

SENATOR
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CO-CHAIR



REPRESENTATIVE
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CO-CHAIR

BASIC EDUCATION FUNDING COMMISSION

HEARING AGENDA

December 14, 2023 – 9AM

**North Office Building, Hearing Room #1
Harrisburg, PA**

- 9:00 a.m. Call to Order and Opening Remarks
- Sen. Kristin Phillips-Hill, 28th Senatorial District
 - Rep. Mike Sturla, 96th Legislative District
- 9:10 a.m. Presentation by the Independent Fiscal Office:
- Matthew Knittel, Director
- 9:20 a.m. Questions & Answers
- 9:30 a.m. Closing Remarks and Adjournment



INDEPENDENT FISCAL OFFICE

TO: Honorable Members of the Basic Education Funding Commission

FROM: Matthew Knittel, Director
Independent Fiscal Office

DATE: December 14, 2023

RE: Results from the 2023 Basic Education Funding Commission Survey

This document provides summary tabulations for the Basic Education Funding Commission (BEFC) survey sent by the Pennsylvania Department of Education to 100 school districts and 25 charter schools in October 2023. The data reflect all responses submitted by survey recipients. The school districts and charter schools surveyed represent the same sample used in the April 2015 BEFC survey to facilitate a comparison between the two surveys. All survey questions are the same as the April 2015 survey except for four new questions that pertain to facility assessments. Results from the prior survey can be found in the "*Basic Education Funding Commission Report and Recommendations*" (June 18, 2015).

The BEFC received 84 completed school district surveys (84% response rate) and 11 charter school surveys (44%). Because large districts and charters submitted surveys, response rates weighted by the share of the student population surveyed are higher: 93% for school districts and 72% for charters. For the 2015 survey, the comparable weighted response rates were 89% (school districts) and 77% (charters).

The office would like to thank all survey respondents, the Pennsylvania Department of Education (PDE), the Pennsylvania Association of School Business Officials (PASBO) and BEFC staff for their assistance with the administration of this survey.

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Introduction

This document provides summary data from the Basic Education Funding Commission (BEFC) survey sent to 100 school districts and 25 charter schools in October 2023. The statistics reflect all responses submitted by survey recipients. Relevant comments or clarifications are included in the notes to tables.

The school districts and charter schools surveyed in October 2023 use the same sample and data groups as the April 2015 BEFC survey to facilitate a comparison between the two surveys. The sample selection process used data from school year (SY) 2012-13 and separated districts into four groups based on their SY 2012-13 school performance profile (SPP) score: (1) high performance (SPP 90.0%+), (2) good (80.0-89.9%), (3) proficient (70.0-79.9%) and (4) low performance (<70.0%) schools.¹ It is noted that the computation of district SPP scores was discontinued shortly after the 2015 survey. However, based on other performance metrics computed for SY 2021-22, most districts maintained their relative performance level compared to other districts included in the sample. Therefore, the same relative groupings still generally apply for SY 2021-22 (i.e., high performers in SY 2012-13 remain high performers now).

The two tables that follow provide cross tabulations for 499 school districts across the four SPP groups based on four metrics: (1) share of economically disadvantaged (ED) students, (2) share of English learners (ELs), (3) taxable income per average daily membership (ADM) and (4) regular instruction costs per ADM. While the SPP groups use scores from SY 2012-13, all other data are from SY 2021-22, the data year used by 2023 survey respondents. All tabulations are weighted by the number of ADM.

The top half of the table below displays the number and share of school districts and ADM across the four SPP groups. The data show that 83 high-performing districts comprised 24.4% of total ADM for SY 2021-22, while 91 low-performing districts comprised 29.3% of total ADM. The bottom half displays average values for the four metrics across the groups, weighted by the number of ADM. The data reveal that SPP scores have (1) a negative relation with ED and EL concentration, (2) a positive relation with taxable income per ADM and (3) no clear relation with regular instruction cost per ADM.

School District Characteristics by SPP Score					
	School Performance Profile (SPP) Score				Total
	90.0%+	80.0-89.9%	70.0-79.9%	<70.0%	
Number of School Districts	83	151	174	91	499
Share of Total	16.6%	30.3%	34.9%	18.2%	100.0%
Total ADM (000s)	412,577	432,837	347,917	494,171	1,687,503
Share of Total	24.4%	25.6%	20.6%	29.3%	100.0%
Weighted Avg. (by ADM)					
ED Student Concentration	21.8%	38.0%	47.6%	71.4%	45.8%
EL Student Concentration	2.7%	2.7%	2.4%	11.4%	5.2%
Taxable Income per ADM	\$425,169	\$266,764	\$205,081	\$174,349	\$265,712
Reg. Instruction Costs per ADM	\$8,830	\$8,029	\$8,197	\$8,729	\$8,464

¹ For a complete description of the selection of school districts and charter schools, see page 99 to 105 in the "Basic Education Funding Commission Report and Recommendations" dated June 18, 2015.

