing about experiences the children have had during the recent months)
- Provide time to engage in shared singing/music experiences

COGNITION

- Create opportunities to talk about what's happening (using visual books or for older children this might involve learning about the science etc.) but reminding them about limiting media exposure and using news sources that are appropriate for them
- Support children to make decisions themselves about what they would like to play/write about/learn about to help them feel a sense of autonomy as well as help to provide opportunities for success or goals to be met
- Celebrate small successes/small steps of progress
- Remind children of the language of Growth Mindsets, such as the power of 'yet'
- Explore together how the children have understood the pandemic – 'What do you know about...?' Together, use the knowledge harvest to create a school/class glossary.
- Plan together what is coming next

PHYSICAL

- Check in with children about basic needs – are they sleeping/eating well?
- Be aware of financial worries some children might have
- Talk to children about the importance of sleep and eating healthy – how sleep affects you, basic sleep hygiene, importance of a balanced diet
- Provide opportunities for sensory and movement breaks throughout the day (such as Daily Mile, jumping jacks, moving around the classroom talking to others)
- Plan some joint sports events: children might have missed out on these events and these will create opportunities for the children to work towards common goals and tangible rewards
- Emphasise familiar routines and structure to help children with feelings of safety and stability
- Support children in thinking about self-care – 'What makes me feel good? What kind things could I do for myself today?'

Applying the BASIC Ph to respond to children's worries

Newcastle's children, young people and their carers have told us what they are worried about when they return to school (Newcastle City Council's Going Back to School Survey for Pupils and Carers).

This data suggests that two of their main worries are:

- not knowing what will happen and what will be expected of them
- about their friendships and social relationships.

Worries about what will happen to me

Wanting to know what will happen and what will be expected of you is another essential form of coping (BASIC Ph). We know that if you understand what is happening, why it is happening and what exactly this means for you, you will feel more secure/ less worried.

Providing factual, clear and age appropriate information for children, young people and their families in advance of their return to school will be helpful in supporting their wellbeing. If this is not possible, information as soon as they return with regular updates is a must. See information on the Facts, Feelings and Futures model for ideas on how to share information with children (page 14).

Worries about friendships

Children and young people told us that they want the time, space and the opportunity to maintain and enjoy their friendships. Much of their worries about their return to school relate to fears that they may be isolated from their friendships.

Social relationships provide an essential form of coping (BASIC Ph) and peer social support, is one element of this that many children will have missed during the past months. Holding in mind the importance of supporting children to reconnect with others or to form new connections within their 'bubbles' will be an essential element in maintaining their wellbeing.



Sharing information at a time of crisis: Applying the Facts, Feelings and Future model

The Facts, Feelings, Future model is helpful when talking to children, young people or adults about a bereavement or, any incident which may have resulted in loss, change, distress or uncertainty.

During times of uncertainty, it can be reassuring to hear clear and consistent messages. Factual information helps activate our cognitive coping channel (BASIC PH), prevents misunderstanding, dispels rumours and enables us to feel more in control.

Try to share information in small groups, class groups or tutor groups rather than as a whole school or assembly as this allows young people space to react to and discuss what has been said

When sharing information, it is useful to write a script that explains what has happened and what will happen next. A script provides a framework for ensuring information is given in a way that best supports peoples' emotional wellbeing (activates their coping channels) and helps the information shared stay accurate and consistent.

There is an example of a script in the appendix, page 23. The example shows how you might talk to children about a death in the school community. This approach can also be used to give information about other challenging situations such as social distancing or significant changes in a child's routine.



In the case of a bereavement, be mindful that young children do not have an adult understanding of death and may think about what has happened in a very personal way (e.g. their behaviour caused the death).

