

Principles and Elements of the Recovery and Resilience Model

Information for Schools (2024)

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Introduction

What is the Recovery and Resilience Model?

The Recovery and Resilience Model (RRM) is an evidence-based model to guide school recovery after natural disasters. It supports schools through the three phases of recovery:

- Relief and Early Recovery
- Medium Term Recovery
- Longer-Term Recovery

The RRM focuses on three core elements of recovery and resilience:

- Routine and safety
- Health and wellbeing
- Belonging and connectedness.



The RRM is a compendium of research and evidence relating to recovery after a natural disaster to assist schools to:

- Identify and predict the needs of students, staff, school leaders and families at different stages of the recovery process
- Plan and implement recovery-related tools, actions and strategies
- Engage in ongoing monitoring and reflection
- Return to normality and restore the day-to-day functioning of the school in the long-term.

When do schools adopt the Recovery and Resilience Model?

Schools adopt the RRM as part of the recovery response following a natural disaster, such as a bushfire or flood. There is increasing recognition that disasters are no longer rare and singular events. The RRM can be used when schools are experiencing enduring impacts and disruptions due to multiple, overlapping disaster events.

How can schools use the Recovery and Resilience Model?

As per department policy, all Victorian government schools are required to have an Emergency Management Plan (EMP) documented on the Online EMP Portal that is reviewed annually and/or following an emergency event [Emergency and Critical Incident Management Planning: Policy | education.vic.gov.au](https://www.education.vic.gov.au/emergency-and-critical-incident-management-planning-policy) The RRM is an accompaniment to the EMP, not a substitution.

The RRM can be read in conjunction with Framework for Improving Student Outcomes (FISO 2.0) [Framework for Improving Student Outcomes \(FISO 2.0\): Policy | education.vic.gov.au](https://www.education.vic.gov.au/framework-for-improving-student-outcomes-fiso-2.0-policy), the School

Mental Health Fund and Menu [Mental Health Fund and Menu: Policy | education.vic.gov.au](https://www.education.vic.gov.au/mental-health-fund-and-menu) and [HITS Trauma Informed Factsheets and Resources - FUSE - Department of Education & Training](#) to assist schools in applying familiar school improvement language and approaches to the recovery process.

This resource can be used in isolation or within already established school practices to assess the learning and wellbeing strengths and areas of growth, such as the Professional Learning Community (PLC) inquiry cycle, School Improvement Team (SIT), and other existing action teams in place, the RRM can also support Annual Implementation (AIP) and School Strategic (SSP) planning.

Trauma Informed Practice Principles (TIPPs) of the Recovery and Resilience Model

There are eight evidence-based principles that underpin the RRM:

1. Always use a human centred, trauma informed and strengths-based approach to disaster recovery
2. Recognise aftermath stressors are often fluctuating and compounding, and can diminish the health and wellbeing of those impacted by a disaster
3. A recovery plan should consider intervention (reactive) and prevention (proactive) strategies to address issues and build resilience
4. Schools typically need to balance three priorities: taking care of people, restoring the functions of the school, and addressing the operational, administrative and legal requirements associated with a natural disaster
5. The increased workload associated with staff working in the role of first responder should be managed through the provision of workforce supports and ongoing professional learning. It is necessary to set realistic expectations of staff relative to the school context
6. Anticipate learning retention difficulties for children and young people affected by trauma and make suitable adjustments to curriculum, testing and monitoring for a nominated period
7. Anticipate and plan for delays in help-seeking from impacted students, staff and families
8. To implement the RRM, schools are encouraged to apply a recovery lens to established and existing school-based leadership and collegiate practices, such as PLC inquiry cycle or FISO improvement cycle.

Recovery and Resilience Model Elements

The process of recovery after an emergency event is complex, challenging, and multi-layered. While there are many different facets of the recovery process, often unique to individual settings and people, in a school setting, the process of recovery typically encompasses three elements:

- Routine and safety
- Health and wellbeing
- Belonging and connectedness.



Routine and safety

Post-emergency, schools play an important role in restoring a sense of routine and safety for children, young people and families.

Routine

During challenging and uncertain times, maintaining routine and structure around familiar daily activities can help children and adults to feel more secure, organised and in control of their day. Having a consistent daily schedule can help children and adults to:

- Know what is happening and what is next
- Know what is expected of them when undertaking activities and tasks
- Feel in control and comfortable in their environment.

When restoring a sense of routine after an emergency event, consider the continuum of predictability to adaptability for the setting and situation:



Predictable routines		Adaptable routines	
Strengths	Limitations	Strengths	Limitations
Methodical, repetitive and creates certainty	Lacks flexibility when there is a sudden change or challenge	Flexible and responsive	Inconsistent expectations can create confusion, uncertainty, or conflict
Collective understanding of what is expected	Change in routine can cause feelings of distress or frustration	Adaptable when conditions are changing or uncertain	Can be challenging to create consistency and calm at the whole school level
Consistent behaviours and habits		Can be used for shorter periods	

Safety

It is important for all members of a school community to feel safe and secure at school.