The table on the next page provides greater detail and shows how students are dispersed across the four groups and four metrics. All percentages in the table are weighted by ADM, and the individual cells sum to 100%. For example, the table shows that 19.2% of total ADM (third data row, first data column) were in a district with an SPP score higher than 90% and an ED concentration below 30%. School districts with an SPP score below 70% and an ED concentration higher than 70% (sixth data row, fourth data column) reported 20.7% of total ADM. This presentation is repeated for the four metrics.

The data for all districts reveal the following trends across the four SPP groups:

ED Student Concentration The high-performance group (SPP 90%+) has a much lower concentration of ED students. For that group, 79% (19.2 / 24.4) of students attended a school district where less than 30% of students were ED. By contrast, no students in the low-performance group (SPP < 70.0%) attended a school district where less than 30% of students were ED. Rather, the majority (71% or 20.7 / 29.3) attended a district where more than 70% of students were ED.

EL Student Concentration Similar results hold for the concentration of EL students. The top three groups have much lower concentrations of EL students than the low-performance group.

Taxable Income per ADM This metric may capture intangibles outside of school that are positively related to SPP scores. The high-performance group has a much higher taxable income per ADM compared to the low-performance group.

Regular Instruction Costs per ADM This metric generally reflects classroom costs only and excludes expenses related to debt, special education and administrative costs. Compared to other metrics, the data are less clear regarding the relation between regular instruction spending per ADM and SPP scores. For example, roughly 12% (2.9 / 24.4) of students in the high-performance group attended a school district where this metric fell below \$7,500. For the low-performance group, the comparable figure is 18% (5.2 / 29.3).

Detailed School District Characteristics by SPP Score

	School Performance Profile (SPP) Score				Total
	90.0%+	80.0-89.9%	70.0-79.9%	<70.0%	
Number of School Districts	83	151	174	91	499
Share of All Students (ADM)	24.4%	25.6%	20.6%	29.3%	100.0%
ED Student Concentration					
<30.0%	19.2%	7.4%	0.8%	0.0%	27.4%
30.0 - 49.9%	5.2%	13.9%	10.7%	1.4%	31.2%
50.0 - 69.9%	0.1%	4.4%	8.4%	7.1%	20.0%
70.0%+	<u>0.0%</u>	<u>0.0%</u>	<u>0.7%</u>	<u>20.7%</u>	<u>21.4%</u>
Total	24.4%	25.6%	20.6%	29.3%	100.0%
EL Student Concentration					
<1.0%	3.1%	10.1%	10.4%	4.3%	27.8%
1.0% - 4.99%	18.6%	11.3%	6.8%	3.5%	40.2%
5.0%+	<u>2.8%</u>	<u>4.2%</u>	<u>3.4%</u>	<u>21.5%</u>	<u>31.9%</u>
Total	24.4%	25.6%	20.6%	29.3%	100.0%
Taxable Income per ADM					
<\$125,000	0.0%	0.1%	0.5%	6.9%	7.5%
\$125,000 - \$199,999	0.1%	6.3%	9.8%	18.0%	34.2%
\$200,000 - \$249,999	1.5%	8.5%	6.9%	2.4%	19.3%
\$250,000+	<u>22.9%</u>	<u>10.8%</u>	<u>3.4%</u>	<u>1.9%</u>	<u>39.0%</u>
Total	24.4%	25.6%	20.6%	29.3%	100.0%
Reg. Instruct. Costs per ADM					
<\$7,500	2.9%	10.0%	6.9%	5.2%	25.0%
\$7,500 - \$9,999	18.4%	13.0%	12.6%	22.2%	66.1%
\$10,000+	<u>3.2%</u>	<u>2.7%</u>	<u>1.1%</u>	<u>1.9%</u>	<u>8.8%</u>
Total	24.4%	25.6%	20.6%	29.3%	100.0%

Note: All tabulations are weighted by the school district's share of total Average Daily Membership (ADM). Excludes Bryn Athyn SD because there are less than 10 students. Regular Instruction Costs is 1100 Regular Programs - Elementary/Secondary.

Survey Sample and Response Rate

In October 2023, the BEFC survey was sent to 100 school districts and 25 charter schools. Through December 1, 2023, the BEFC received 84 completed school district surveys (84% response rate) and 11 charter school surveys (44%). Because large districts and charters had higher response rates, responding school districts comprise 93% of students for those surveyed, and responding charters comprise 72% of students for those surveyed.

Per instructions from the BEFC, the survey sample is representative of school districts across the four SPP groups and is geographically diverse. The sample was constructed to oversample “good school districts” with an SPP score between 80.0% and 89.9% that also had ED, EL, taxable income per ADM and instructional cost per ADM characteristics that were representative of statewide median values. (For a complete description of the sample selection methodology, see page 99 of the “*Basic Education Funding Commission Report and Recommendations*,” June 18, 2015.) As shown in the table, the survey sample also includes a disproportionate number of districts with high ED concentrations.