Sharing information at a time of crisis: Applying the Facts, Feelings and Future model

Facts

- Give the facts about what has happened in a developmentally appropriate way (facts reduce myths, rumours and misunderstandings)
- Use clear, straightforward language and avoid euphemisms (i.e. use the word dead, died)
- Facts, although difficult to hear are better than 'not knowing' or believing its not true

Feelings

- Explain that people will experience a range of feelings about what has happened and that that is okay.
- Emphasise that our feelings can and will change over time
- Make children, young people and adults aware that it can be helpful to talk about their feelings and make sure they know who they can talk to and when

Future

- Explain what is going to happen next - this reduces anxiety/ increases security
- Share what will happen next in response to this situation (how a death is going to be marked or a life celebrated)
- Share what will happen next on a day to day basis e.g. in school over the next few weeks - what exactly does the “new normal” look like

The Circles of Vulnerability: Identifying who is at risk

The Circles of Vulnerability is a wide-reaching visual tool for identifying those individuals and groups in your care who are potentially at risk. This tool is a group activity, used to breakdown who could benefit from additional support, who is best placed to help and what this support could look like.

The Circles of Vulnerability tool was developed to help first responders identify those in need following suicide, bereavement and critical incidents in a community. It considers the interaction between three risk factors for people following a traumatic event; a person's geographical, social and psychological proximity to the event. When a person is identified as at risk in more than one area, they are more likely to need additional support.

The unique and wide-reaching nature of Covid-19 means that you may need to use this tool in one of two ways to support your community.

Method	Purpose of tool	How to use the tool
1	To identify those who are vulnerable following a critical incident, bereavement or significant illness in your community i.e. <ul style="list-style-type: none"> the death/illness of a co-worker the death/illness of a parent/child in the school community 	Complete <u>all three</u> of the circles in turn, using the model to guide your thinking of about those affected by the event.
2	To identify those who are vulnerable following the pandemic and lockdown. In this case the significant event is the pandemic itself.	Complete <u>circle three only</u> - you do not need to complete circles one and two as no physical event has been witnessed.

The Circles of Vulnerability is a group task and groups should include those who know the children and young people and their families the best (management, class teachers, support staff, outside agencies etc.).



To complete the circles, think of each person in turn and record their names in the circle that best matches their experience. Although the examples refer to children, this tool is useful in identifying support for all.

Circle 1: Geographical proximity to bereavement/illness or significant event

The first circle asks about physical proximity to a traumatic event.

- Did they see/ hear/ experience first-hand anything traumatic?
- Were they with someone when they became very ill/ died?
- Did they witness someone needing to be hospitalised?
- Did they witness the paramedics arriving?

Circle 2: Social proximity to bereavement/ illness or significant event

The second circle asks about social proximity, their social connection to what has happened.

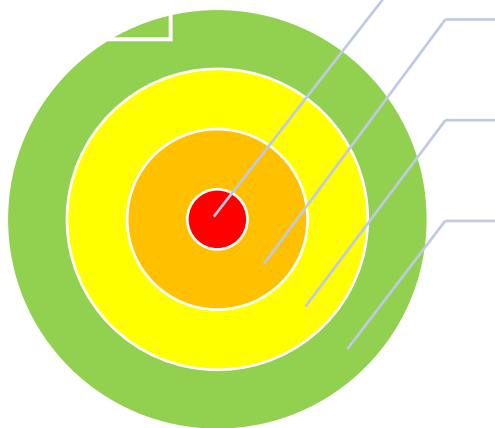
- Has something happened (death, illness, violence) to someone who is close to the child/young person/ adult?
- What is their relationship to the person affected?

Circle 3: Psychological proximity to significant event/bereavement/illness or the impact of lockdown