Physical safety:	Social and emotional safety:
<p>A sense of physical safety can be achieved by:</p> <ul style="list-style-type: none"> Ensuring the school buildings and grounds are restored after the emergency; hazards have been removed and the school is a physically safe environment Taking steps to ensure the school is a physically safe environment if it has been re-located to temporary buildings Adhering to all relevant department policies and processes relating to child safety. 	<p>A sense of social and emotional safety can be achieved by:</p> <ul style="list-style-type: none"> Ensuring existing policies and processes are followed to protect the social and emotional safety of all staff and students Establishing processes and practices post-emergency to identify, refer and support higher-risk students Providing additional professional learning and support on topics related to emergency management and relevant approaches.

Health and wellbeing

Disaster-related stressors and aftermath stressors can diminish the health and wellbeing of people impacted in a multitude of ways. Schools play an important role in supporting health and wellbeing of students, staff and school leaders through:

- Social and emotional curriculum
- Health and physical education curriculum
- School-based activities, initiatives, and strategies
- Professional learning
- Referral to external supports



The RRM encompasses four key facets of health and wellbeing:

Social	Emotional	Mental	Physical
Social health and wellbeing refers to an individual's ability to adapt in social situations, interact with others and capacity to form meaningful relationships.	Emotional health and wellbeing refers to an individual's ability to understand, accept and handle emotions, and relates to how effectively they can respond to the varied experiences, challenges and situations they encounter.	Mental health and wellbeing refers to a state in which individuals can cope with normal stresses and challenges of life, realise their abilities and can work productively, and contribute to groups and the community.	Physical health and wellbeing refers to taking care of one's body through routines relating to healthy eating, regular exercise and quality sleep. It includes maintaining a healthy quality of life and overall condition of one's body without

Belonging and connectedness

It is important for all members of the school community to feel a sense of belonging and connectedness to cultivate resilience and aid the recovery process. Connectedness can be experienced through authentic opportunities for quality communication between people and is key to fostering a sense of belonging.

Belonging

A sense of belonging occurs when individuals feel connected to a group and as though they are part of something bigger than themselves. When individuals feel a sense of belonging it can enhance a sense of identity, acceptance, trust, and inclusion within the group. A sense of belonging can also create feelings of security and support, which is vital in the recovery process.



Connectedness

A sense of connectedness to people and place can significantly aid the recovery process and can be achieved by:

- Fostering a relationship between school, students and families
- Fostering a relationship between peers (students) and colleagues (teachers)
- Enhancing community spirit through links to community networks
- Considering cultural beliefs and practices, particularly of Aboriginal and Torres Strait Islander people, and applying this connection when establishing recovery processes
- Considering links to the environment to support healing and restoration.

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Recovery and Resilience Model

Implementation Guide for Schools (2024)

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Implementing the Recovery and Resilience Model

Following a disaster event school recovery is typically focused on restoring normality to the school community and re-establishing pre-disaster conditions. There is a different focus to usual school improvement practices, however, both disaster recovery and school improvement ultimately place learning and wellbeing at the centre to enable all students to become:

- Happy, healthy and resilient
- Successful lifelong learners
- Active, informed members of just and sustainable communities.

Approaches to implementation

The RRM is a problem-solving framework designed to support schools to focus their efforts on the key areas known to be vital to school recovery and resilience after a disaster event:

- Routines and safety
- Health and wellbeing
- Belonging and connectedness.

Factors affecting recovery

A commitment to healing and restoring a school community is at the core of the RRM. Every school is impacted by a disaster event differently. Fostering resilience and the process of recovery can be complex.

Factors that influence the degree of impact and period for recovery may include:

- Extent of physical impact on school and community, including buildings, yard and resources
- Extent of loss in the school community, including housing, possessions, livestock/animals and equipment
- Experiences of critical incidences leading to loss of life during the emergency event
- The relationship between the school and community prior to the emergency event and in the period following
- School leadership disposition and level of experience managing an emergency event
- The vulnerability of the school prior to the emergency event as determined by vulnerability matrix and system level data
- The level of cascading and collective harm and trauma experienced by the school and community prior to the emergency event
- Level of trust and engagement with support and resources provided by the department
- The relationship between the school and department staff/representatives.

Applying a recovery lens to the FISO improvement cycle

The following guidance provides a step-by-step approach to applying the four steps of the FISO Improvement Cycle with the recovery process.

Steps	FISO Improvement Cycle
Step 1: Gather and analyse data	Evaluate and diagnose
Step 2: Examine current processes and practices	Prioritise and set goals
Step 3: Identify and plan actions	Develop and plan
Step 4: Implement and monitor impact	Implement and monitor

Step 1: Gather and analyse data

It is recommended that schools use the following data sources to identify and analyse areas of student learning and wellbeing, and staff wellbeing to inform the recovery process. The questions below can be used to support this process.