Surveyed and Responding School Districts and Charter Schools					
	School Performance Profile (SPP) Score				Total
	90.0%+	80.0-89.9%	70.0-79.9%	<70.0%	
All School Districts	83	151	174	91	499
Surveyed Districts	13	58	19	10	100
Sample Rate	15.7%	38.4%	10.9%	11.0%	20.0%
Responding Districts	10	48	16	10	84
Response Rate	76.9%	82.8%	84.2%	100.0%	84.0%
	School District ED Concentration				Total
	<30.0%	30.0-49.9%	50.0-69.9%	70%+	
All School Districts	106	227	131	35	499
Surveyed Districts	11	40	37	12	100
Sample Rate	10.4%	17.6%	28.2%	34.3%	20.0%
Responding Districts	9	34	29	12	84
Response Rate	81.8%	85.0%	78.4%	100.0%	84.0%
Charter Schools					
All Charter Schools					180
Surveyed Charter Schools					25
Sample Rate					13.9%
Responding Charter Schools					11
Response Rate					44.0%
Note: ED represents economically disadvantaged students.					

Part II – Cost Multiplier Estimates

The tables that follow tabulate all survey responses across the four SPP groups. The first four questions that seek information regarding cost multipliers also provide separate tabulations based on ED or EL student concentration. Other questions in the section request information that pertain to gifted, charter school and transitioning students.

Question 1(a): If your average base cost equals 1.0, provide your best estimate of the cost multiplier for a typical ED student who is not also an EL. (Respondents used a drop-down menu of options that include: 1.00 – 1.19, 1.20 – 1.39, 1.40 – 1.59, 1.60 – 1.79 and 1.80 – 2.00.)

Economically Disadvantaged (ED) Multiplier						
	1.00-1.19	1.20-1.39	1.40-1.59	1.60-1.79	1.80-2.00	No Response
School Districts (SDs)						
90.0%+	8	1	1	0	0	0
80.0% - 89.9%	20	10	8	2	7	1
70.0% - 79.9%	6	2	6	2	0	0
<70.0%	<u>4</u>	<u>1</u>	<u>2</u>	<u>1</u>	<u>2</u>	<u>0</u>
All SDs	38	14	17	5	9	1
Charter Schools	6	0	3	0	2	0
	Median¹		Average¹		Wght. Avg.²	
SD SPP Scores						
90.0%+	1.10		1.16		1.18	
80.0% - 89.9%	1.30		1.36		1.39	
70.0% - 79.9%	1.40		1.35		1.39	
<70.0%	1.40		1.42		1.44	
All SDs	1.30		1.34		1.42	
SD ED Concentration						
<30.0%	1.10		1.12		1.10	
30.0 - 49.9%	1.30		1.32		1.34	
50.0 - 69.9%	1.40		1.40		1.42	
70.0%+	1.50		1.41		1.45	
All SDs	1.30		1.34		1.42	
Charter Schools	1.10		1.35		1.19	
1 Calculated using the midpoint of the ED multiplier range.						
2 Calculated using number of ED students as the weight and the midpoint of the ED multiplier range.						

Question 1(b): If the funding level indicated in 1(a) was impacted by the reallocation of state and federal funds, what weight was represented prior to the reallocation? (Respondents used a drop-down menu of options that include: 1.00 – 1.19, 1.20 – 1.39, 1.40 – 1.59, 1.60 – 1.79 and 1.80 – 2.00.)

Economically Disadvantaged (ED) Alternate Multiplier¹						
	1.00-1.19	1.20-1.39	1.40-1.59	1.60-1.79	1.80-2.00	No Response
School Districts (SDs)						
90.0%+	8	2	0	0	0	0
80.0% - 89.9%	22	8	11	1	5	1
70.0% - 79.9%	7	3	4	2	0	0
<70.0%	<u>5</u>	<u>1</u>	<u>1</u>	<u>2</u>	<u>1</u>	<u>0</u>
All SDs	42	14	16	5	6	1
Charter Schools	6	1	0	1	3	0
	Median²		Average²		Wght. Avg.^{2,3}	
SD SPP Scores						
90.0%+	1.10		1.14		1.15	
80.0% - 89.9%	1.30		1.33		1.32	
70.0% - 79.9%	1.30		1.31		1.32	
<70.0%	1.20		1.36		1.41	
All SDs	1.10		1.30		1.38	
SD ED Concentration						
<30.0%	1.10		1.10		1.10	
30.0 - 49.9%	1.30		1.31		1.30	
50.0 - 69.9%	1.30		1.34		1.34	
70.0%+	1.30		1.36		1.42	
All SDs	1.10		1.30		1.38	
Charter Schools	1.10		1.39		1.20	
1 For respondents that did not answer this question, it is assumed the multiplier is the same as question 1(a).						
2 Calculated using the midpoint of the alternate ED multiplier range.						
3 Calculated using number of ED students as the weight.						

Question 2: If your average base cost equals 1.0, provide your best estimate of the cost multiplier for a typical EL student who is not also ED. (Respondents were not given a drop-down menu of options.)