The third circle asks about a person's psychological vulnerability

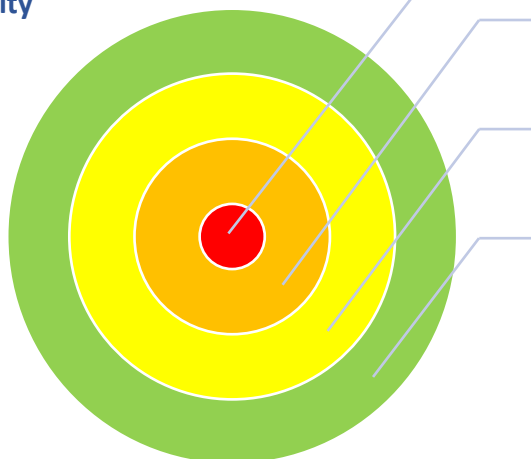
- Has there been recent trauma before or alongside the Covid-19?
- Is there a risk/evidence of domestic violence in the home?
- Does the family have the means (financial/relationships/resilience) of coping?
- Do any the children, parents or relatives have additional needs?
- Are they asylum seekers or refugees who may have experienced significant trauma in the past?
- Has the child, young person or adult been shielding because of a health need or a family member's health need?
- Are there cultural and/or language issues that might impact on a family's ability to cope/ access resources?
- Are there difficulties relating to social, emotional and mental health needs within the family?

Circle 1: Geographical proximity



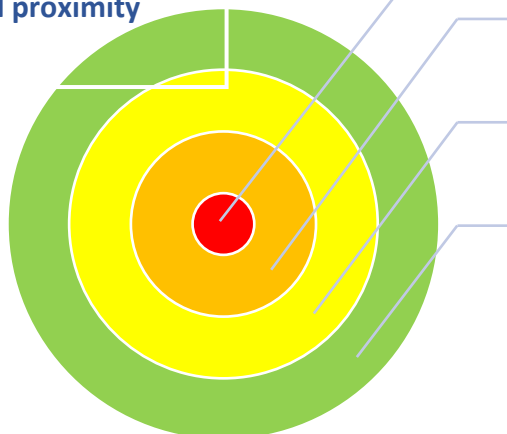
- physically close to what happened - direct experience
- close to what has happened
- a member of the community where something has happened
- heard about something that has happened (rumours/social media etc.)

Circle 2: Social proximity



- immediate family (n.b. in some families this may be cousins)
- near family or close friend
- acquaintance
- someone's personal circumstances mean that they relate to what has happened

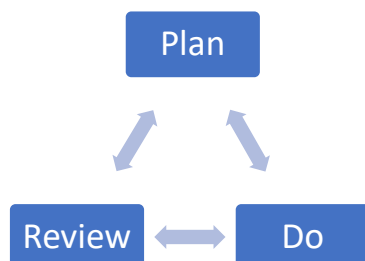
Circle 3: Psychological proximity



- recent similar trauma
- possible bereavement, illness or significant change
- ongoing or recent difficult situation (prison/divorce/separation from close relatives)
- emotional needs which make them more vulnerable (mental health needs)

Creating a Support Plan

Creating the action plan should be coordinated by a small group but supported by the whole school. It is essential that the people who know the children best are involved. Three steps to writing a support plan are described below.



The creation and maintenance of this plan is continuous and should be treated as a working document. This is best summarized by the **Plan-Do-Review** process. Best practice would be to revisit the plan regularly, perhaps as a standing agenda item in team or management meetings so that support needs can be updated.

24

Step 1

- Transfer the people identified as needing support from the circles into a table
- Pay particular attention to the people who appear in more than one circle

Step 2

- With the people who know those children best, think about what support is needed now- support is likely to change 'next week'
- If you don't know how a young person is coping - ask them. Use one of the tasks for assessing pupils coping strategies. For example, the activity What's in your Coping Case (page 24)

Step 3

- Think about who is in the best position to offer this support and when this can happen
- Where possible, tailor support to the need using the relationships that already exist
- See example support plan in the appendix (page 25)

Targeted Interventions

Children identified as at potential risk may need something additional and different to the support provided on a universal level. The BASIC Ph also provides a framework for addressing emotional support on an individual and group level. Remember, group support not only enables you to maximise resources but helps children and young people to normalise their experiences and develop their support networks.

A small number of activities that are suited to encouraging the exploration of coping behaviours on an individual and group level are included in the appendix, page 24. Your setting is likely to have several evidence-based interventions already in place to support young people's developing social emotional welling - these are likely to be helpful now too!



As we know, the complex nature of children and young people's needs means that for some, support may need to simultaneously target more than one area of need, for example, reinforcing their coping behaviours whilst also providing catch up for their learning.