Type of data	Data source	Inquiry questions
System measures	<ul style="list-style-type: none"> Attitudes to school survey (AToSS) Staff opinion survey (SSS) Parent opinion survey (POS) Attendance data Victorian curriculum teacher judgements NAPLAN data VCE data 	<ul style="list-style-type: none"> On which measures do we have pre-conditions that will support school recovery? On which measures, if any, do we have pre-existing vulnerabilities that may delay school recovery?
School-based measures	<ul style="list-style-type: none"> Student management, wellbeing or other behavioural data recorded on the learning management system (LMS) Teacher assessment records (formative and summative assessment) Individual student work/artefacts Progress reporting data (if available) Locally developed surveys and community feedback 	<ul style="list-style-type: none"> Which areas do we need to prioritise and allocate more resources to? What is an appropriate period to differentiate or modify curriculum, testing and monitoring to consider learning retention difficulties following trauma? What are realistic expectations for staff and students within the school recovery context?

Learning example	Wellbeing example
In an evaluation of formative and summative assessment data, the school finds that most Grade 1 students are struggling to make progress in reading.	In an evaluation of student management records, 48% of students in Year 9 require Tier 2 wellbeing supports.

Step 2: Examine current processes and practices

Current school processes and practices can be examined using the FISO 2.0 core elements and recovery-related inquiry questions. The following steps expand on the examples from Step 1.

Learning example
<ol style="list-style-type: none"> 1. Teaching and learning: <ol style="list-style-type: none"> a. Can the current reading program be modified to consider learning and retention difficulties experienced post-trauma? 2. Assessment: <ol style="list-style-type: none"> a. What insight do the results from reading assessment tasks provide about the areas of reading that cause most difficulty? b. Does the data inform what modifications to the reading curriculum are required? 3. Engagement: <ol style="list-style-type: none"> a. Are there alternative texts that can be used to support social and emotional learning? b. Are there alternative pedagogies that can be used as part of a modified reading program? c. Do we need to alter classroom routines related to reading? d. How are we engaging families/carers in our revised teaching of reading? 4. Support and resources: <ol style="list-style-type: none"> a. Do we have support structures in place for students in need of additional supports or extension? b. Is there any evidence to suggest that we need to source alternative texts that are trauma-informed to cater to the social and emotional needs of students? 5. Leadership: <ol style="list-style-type: none"> a. How are we providing support to our Grade 1 teachers? b. Do our Grade 1 teachers need additional professional learning for reading?

Wellbeing example
<ol style="list-style-type: none"> 1. Teaching and learning: <ol style="list-style-type: none"> a. Are there changes that can be made to the lesson structure to include routines around coping and self-regulation skills? b. Does the Social and Emotional Learning (SEL) curriculum for Year 9 need to be reviewed to include learning activities relating to the most commonly identified wellbeing needs? 2. Assessment: <ol style="list-style-type: none"> a. Are our methods for determining the level of supports needed for individual students being applied consistently? b. Do we need to review our processes around identification of higher-needs students? 3. Engagement: <ol style="list-style-type: none"> a. How are wellbeing needs impacting engagement in learning in Year 9?

- b. Where in the school environment are the most complex wellbeing needs in Year 9 most evident?
 - c. What strategies have been used in other year levels to support more complex wellbeing needs and could be implemented for Year 9 students?
4. Support and resources:
- a. Are there Tier 1 supports that could be put in place for Year 9 to reduce the Tier 2 wellbeing case load?
 - b. Is there additional professional learning that could be provided to Year 9 teachers to support them to cater to more complex wellbeing needs in their students?
5. Leadership:
- a. Have we provided sufficient support and resources to teachers, students and families of Year 9 students?
 - b. Do we need to source and engage more external supports to meet the more complex wellbeing needs that are currently being identified?

Step 3: Identify and plan actions

Use the analysis from Step 1 and 2 to identify and plan actions that will address the areas of focus to support school recovery.

To identify and plan actions:

1. Map out and determine change in practices
2. Determine timelines and set realistic expectations

Multi-Tiered System of Support

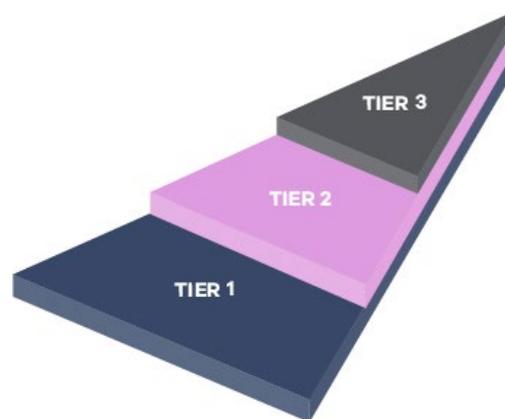
The RRM integrates a recovery lens to the Multi-Tiered System of Support (from School Wide Positive Behaviour Support) as an evidence-based model to organise the continuum of support post-emergency, relating to academic, behaviour and wellbeing outcomes.