English Learner (EL) Multiplier							
	1.00-1.19	1.20-1.39	1.40-1.59	1.60-1.79	1.80-1.99	2.00+	No Response ¹
School Districts (SDs)							
90.0%+	2	0	3	1	0	0	4
80.0% - 89.9%	4	7	8	5	0	3	21
70.0% - 79.9%	3	5	2	2	0	0	4
<70.0%	<u>1</u>	<u>2</u>	<u>1</u>	<u>3</u>	<u>1</u>	<u>1</u>	<u>1</u>
All SDs	10	14	14	11	1	4	30
Charter Schools	1	1	3	2	0	0	4
	Median ²		Average ²		Wght. Avg. ^{2,3}		
SD SPP Scores							
90.0%+	1.49		1.38		1.41		
80.0% - 89.9%	1.50		1.46		1.41		
70.0% - 79.9%	1.28		1.31		1.47		
<70.0%	1.62		1.72		1.58		
All SDs	1.48		1.46		1.56		
SD EL Concentration							
<1.0%	1.32		1.39		1.39		
1.0% - 4.99%	1.40		1.41		1.31		
5.0%+ ⁴	1.50		1.46		1.47		
All SDs	1.48		1.46		1.48		
Charter Schools	1.49		1.47		1.37		
1 All responses of 1.00 (default response on the survey) and districts/schools without any EL students were considered to be a "No Response."							
2 Excludes respondents designated as no response.							
3 Calculated using number of EL students as the weight.							
4 Excludes an outlier response that was more than three standard deviations away from the average/mean response.							

Question 3: If your average base cost equals 1.0, provide your best estimate of the cost multiplier for a typical ED student who is also homeless. Your answer may be the same as question 1, or somewhat higher. (Respondents were not given a drop-down menu of options, but a few districts used the ranges provided in questions 1a and 1b. In those cases, the midpoint of the range was used.)

Homeless Student Multiplier							
	1.00-1.19	1.20-1.39	1.40-1.59	1.60-1.79	1.80-1.99	2.00+	No Response
School Districts (SDs)							
90.0%+	7	2	0	1	0	0	0
80.0% - 89.9%	18	7	10	4	0	8	1
70.0% - 79.9%	6	3	3	2	1	1	0
<70.0%	3	1	2	1	2	1	0
All SDs	34	13	15	8	3	10	1
Charter Schools	6	1	1	0	2	1	0
	Median ¹		Average ¹		Wght. Avg. ^{1,2}		
SD SPP Scores							
90.0%+	1.05		1.18		1.19		
80.0% - 89.9% ³	1.24		1.40		1.41		
70.0% - 79.9%	1.25		1.38		1.46		
<70.0%	1.50		1.50		1.56		
All SDs	1.25		1.38		1.51		
SD ED Concentration							
<30.0%	1.05		1.21		1.19		
30.0 - 49.9% ³	1.23		1.37		1.38		
50.0 - 69.9%	1.25		1.40		1.44		
70.0%+	1.50		1.48		1.57		
All SDs	1.25		1.38		1.51		
Charter Schools	1.10		1.35		1.18		
1 Excludes respondents who did not answer question.							
2 Calculated using number of ED students as the weight.							
3 Excludes an outlier response that was more than three standard deviations away from the average/mean response.							

Question 4: If your average base cost equals 1.0, provide your best estimate of the cost multiplier for a typical ED student who is also in foster care. Your answer may be the same as question 1, or somewhat higher. (Respondents were not given a drop-down menu of options, but a few districts used the ranges provided in questions 1a and 1b. In those cases, the midpoint of the range was used.)

Students in Foster Care Multiplier							
	1.00-1.19	1.20-1.39	1.40-1.59	1.60-1.79	1.80-1.99	2.00+	No Response
School Districts (SDs)							
90.0%+	7	1	2	0	0	0	0
80.0% - 89.9%	20	6	8	4	1	8	1
70.0% - 79.9%	5	3	3	2	1	2	0
<70.0%	3	1	2	2	1	1	0
All SDs	35	11	15	8	3	11	1
Charter Schools	7	0	0	1	1	2	0
	Median¹		Average¹		Wght. Avg.^{1,2}		
SD SPP Scores							
90.0%+	1.05		1.17		1.16		
80.0% - 89.9% ³	1.20		1.40		1.43		
70.0% - 79.9%	1.43		1.44		1.53		
<70.0%	1.50		1.49		1.56		
All SDs	1.25		1.39		1.52		
SD ED Concentration							
<30.0%	1.05		1.12		1.08		
30.0 - 49.9% ³	1.20		1.38		1.37		
50.0 - 69.9%	1.30		1.43		1.49		
70.0%+	1.50		1.51		1.57		
All SDs	1.25		1.39		1.52		
Charter Schools	1.10		1.35		1.20		
1 Excludes respondents who did not answer question.							
2 Calculated using number of ED students as the weight.							
3 Excludes an outlier response that was more than three standard deviations away from the average/mean response.							

Question 5: If your average base cost equals 1.0, provide your best estimate of the cost multiplier for a typical student who is gifted. Expenses for gifted students include those listed under Accounting Code 1243, but could include other expenses as well. (Respondents were not given a drop-down menu of options, but a few districts used the ranges provided in questions 1a and 1b. In those cases, the midpoint of the range was used.)