When creating a support plan, be guided by a familiar, methodical system of identifying target children, possibly through tracking progress, observation and teacher views. Then focus in on a particular area e.g. literacy, social interactions, emotional understanding, so that SMART target type outcomes are developed. This will help guide the intervention in terms of what will be appropriate as well as support monitoring of progress. The process should be evaluated throughout so that any adjustments can be made. Then at the end of the intervention a review of whether it has achieved the individual targets for children, as well as considering the wider impact in terms of its effectiveness across the school (see example support plan, page 25)



Developing Resilience:

A guidance document created in response to the COVID-19 pandemic

Concerns Around Social Distancing

‘Social distancing’ is a new term which has come into the public domain over recent months. Getting used to the various aspects of ‘social distancing’ – for example not seeing key family members and keeping two metres apart from other people when out and about - will have been a huge adjustment for adults and children of all ages.

Although social distancing has not been specifically recommended to be applied generally in schools, it remains part of the government message to minimise infection from Covid-19. This may create a tension – with staff and pupils unsure of what is allowed and what is safe in school environments.

To ensure the well-being of the children and young people in our schools it is important to be aware of the impact this tension may be having on us and them, and to be vigilant about addressing concern and worry as it arises. It may be that there aren’t precise answers but acknowledging the tension we are all feeling could be helpful and using the tools in this document such as the channels of the BASIC Ph could alleviate stress and support resilience through this uncertainty.

In circumstances where social distancing is being applied, it is also important to consider that it is still possible to communicate well from a distance of two metres or greater – using important concrete non-verbal behaviours such as turning towards a person, making eye contact, and generally receiving the communicative initiatives of others well. The basic principles of good verbal communication also remain important, such as receiving another’s communication with words, using their phrases and language with them, using a reassuring tone of voice etc. In a way these basic building blocks of communication may be more important now than ever. It may also help to remember that often our relationships with each other will have existed and flourished before social distancing came into existence, and both parties will remember this.



Resources

Useful Media and Apps

<https://www.calmerclassrooms.co.uk/6-ways-introduce-gratitude-school/>

<https://www.bbc.co.uk/newsround>

<https://www.gonoodle.com/>

<https://www.winstonswish.org/telling-a-child-someone-died-from-coronavirus/>

<http://www.priorywoods.middlesbrough.sch.uk/coronavirus/resources>

www.mind.org.uk

www.neu.org.uk

<https://www.kooth.com/>

<https://www.educationsupport.org.uk> (for support for all staff working in education)

The Educational Psychology Service

The Educational Psychology Service is keen to support schools / settings and services in any way we can at this time. Every school currently has access to the EP Service for work related to the Coronavirus pandemic, regardless of what typical working arrangements might be in place. If you do not currently have a named EP, then please contact

Lara Lillico (EPS Manager) at lara.lillico@newcastle.gov.uk or on 07970 623216

Sarah Woodburn (Deputy EPS Manager) at sarah.woodburn@newcastle.gov.uk or 07787 691225

Acknowledgements

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All the visuals you find within the document have been kindly provided and created by family and friends of the Newcastle Educational Psychology Service. Thanks go to these budding illustrators.

Front cover picture; stock Adobe image.

Appendix 1: Example script - A death in the school community from Covid19

This script is informed by information on the Winston Wish website (<https://www.winstonswish.org/telling-a-child-someone-died-from-coronavirus/>)

Explain what has happened leading up to the event, try to reassure

Occasionally, someone will die before they are old because, for example, of an accident or serious illness. The coronavirus is an illness that can make some people feel poorly. Most people who feel poorly with the coronavirus get better quickly and soon feel healthy again. However, for a few people, the coronavirus can make them very poorly.

Provide honest, clear information about what has happened

I have some sad news to tell you. (Name) had the coronavirus and was very poorly, so they went to hospital for the doctors and nurses to help them. Sadly, despite the doctors and nurses doing all they could to make them better, the illness became too strong and their body could not get better. Their lungs stopped working and their heart stopped beating so they died.