By understanding the MTSS, schools can engage in planning and decision making about where to direct focus and resources during the three phases of recovery.

Tier 1 represents recovery-focused universal practices that support all students, all classrooms and involve the whole school.

Tier 2 represents targeted supports for students with additional needs and showing risk factors related to recovery.

Tier 3 represents individualised supports that involves intensive interventions for high-risk students with higher needs related to recovery.



Learning example	Wellbeing example
<p>Organise professional learning for Grade 1 teachers.</p> <p>Allocate additional planning time to Grade 1 teachers.</p> <p>Make modifications to the reading curriculum:</p> <ul style="list-style-type: none"> - Increased use of visual aids - Alter the time allocated to each unit of work - Develop differentiated tasks - Source alternative mentor texts - Alter testing cycles <p>Use pre- and post- assessment to inform planning.</p>	<p>Organise professional learning for Year 9 teachers</p> <p>Review processes being used to identify high-needs students</p> <p>Make modifications to the lesson structure for Year 9 to include meditation and breathing exercises at the start and end of the day</p> <p>Alter the SEL curriculum plan to include a unit on expression through the arts for Year 9.</p>

Step 4: Implement and monitor impact

School recovery is a complex and fluctuating process. The implementation and monitoring of strategies and actions to support school recovery requires time and attention. Responsiveness to implementation barriers and changing needs through the different stages of the recovery process can foster healing and promote a return to normality.

Ongoing monitoring can be used to identify emerging areas of focus over time and the evidence-based strategies and actions listed in the next section are a useful resource to support implementation and monitoring.

Consider the use of simple tools, checklists, and check-ins in combination with system-level data to regularly monitor recovery progress. It is recommended that schools plan for and anticipate delayed responses to trauma.

Learning example	Wellbeing example
<p>Establish a team of Prep, Grade 1 and Grade 2 teachers to build a shared understanding of the impact of trauma on learning retention for reading and gather evidence related to pedagogies and curriculum practices that can be implemented within a sequence of learning.</p> <p>The Grade 2 curriculum for the following year is modified in response to Grade 1 reading data.</p>	<p>Adjustments are made to the processes used to identify and monitor higher-needs students.</p> <p>The effectiveness of changes made to the lesson structure and SEL curriculum is monitored by Year 9 teachers and evaluated quarterly.</p>

Strategies and actions for school leaders and staff

Strategies and actions for school leaders

Recovery phase	 Sense of routine and safety	 Sense of health and wellbeing	 Sense of belonging and connectedness
Relief and early recovery	<ul style="list-style-type: none"> • Co-ordinate physical recovery response. • Establish processes and practices for the relief and early recovery stage. • Establish realistic expectations for students and staff. • Re-establish routines as part of restoring a sense of normality, with suitable adjustments made to consider the needs of students and staff. • Nominate an appropriate period for which teachers will modify curriculum delivery, testing and monitoring to take into consideration learning retention difficulties for children and young people who have experienced trauma. • Provide time and resources to teachers/teaching teams to plan for curriculum modifications. • Address the wellbeing and professional needs of teachers as first responders by facilitating 	<ul style="list-style-type: none"> • Take steps to ensure the physical safety and wellbeing of students and staff is protected. • Support teachers to develop/adjust the existing Social and Emotional Learning (SEL) Program to focus on coping and self-regulating strategies, skills for self-care and creating time and space to make sense of what has happened. • Provide leadership and collegial support to meet the health and wellbeing needs of teachers acting in the role of first responder. • Consider and plan for how the school can support staff health and wellbeing in the immediate post-emergency phase. • Promote initiatives, resources and programs designed to support staff health and wellbeing. • Utilise department resources and supports to develop a professional learning plan that will both support teachers to deliver the SEL Program and process their 	<ul style="list-style-type: none"> • Acknowledge the important role a school plays within a community following an emergency to foster community spirit. • Maintain open communication and collaboration with external supports, Department of Education supports and key organisations in the local community, such as Emergency Services or Country Fire Authority. • Consider and plan for how the school can support families as part of the immediate post-emergency recovery response. • Consider and plan for how the school community can connect with the local community as part of the immediate post-emergency recovery response. • Plan for how the needs of culturally and linguistically diverse individuals and groups can be met, for example, considering the cultural connection to the natural environment for Aboriginal people.