Gifted Student Multiplier							
	1.00-1.19	1.20-1.39	1.40-1.59	1.60-1.79	1.80-1.99	2.00+	No Response
School Districts (SDs)							
90.0%+	7	1	1	0	1	0	0
80.0% - 89.9%	23	16	4	0	1	3	1
70.0% - 79.9%	7	6	3	0	0	0	0
<70.0%	5	2	2	0	0	1	0
All SDs	42	25	10	0	2	4	1
Charter Schools	6	0	0	1	0	0	4
	Median¹		Average¹		Wght. Avg.^{1,2}		
SD SPP Scores							
90.0%+	1.03		1.16		1.09		
80.0% - 89.9% ³	1.20		1.24		1.25		
70.0% - 79.9%	1.20		1.21		1.24		
<70.0%	1.20		1.31		1.24		
All SDs	1.19		1.23		1.22		
SD ED Concentration							
<30.0%	1.02		1.10		1.05		
30.0 - 49.9% ³	1.20		1.23		1.21		
50.0 - 69.9% ³	1.20		1.29		1.51		
70.0%+	1.15		1.20		1.14		
All SDs	1.19		1.23		1.22		
Charter Schools	1.00		1.11		1.12		
1 Excludes respondents who did not answer question.							
2 Calculated using number of ADM students as the weight.							
3 Excludes an outlier response that was more than three standard deviations away from the average/mean response.							

Question 6 (school districts only): Student departures to charter schools may imply additional costs or savings for certain school districts. For example, if 10% of your student base departs to a charter school, then the average cost to educate students that remain might increase by a small percentage due to smaller class size or other technical factors. If your average base cost equals 1.0, provide a rough approximation of the cost multiplier to apply to the average student cost if such a hypothetical scenario occurred proportionally across all grades. Be sure to factor in the additional charter school tuition cost. For example, a response of 1.02 would imply that the average cost to educate remaining students would increase by 2%. It is also possible that the cost multiplier could be 1.0, or possibly less than 1.0. (Respondents were not given a drop-down menu of options, but a few districts used the ranges provided in questions 1a and 1b. In those cases, the midpoint of the range was used.)

Note: This question attempts to quantify the increase in the base cost to educate remaining students due to students who depart for charter schools. The base cost may increase due to (1) stranded costs (e.g., the same number of teachers are needed and class sizes are reduced, hence the cost is spread over fewer students) and (2) charter school tuition costs for students who leave the district (increases the instructional costs to be spread over the same number of students).

Student Departure Multiplier							
	1.00-1.04	1.05-1.09	1.10-1.19	1.20-1.29	1.30-1.39	1.40+	No Response
School Districts (SDs)							
90.0%+	5	1	2	2	0	0	0
80.0% - 89.9%	9	7	9	3	4	15	1
70.0% - 79.9%	1	4	4	2	2	3	0
<70.0%	<u>1</u>	<u>1</u>	<u>3</u>	<u>0</u>	<u>1</u>	<u>4</u>	<u>0</u>
All SDs	16	13	18	7	7	22	1
	Median¹		Average¹		Wght. Avg.^{1,2}		
SD SPP Scores							
90.0%+	1.06		1.08		1.07		
80.0% - 89.9% ³	1.14		1.28		1.28		
70.0% - 79.9% ³	1.15		1.20		1.17		
<70.0%	1.26		1.41		1.27		
All SDs	1.11		1.26		1.24		
1 Excludes respondents who did not answer question.							
2 Calculated using number of ADM students as the weight.							
3 Excludes an outlier response that was more than three standard deviations away from the average/mean response.							

Question 7 (Question 6 for charter schools): Student transition and unexpected enrollments may imply additional costs related to assessment testing, remediation and other factors. Provide your best dollar estimate of the additional costs for a new student who enrolls mid-year (e.g., \$300 per new student). If possible, provide your best estimate for the share of new students that enroll during the school year, relative to those present to start the school year. (Respondents were not given a drop-down menu of options.)

Transition Costs per New Student							
	\$0	\$1- \$249	\$250- \$499	\$500- \$999	\$1,000- \$1,999	\$2,000+	No Response
School Districts (SDs)							
90.0%+	2	3	2	2	0	0	1
80.0% - 89.9%	1	6	16	14	5	1	5
70.0% - 79.9%	1	3	3	3	3	2	1
<70.0%	<u>0</u>	<u>1</u>	<u>0</u>	<u>4</u>	<u>2</u>	<u>3</u>	<u>0</u>
All SDs	4	13	21	23	10	6	7
Charter Schools	3	0	1	3	1	1	2
	Median¹	Average¹	Wght. Avg. (New Students)^{1,2}		Wght. Avg. (ADM)^{1,3}		
SD SPP Scores							
90.0%+	\$200	\$222	\$269		\$209		
80.0% - 89.9% ⁴	\$429	\$508	\$724		\$618		
70.0% - 79.9% ⁴	\$450	\$651	\$849		\$812		
<70.0%	\$875	\$1,819	\$1,235		\$867		
All SDs	\$500	\$680	\$1,052		\$741		
Charter Schools⁴	\$438	\$409	\$780		\$362		
1 Excludes respondents who did not answer question or indicated they had no student enrollments during the year.							
2 Calculated using number of new students during the year as the weight.							
3 Calculated using ADM as the weight.							
4 Excludes an outlier response that was more than three standard deviations away from the average/mean response.							