What this means in an age appropriate way

When someone dies, their body stops working and they are no longer able to do the things they could when they were alive, such as move or talk or play.

(N.B. this may not be needed for secondary age children as most will have developed an understanding of the permanence of death, it is worth considering for children with SEN)

Normalising possible feelings

I am feeling very sad because (name) died. You might be experiencing lots of different feelings now too. It is normal to feel different and sometimes strong feelings when someone dies. It is also OKAY to feel the same as normal. Remember everyone is different and will respond differently to this news. You can talk to me about how you are feeling now or (Name) is in the office all day, if you would like to speak to him.

What will happen next / How they can ask questions and talk to someone

Does anyone have any questions they want to ask me?

Tomorrow we will have an assembly to think about (name) and the things that (she/he) liked and was good at. We will sing some songs that (name) liked. We can talk together about (name) tomorrow morning, before we go to the assembly.

I am staying here if anyone has any questions or if you want to talk to me about anything. Now there are pencils out and you can draw a picture.

Appendix 2: Supporting the BASIC Ph on an individual or group level

The aim of this page is twofold: Firstly, to provide some inspiration for activities that you can use with groups or individuals to help the exploration and adoption of different channels of coping. Secondly, it serves to illustrate that many very appropriate activities will be those that you already know and use.



What is working so far?: Whats in your coping case?
What helps you feel better? Draw the activities onto your case. When something tricky happens what can you 'take out' of your case to help?



Social: Social Mapping

Plot important relationships and think about why they are special how they can be maintained



Physical: Relaxation

Slowly slide your fingers up and down your fingers while breathing through your mouth and out of your nose



Affect: Feeling our feelings

We can 'feel' our emotions in different parts of our body. Think about different feelings you know and colour in where you experience them - is this the same as others?



Affect: Five point scale

Thinking with young people about how they feel at different times and how these feelings can change helps to provide an understanding of their own and others feelings and behaviours



Social +: Tree of life activity

Support the drawing of people's own trees of life. With their roots as where they come from and the branches showing their skills, knowledge, hopes and dream and the special people in their lives (EPS can support this activity)



Cognitive/affect: Problem solving

Guide people to break down their problems/worry systematically into small steps. Thinking about what is and is not in their control and importantly what they can do next.



Cognitive: Script writing

Use the information you know to write down what has happened in a way that makes sense to you. If you are happy to, share with others so they can understand.



Basic Ph : My coping plan

Using the format of BASIC Ph complete the activities that you currently do and some that you could try for each channel

Appendix 3: An Example Support Plan

Who is vulnerable?	What do they need?	Who can support?
All pupils returning to school	<p>Universal level support for coping</p> <p>Timetabled opportunities to explore coping approaches</p> <p>(See document for supporting all children page, 11))</p>	<p>Class Teachers</p> <p>School Leaders</p> <p>Support staff</p>
(Name) - following death of a grandparent who was a main carer	<p>Someone to ask what they need</p> <p>Someone to tell them that support is available and where they can access it.</p> <p>Someone to work individually with them to find out how they are coping (BASIC PH tasks would provide a good start point)</p>	<p>Class teacher to speak to them individually</p> <p>Opportunity to work with (name) to complete BASIC Ph activities</p>
<p>Class of children who work with (name)</p> <p>(Teaching assistant currently hospitalized with Covid19)</p>	<p>Factual Information about what has happened</p> <p>Information sent home about what has happened and what school are doing</p> <p>Activities in classrooms which focus on understanding pupils' own and further prompting coping behaviors.</p>	<p>Class teacher: To share information known about what has happened with aim to dispel rumors</p> <p>Head Teacher to send out information to parents by the end of day (this enables parents to support their children by ensuring a shared understanding of what has happened)</p> <p>Class Teacher: BASIC Ph activities to support channels of coping</p> <p>Deputy head: to take groups for tea and toast</p> <p>PE Teacher: Provide daily sports/ exercise sessions</p>

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