	<p>professional learning and supports relevant to the immediate post-emergency situation (collegial, pedagogical, and psychological).</p> <ul style="list-style-type: none"> • Make suitable alterations to the requirements expected of teachers, such as reporting requirements and meeting schedules. • Create time and space in the school day for students to adjust and manage their recovery, and for staff to manage increased workload associated with an emergency. • Develop a cycle for debriefing and planning to enable teams (such as leadership, student management, wellbeing, and curriculum) to be responsive to changing circumstances. 	<p>experiences. This may include refresher training on mandatory reporting and a focus on how to handle disclosures from students.</p> <ul style="list-style-type: none"> • Establish processes relating to supports and referrals for students with heightened needs. • Engage with external support services where required. • Establish and communicate realistic expectations for teachers in the period relief and early recovery period. Be mindful that educators are typically stretched beyond their role in response to a disaster as they seek to meet needs within the community. 	<ul style="list-style-type: none"> • Determine processes and practices to “check-in” with students and staff for early identification of higher needs/high-risk individuals. • Plan for pro-social activities to recommence as soon as possible. • Seek input from stakeholders to inform planning and decision-making.
<p>Medium-term recovery</p>	<ul style="list-style-type: none"> • Maintain routines of the school, with suitable adjustments made to consider the needs of students and staff in the short-medium term. • Review the period for which teachers modify curriculum delivery, testing and monitoring to take into consideration learning retention difficulties for children and young people who have experienced trauma. Extend the period where required. • Provide time and resources to teachers/teaching teams to plan for curriculum modifications. 	<ul style="list-style-type: none"> • Broaden the whole-school SEL Program to include expression through the arts and collaborative play and facilitate professional learning where required. • Where relevant and appropriate, introduce curriculum and whole-school initiatives related to physical health and wellbeing in topics such as sleep, nutrition, and exercise. In communities where local recreation facilities have been closed, including more opportunities for physical exercise in the school day may help children to discharge stress. 	<ul style="list-style-type: none"> • Plan for how individuals and groups within the school community can be brought together to foster a sense of belonging and connectedness. • Plan for how the school can support families in the medium-term. • Plan for how the school can connect with the local community as part of the medium-term recovery response, for example, through the arts or the natural environment. • Determine processes and practices to “check-in” with students and staff for identification of higher needs that emerge in the medium-term.

	<ul style="list-style-type: none"> • Create in-school support structures targeting professional learning and support needs of staff (collegial, pedagogical, and psychological). • Create time and space in the school day for students to adjust and manage their recovery, and for staff to manage increased workload associated with an emergency. 	<ul style="list-style-type: none"> • Continue to provide leadership and collegial support for teachers, with a focus on showing appreciation for work, effectively managing stress and workload, and instilling a sense of purpose. • Consider and plan for how the school can support staff health and wellbeing in the medium-term phase. • Investigate and promote initiatives, resources and programs designed to support staff health and wellbeing. • Monitor and maintain processes relating to supports and referrals for students with heightened needs. • Consider the extent to which the school has capacity to extend the SEL Program to parents and caregivers, for example, information sessions or home-based activities. • Engage with external support services. • Establish the pre-conditions needed to shift from a reactive to proactive state. • Maintain a cycle for debriefing and planning to enable teams (such as leadership, student management, wellbeing, and curriculum) to be responsive to changing circumstances. 	<ul style="list-style-type: none"> • Plan for pro-social activities to promote social connectedness and belonging. • Seek input from stakeholders to inform planning and decision-making.
Longer-term recovery	<ul style="list-style-type: none"> • Maintain realistic expectations for students and staff. 	<ul style="list-style-type: none"> • Shift the focus of the SEL Program to longer-term protective factors 	<ul style="list-style-type: none"> • Maintain processes and practices to “check-in” with students and staff for

- Maintain routines of the school, with a focus on building resilience for life and capacity to cope with future challenges.
- Restore curriculum delivery, testing and monitoring to normal, with consideration of learning retention difficulties for children and young people who have experienced trauma.
- Maintain in-school support structures targeting professional learning and support needs of staff (collegial, pedagogical and psychological).
- Retain effective practices that foster recovery and help staff to regulate workload.

- such as emotional regulation, empathy, decision-making, positive relationships, teamwork, conflict resolution and leadership. Existing policies and curriculum can be used to inform the SEL program in the long term.
- Existing policies and curriculum can be used to inform the provision of physical health and wellbeing program/s long term.
 - Continue to provide leadership and collegial support for teachers, with a focus on showing appreciation for work, effectively managing stress and workload, and instilling a sense of purpose.
 - Consider and plan for how the school can support staff health and wellbeing in the longer-term.
 - Investigate and promote initiatives, resources and programs designed to support staff health and wellbeing longer term.
 - Engage with external support services.
 - Establish and communicate realistic expectations for teachers in the longer-term, with a focus on the school shifting to and maintaining a proactive state.

- identification of higher needs that emerge in the longer-term.
- Embed pro-social activities that promote social connectedness and belonging into the school calendar.
 - Seek input from stakeholders to inform planning and decision-making.