Share of New Students Arriving During School Year

	<5.0%	5.0% - 7.4%	7.5%- 9.9%	10.0%- 19.9%	20.0%- 29.9%	30.0%+	No Response
School Districts (SDs)							
90.0%+	7	1	1	1	0	0	0
80.0% - 89.9%	20	11	4	7	1	1	4
70.0% - 79.9%	3	5	2	4	1	1	0
<70.0%	<u>1</u>	<u>1</u>	<u>4</u>	<u>3</u>	<u>1</u>	<u>0</u>	<u>0</u>
All SDs	31	18	11	15	3	2	4
Charter Schools	6	0	2	1	1	0	1

	Median¹	Average¹	Wght. Avg.^{1,2}
SD SPP Scores			
90.0%+	2.4%	4.3%	4.8%
80.0% - 89.9% ³	5.0%	5.3%	5.7%
70.0% - 79.9%	7.5%	9.3%	9.2%
<70.0%	8.0%	10.7%	7.5%
All SDs	5.0%	6.7%	6.9%
Charter Schools	2.5%	6.0%	18.2%

1 Excludes respondents who did not answer question.

2 Calculated using ADM as the weight.

3 Excludes an outlier response that was more than three standard deviations away from the average/mean response.

Part III – Best Practices

Please attempt to quantify how intensively the following practices, programs or activities were used by your school district/charter school for the 2021-22 school year and the approximate share of students that participated in the programs or activities (if applicable). Use a scale that ranges from 0-3 (0 denotes N/A; 1 denotes minimal use; 2 denotes moderate use; and 3 denotes extensive use).

Note: While many districts were able to provide the percentage of students participating, some districts noted that they were rough approximations. The percentage of students participating is not included in these results but can be provided upon request.

Q1: Pre-School and/or K4 Programs for Students Without a Known Disability							
	Intensity of Use				Value		
	NA	Minimal	Moderate	Extensive	Median	Avg.	Wght. Avg.
School Districts (SDs)							
90.0%+	5	1	0	3	0.00	1.11	0.89
80.0% - 89.9%	26	5	8	7	0.00	0.91	0.86
70.0% - 79.9%	7	1	2	5	1.00	1.33	0.70
<70.0%	<u>3</u>	<u>0</u>	<u>2</u>	<u>5</u>	2.50	1.90	1.98
All SDs	41	7	12	20	0.00	1.14	1.50
Charter Schools	9	0	0	2	0.00	0.55	0.13
Notes: For median, average and weighted average values, 0 = NA, 1 = minimal, 2 = moderate and 3 = extensive intensity of use. Weighted average uses ADM as weight. Data groups exclude some school districts due to no response: 90.0% (1 district), 80.0% - 89.9% (2 districts), 70.0% - 79.9% (1 district).							

Q2: Monitoring of Individual Student Achievement							
	Intensity of Use				Value		
	NA	Minimal	Moderate	Extensive	Median	Avg.	Wght. Avg.
School Districts (SDs)							
90.0%+	0	0	1	9	3.00	2.90	2.89
80.0% - 89.9%	0	3	9	35	3.00	2.68	2.81
70.0% - 79.9%	0	1	1	13	3.00	2.80	2.88
<70.0%	<u>0</u>	<u>0</u>	<u>1</u>	<u>9</u>	3.00	2.90	2.96
All SDs	0	4	12	66	3.00	2.76	2.91
Charter Schools	0	1	1	9	3.00	2.73	2.94
Notes: For median, average and weighted average values, 0 = NA, 1 = minimal, 2 = moderate and 3 = extensive intensity of use. Weighted average uses ADM as weight. Data groups exclude some school districts due to no response: 80.0% - 89.9% (1 district), 70.0% - 79.9% (1 district).							

Q3: Parent and Community Involvement

	Intensity of Use				Value		
	NA	Minimal	Moderate	Extensive	Median	Avg.	Wght. Avg.
School Districts (SDs)							
90.0%+	0	2	5	3	2.00	2.10	2.13
80.0% - 89.9%	0	14	23	10	2.00	1.91	2.06
70.0% - 79.9%	0	3	8	4	2.00	2.07	2.21
<70.0%	<u>0</u>	<u>1</u>	<u>7</u>	<u>2</u>	2.00	2.10	1.48
All SDs	0	20	43	19	2.00	1.99	1.75
Charter Schools	0	5	5	1	2.00	1.64	2.47

Notes: For median, average and weighted average values, 0 = NA, 1 = minimal, 2 = moderate and 3 = extensive intensity of use. Weighted average uses ADM as weight. Data groups exclude some school districts due to no response: 80.0% - 89.9% (1 district), 70.0% - 79.9% (1 district).