Strategies and actions for staff

Recovery phase	 Sense of routine and safety	 Sense of health and wellbeing	 Sense of belonging and connectedness
Relief and early recovery	<ul style="list-style-type: none"> • Re-establish classroom routines, with modifications made to the routines based on the present situation at the school. • Re-establish a focus on learning, with appropriate modifications made to curriculum delivery, testing and monitoring for a nominated period. • Re-establish a focus on behaviour based on positive approaches to behaviour management, with suitable adjustments to classroom routines and expectations based on school context. • Provide students and families with additional reminders of changes to routines, timetables or events. • Follow whole-school processes to notice, support or refer students with higher needs. • Engage with professional learning and supports related to professional and wellbeing needs for teachers in the role of first responders. 	<ul style="list-style-type: none"> • Prioritise and deliver SEL initiatives focused on coping and self-regulating strategies and skills for self-care. • Modify curriculum delivery for the nominated period to take into consideration learning retention difficulties for children and young people who have experienced trauma. • Engage in professional learning relating to student and staff wellbeing. • Engage with supports relating to the health and wellbeing needs of teachers acting in the role of first responder. • Follow processes relating to supports and referrals for students with heightened needs. • Provide collegial support to others and work collaboratively with school leadership. • Meet realistic expectations for teachers in the relief and early recovery period. • Prioritise self-care and personal health and wellbeing. Access additional supports for personal health and wellbeing when needed. Be aware of vicarious trauma 	<ul style="list-style-type: none"> • Create structured time and space in the school day to foster connectedness, contribution, and care for students. • Manage opportunities for students to re-tell or reflect on what has happened, aim to focus on the positives and strengths people and the community have used to help each other. • Use trauma-informed approaches and positive approaches to behaviour management to foster positive relationships with students and staff. • Follow school processes for early identification of high-risk or higher needs students to connect with supports. • Cater to the needs of cultural and linguistic diverse students, colleagues, and families. • Accommodate the varying needs of students with disabilities. • Be mindful that educators are typically stretched beyond their role in response to a disaster as they seek to meet needs within the community, practice self-awareness and self-regulation to minimise the

		symptoms and engage in self-care practices.	day-to-day impact of the immediate post-recovery period.
Medium-term recovery	<ul style="list-style-type: none"> • Maintain classroom routines, with a focus on transitioning to a return to normal routines, where appropriate. • Maintain a focus on learning, with appropriate modifications made to curriculum delivery, testing, and monitoring where needed for a nominated period. • Maintain a focus on behaviour based on positive approaches to behaviour management, with suitable adjustments to classroom routines and expectations based on the school context. • Maintain realistic expectations for students, with suitable adjustments made to consider the learning and wellbeing needs of students. • Follow whole-school processes to notice, support or refer students with higher needs. • Engage with professional learning and supports related to professional and wellbeing needs of teachers in the school context. 	<ul style="list-style-type: none"> • Broaden SEL initiatives to include expression through the arts and collaborative play, in accordance with the whole-school plan. • Facilitate curriculum and whole-school initiatives related to physical health and wellbeing (sleep, nutrition, and exercise). • Engage in professional learning and supports relating to recovery. • Follow processes relating to supports and referrals for students with heightened needs. • Provide collegial support to others and work collaboratively with school leadership. • Prioritise self-care and personal health and wellbeing. Access additional supports for personal health and wellbeing when needed. Be aware of vicarious trauma symptoms and engage in self-care practices. 	<ul style="list-style-type: none"> • Create structured time and space in the school day to foster connectedness, contribution and care for students. • Use trauma-informed approaches and positive approaches to behaviour management to foster positive relationships between students and staff. • Incorporate activities to lift the mood or for fun to encourage a sense of belonging and connectedness, such as play, non-competitive games and via music. • Follow school processes for identification of high-risk or higher needs students and families to be connected with supports. • Consider the role of connection to culture and the environment as part of recovery, for self and others. • Cater to the needs of cultural and linguistically diverse students, colleagues, and families. • Accommodate the varying needs of students with disabilities. • Practice self-awareness and self-regulation to minimise the day-to-day impact of the short-medium term recovery period. • Personally aim for moderate involvement in local groups within

the community. Having many moderately involved people has a more positive impact on individual and community mental health than fewer highly involved people.

			<p>the community. Having many moderately involved people has a more positive impact on individual and community mental health than fewer highly involved people.</p>
<p>Longer-term recovery</p>	<ul style="list-style-type: none"> • Maintain classroom routines, with a focus on transitioning to normal classroom routines to build resilience for life and capacity to cope with future challenges. • Maintain a focus on learning and transition to regular curriculum delivery, testing and monitoring. • Maintain a focus on behaviour based on positive approaches to behaviour management. • Follow whole-school processes to notice, support or refer students with higher needs. • Engage with professional learning and supports related to professional and wellbeing needs for teachers in the long-term. 	<ul style="list-style-type: none"> • Broaden SEL initiatives to long-term protective factors such as emotional regulation, empathy, decision-making, positive relationships, teamwork, conflict resolution and leadership. Existing policies and curriculum can be used to inform the SEL program in the long term. • Existing policies and curriculum can be used to inform the provision of physical health and wellbeing program/s longer-term. • Engage in professional learning and supports relating to longer-term recovery. • Follow processes relating to supports and referrals for students with heightened needs. • Provide collegial support to others and work collaboratively with school leadership. • Be aware of vicarious trauma symptoms and engage in self-care practices. 	<ul style="list-style-type: none"> • Follow school processes for identification of high-risk or higher needs students and families to be connected with supports. • Consider the role of connection to culture and the environment as part of recovery, for self and others. • Cater to the needs of cultural and linguistically diverse students, colleagues and families. • Accommodate the varying needs of students with disabilities.

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Three Phases of Recovery

Information for Schools (2024)

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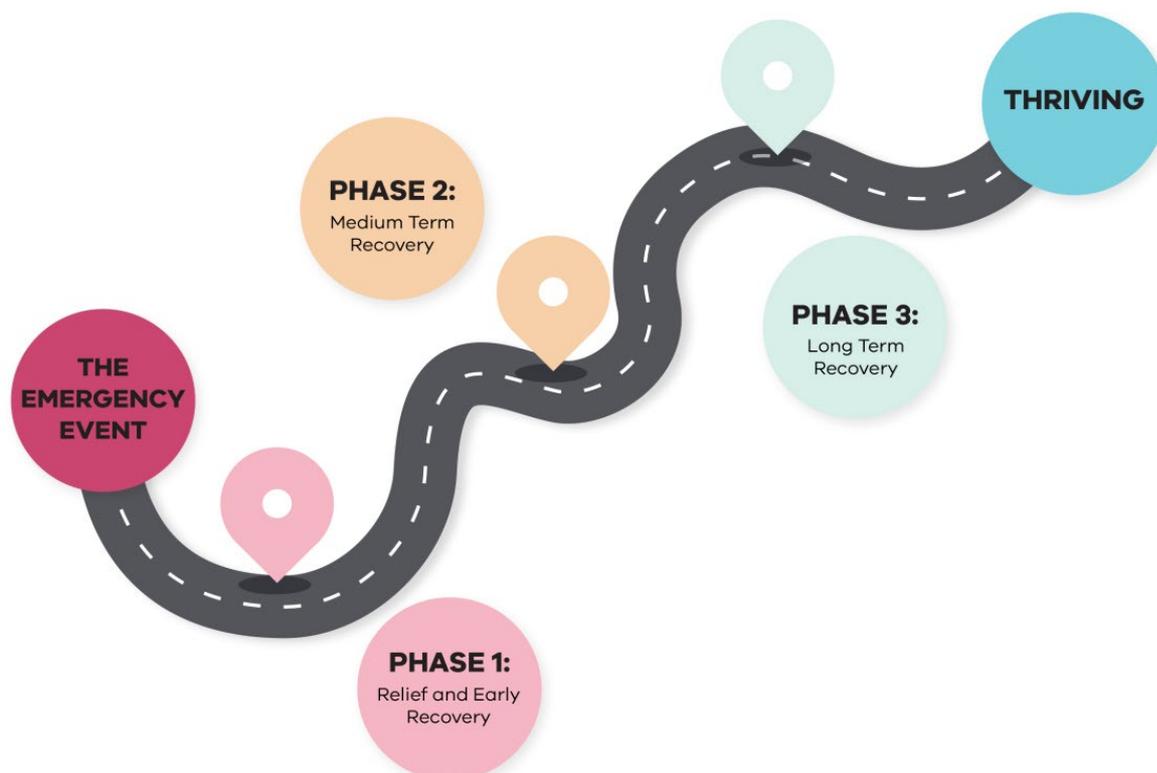
Introduction

While recovery after an emergency event is not necessarily a linear experience, there are typically three main phases of recovery:

Phase 1: Relief and early recovery

Phase 2: Medium-term

Phase 3: Longer-term recovery



Every school is impacted by emergency events differently and has unique needs during the three phases of the recovery. In the modern context, further disruption and the presence of cascading disaster events can compound impacts, and movement through the recovery phases may become iterative. The recovery of a school is complex, and the associated workload of leading recovery efforts can be significant, as such the time it takes to move through the process will vary accordingly.

Three Phases of Recovery

Phase 1: Relief and early recovery

During the relief and early recovery phase, the threat of active emergency has typically passed, and the community becomes focused on restoration activities, including clean-up and re-location of people in temporary housing. In this phase, there may still be watch and act orders in place, or threat of a recurrence of the emergency event. This phase is typically reactive for schools and the broader community.

The length of time spent in the relief and early recovery phase is varied and dependent upon a range of factors and the degree of impact on the community. Where the degree of impact is lower, the relief and early recovery phase is typically shorter in length. While for communities where the degree of impact is higher, the relief and early recovery phase can be longer.

Furthermore, a prolonged period preparing for an emergency, prior to the onset of the disaster, can also be a traumatic experience for a school community, resulting in more complex recovery needs in the relief and early recovery phase.

Schools often play a vital role in the relief and early recovery phase by:

- Acting as an evacuation point or emergency centre
- Providing care and support to students and families
- Disseminating information to students and families
- Navigating early identification and referral for higher needs individuals (Tier 2 and 3 supports)
- Connecting and collaborating with the broader community
- Leading restoration of routine and safety for young people and their families (Tier 1 supports)
- Understanding what support is available from the department.