Q4: Student Participation in After-School Activities

	Intensity of Use				Value		
	NA	Minimal	Moderate	Extensive	Median	Avg.	Wght. Avg.
School Districts (SDs)							
90.0%+	0	0	7	3	2.00	2.30	2.41
80.0% - 89.9%	0	3	22	22	2.00	2.40	2.49
70.0% - 79.9%	0	2	6	8	2.50	2.38	2.21
<70.0%	<u>0</u>	<u>0</u>	<u>5</u>	<u>5</u>	2.50	2.50	2.19
All SDs	0	5	40	38	2.00	2.40	2.29
Charter Schools	2	2	6	1	2.00	1.55	1.90

Notes: For median, average and weighted average values, 0 = NA, 1 = minimal, 2 = moderate and 3 = extensive intensity of use. Weighted average uses ADM as weight. Data groups exclude some school districts due to no response: 80.0% - 89.9% (1 district).

Q5: Student Participation in School-Sponsored Tutoring

	Intensity of Use				Value		
	NA	Minimal	Moderate	Extensive	Median	Avg.	Wght. Avg.
School Districts (SDs)							
90.0%+	0	3	6	1	2.00	1.80	1.71
80.0% - 89.9%	2	17	21	7	2.00	1.70	1.80
70.0% - 79.9%	0	8	2	5	1.00	1.80	1.39
<70.0%	0	4	2	4	2.00	2.00	1.39
All SDs	2	32	31	17	2.00	1.77	1.53
Charter Schools	4	2	3	2	1.00	1.27	2.32

Notes: For median, average and weighted average values, 0 = NA, 1 = minimal, 2 = moderate and 3 = extensive intensity of use. Weighted average uses ADM as weight. Data groups exclude some school districts due to no response: 80.0% - 89.9% (1 district) and 70.0% - 79.9% (1 district).

Q6: Aide/Para-Professional Work in the Classroom to Assist Teachers

	Intensity of Use				Value		
	NA	Minimal	Moderate	Extensive	Median	Avg.	Wght. Avg.
School Districts (SDs)							
90.0%+	1	1	3	5	2.50	2.20	2.32
80.0% - 89.9%	0	2	13	32	3.00	2.64	2.58
70.0% - 79.9%	1	1	3	11	3.00	2.50	1.88
<70.0%	0	3	3	4	2.00	2.10	1.43
All SDs	2	7	22	52	3.00	2.49	1.84
Charter Schools	2	3	2	4	2.00	1.73	0.64

Notes: For median, average and weighted average values, 0 = NA, 1 = minimal, 2 = moderate and 3 = extensive intensity of use. Weighted average uses ADM as weight. Data groups exclude some school districts due to no response: 80.0% - 89.9% (1 district).

Q7: Other best practices your district uses to assist ED or EL students.

Many districts and charter schools listed different items for this question. The table below contains a list of practices noted by districts and charter schools on best practices they use to assist ED or EL students.

Other Best Practices Used to Assist ED or EL Students Noted by Survey Respondents	
<p>School Districts - SPP 90.0%+</p> <ul style="list-style-type: none"> - Classroom support - Cultural navigation, professional development - ELD assistants and parent workshops - Interpreting services - Individualized English Language Learner plans - Cares closet - Holiday shop - MTSS 	<p>School Districts - SPP 70.0 - 79.9%</p> <ul style="list-style-type: none"> - Schoolwide Title I - MTSS - ED Backpack Prog. (food sent home over weekend) - Student Assistance Program - EL Summer School Program - Extended School Year - EL interpretation services for students & families - Transition Education
<p>School Districts - SPP 80.0 - 89.9%</p> <ul style="list-style-type: none"> - Summer Programming for ED, EL & base students - Padres/Latino meetings (100+ participants) - Title I Services - Preview grade level content. Reteach prerequisite skills as needed - Positive Behavioral Intervention Support - Additional Counseling Services - Community Eligibility Program (all kids eat free) - Instructional Shifts - SAP, Alternative Ed, Summer Lunch Program - Extended School Year - Instructional Coaches and MTSS - Saturday Superstars, Summer Learning Lab - Strengthening Families - In-house ELL teachers (2) - Transportation/counseling for homeless and foster - Instructional Materials and Digital Platforms - Summer ESL Program - Social Work Services - Summer Food Service Program and Food Service Truck Delivery - Life Ready Graduate Implementation - Panther Pantry - Motherhood Initiatives, Fatherhood Initiatives, Stem & Vine ASP - Hired 3 social workers - HOMES program - Utilize SHINE Program in elementary school - Food Service Assistance 	<p>School Districts - SPP <70%</p> <ul style="list-style-type: none"> - Interventionist Program - Small group instruction - Dual Language Programs - On-demand translation and transcription services - Implemented a Welcome Center for New Comers - Translators, Parent Liaisons, MTSS Positions & Bilingual Psychologists - Bilingual Paraprofessionals - Additional Social Workers - Summer and Extended Day Programming - Newcomer Learning Academy - Summer enrichment programming - Bilingual Office Aides & Welcome Center
	<p>Charter Schools</p> <ul style="list-style-type: none"> - Collaboration with community services - Career Readiness - Saturday School - El Student best practices - Progress Monitoring - Social Work & mental health services - Push-in by EL teacher and support teachers in EL classrooms - Certified Instructional Support teacher to provide Tier II support - Translation services - Family Services - Before School Prep - Safety/Security services

Question 8: If your district/school operates a school-based community center(s) for after school group activities, social support, public information or other purposes, provide your best estimate of the annual cost to operate the center(s) on a per student basis. (Respondents were not given a drop-down menu of options.)