The relief and early recovery phase is a complex and demanding time for school leaders and staff. This phase is important as the initial approach adopted can influence long-term recovery. Challenges may include:

- Physical relocation of the school to a temporary site
- Clean-up efforts and repairs
- School site being used as an evacuation point or community hub
- Staff acting as a first responder to support students and families, while managing own experiences of the emergency event
- Staff managing increased workload and reduced capacity to maintain self-care
- Difficulties engaging in strategic planning following a traumatic experience
- Significant increase in administrative and compliance requirements associated with an emergency event

- Triaging donations and other contributions made by the broader community in support of recovery efforts
- Identifying and managing available supports as part of the relief and early recovery response
- Meeting the complex and diverse needs of people within the school community, often without adequate training or professional expertise in areas such as trauma or emergency management
- Navigating relationships with community agencies seeking access to staff and students to run professional learning or programs.

Phase 2: Medium-term

The shift from the relief and early recovery phase to the medium-term phase of recovery typically begins when the immediate threat to safety has passed, essential services have been restored and the recovery efforts are focused on returning a sense of normality to the community.

The length of time spent in the medium-term phase of recovery varies significantly across different contexts. Typically, the recovery process is relative to the degree of impact experienced. For schools who experience low-moderate impact, this phase may last weeks or months. In highly impacted schools, the medium-term phase may be many months or even years.

Schools play a vital role in the medium-term recovery phase by:

- Providing care and support to students and families
- Disseminating information to students and families
- Identifying and arranging referrals for higher needs individuals (Tier 2 and 3 supports)
- Initiating universal interventions (Tier 1 supports) to foster resilience and recovery
- Restoring a sense of routine and normality for children, young people and families
- Providing a safe place for students to connect and play, learn skills and strategies related to resilience and coping, and engage in physical activity and creative expression
- Connecting with the broader community to foster community spirit
- Understanding what support is available from the department.



The medium-term phase remains a complex and demanding time for school leaders and staff. Challenges may include:

- Re-establishing the functioning of the school on a temporary site
- Overseeing the rebuilding of the school and the process of moving back into new buildings
- Restoring or replacing resources

- Staff continuing to act as a first responder to support students and families, while managing own experiences of the emergency event
- Staff managing increased workload, the toll that sustained efforts can take, and reduced capacity to maintain self-care
- Responding to increased complexity relating to classroom behaviours, attendance, health and wellbeing needs, and social issues that typically arise post-emergency
- Modifications to curriculum delivery, and testing and monitoring in response to learning retention difficulties for students who have experienced trauma
- Navigating an increased need for external supports and referrals for individuals and groups following the impacts and associated trauma of the emergency
- Significant increase in administrative and compliance requirements associated with an emergency event
- Triaging donations and other contributions made by the broader community in support of recovery efforts
- Meeting the complex and diverse needs of people within the school community, often without adequate training or professional expertise in areas such as trauma or emergency management
- Potential community unrest as different groups with differing priorities and perspectives begin to form
- Resourcing shortages, particularly for regional and remote communities, including limited access to allied health services.

Phase 3: Longer-term

The transition from medium-term to longer-term recovery typically occurs gradually. In the longer-term recovery phase, the day-to-day work of a school has resumed, with regular curriculum delivery, testing and monitoring practices restored. For schools relocated to a temporary site, in the longer-term phase, they will be returned to the original site in repaired or rebuilt buildings.

The longer-term phase is also an opportunity for schools to foster sustained community resilience and engage in emergency preparedness for the future.

Schools play a vital role in the longer-term recovery phase by:

- Providing ongoing identification and referral for higher needs individuals (Tier 2 and 3 supports)
- Maintaining a sense of safety, routine and normality for children, young people and families
- Implementing initiatives and programs to address gaps in learning that typically occur after an emergency event, particularly in the areas of reading and numeracy (Tier 1 supports)
- Supporting career pathway planning for senior secondary students
- Forging ongoing connection with the broader community to foster community spirit
- Establishing memorials, rituals, or initiatives as part of long-term healing
- Understanding what support is available from the department.

In the longer-term phase schools can look towards the future with a sense of hope, however difficulties may still arise. Challenges may include:

- Increased incidence of teacher stress, burn out and higher than usual staff turnover
- Ongoing responsiveness to increased complexity relating to classroom behaviours, attendance, health and wellbeing needs, and social issues that typically arise post-emergency
- Implementation of interventions to address learning gaps arising from learning-retention difficulties and modified programs introduced in the medium-term following the emergency event
- Navigating potential need for ongoing external supports and referrals for some individuals and groups following the impacts and associated trauma of the emergency
- Managing resourcing needs as emergency related support programs and initiatives begin to come to an end
- Possible ongoing community unrest as different groups with differing priorities and perspectives may still be in conflict
- More apparent chronic resourcing shortages, particularly for regional and remote communities, with possible ongoing shortages of allied health personnel at both a system and community level
- Apply reflective processes to inform emergency preparedness planning for the future.

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