Note: Since few surveyed districts and charters have community centers, only a tabulation of the cost per student for the community centers was completed. Additional detail can be provided upon request.

Community Center Costs per Student							
	\$1- \$99	\$100- \$199	\$200- \$299	\$300- \$999	\$1,000- \$1,999	\$2,000+	\$0/ No Response
School Districts (SDs)							
90.0%+	0	1	0	0	0	0	9
80.0% - 89.9%	0	1	1	0	0	2	44
70.0% - 79.9%	0	1	0	0	1	0	14
<70.0%	<u>0</u>	<u>0</u>	<u>1</u>	<u>2</u>	<u>1</u>	<u>2</u>	<u>4</u>
All SDs	0	3	2	2	2	4	71
Charter Schools	0	0	0	1	0	0	10

Question 9: If your school district employs crossing guards to ensure the safe passage of students to and from school, please provide the annual cost to provide those services. If crossing guard services are provided by a municipal government, please provide the municipal government cost, if possible. Do not include any costs related to special events or after school activities. (Respondents were not given a drop-down menu of options.)

Note: In some cases, a district covers all costs, while in other cases a municipality shares costs with the districts. In a few cases, a municipality paid the full cost of crossing guards. Overall, roughly one-third of the cost of crossing guards is paid by a municipality and two-thirds by a district. The table reflects total crossing guard expenses.

Total Crossing Guard Expenses Paid by District/Charter School and Municipality						
	\$1- \$24,999	\$25,000- \$49,999	\$50,000- \$99,999	\$100,000- \$149,999	\$150,000+	No Response or \$0
School Districts (SDs)						
90.0%+	3	2	0	1	1	3
80.0% - 89.9%	9	3	6	3	1	26
70.0% - 79.9%	5	1	0	1	1	8
<70.0%	<u>0</u>	<u>0</u>	<u>2</u>	<u>0</u>	<u>6</u>	<u>2</u>
All SDs	17	6	8	5	9	39
Charter Schools	0	0	0	0	0	11

Crossing Guard Expenses per ADM (for Districts with Crossing Guards)						
	<\$5	\$5-\$9.99	\$10-\$19.99	\$20-\$49.99	\$50+	\$0/No Response
School Districts (SDs)						
90.0%+	3	1	3	0	0	3
80.0% - 89.9%	5	5	4	6	2	26
70.0% - 79.9%	3	1	2	1	1	8
<70.0%	<u>2</u>	<u>0</u>	<u>0</u>	<u>5</u>	<u>1</u>	<u>2</u>
All SDs	13	7	9	12	4	39
Charter Schools	0	0	0	0	0	11
	Median¹		Average¹		Wght. Avg.²	
SD SPP Scores						
90.0%+	\$6.67		\$7.71		\$7.67	
80.0% - 89.9% ³	\$10.16		\$15.82		\$17.35	
70.0% - 79.9%	\$8.28		\$16.49		\$21.62	
<70.0%	\$27.42		\$31.44		\$9.89	
All SDs	\$10.89		\$17.49		\$11.65	
Charter Schools	NA		NA		NA	
<p>1 Includes only districts and charter schools that reported non-zero crossing guard expenses (paid for by the district, charter school or municipality).</p> <p>2 Calculated using ADM as the weight.</p> <p>3 Excludes an outlier response that was more than three standard deviations away from the average/mean response.</p>						

Part IV – Facility Assessments

This section contains questions regarding facility assessments that were not included in the 2015 survey.

Question 1: How frequently do you routinely conduct a district-wide/charter school-wide facilities assessment that includes projected district maintenance needs, infrastructure upgrade needs, and other facilities’ needs? (Respondents were given a drop-down menu of options that include: annually, alternate years, every 3-5 years, every 5+ years, and every 10+ years.)

Frequency of District/School-Wide Facility Assessments						
	Annually	Every Other Year	3-5 Years	5+ Years	10+ Years	Other ¹
School Districts (SDs)						
90.0%+	2	0	4	2	2	0
80.0% - 89.9%	28	3	11	3	3	0
70.0% - 79.9%	8	0	2	2	4	0
<70.0%	5	0	3	2	0	0
All SDs	43	3	20	9	9	0
Charter Schools	7	0	3	0	0	1

1 Has not completed a school wide facilities assessment.

Question 2: If yes to question 1, who is involved in this routine assessment? (Respondents were given a drop-down menu of options that include: engineering, architectural, or other professional firm/consultant; district staff/charter school staff; combination of district/charter school staff and engineering/architectural/other professional firm/consultant; answered “no” to question 1.)

Type of District/School-Wide Facility Assessment				
	District/School Staff	Professional Firm/Consultant	District/School Staff & Prof. Firm/Consultant	Other ¹
School Districts (SDs)				
90.0%+	1	3	6	0
80.0% - 89.9%	23	3	22	0
70.0% - 79.9%	5	2	8	1
<70.0%	1	0	9	0
All SDs	30	8	45	1
Charter Schools	4	0	6	1

1 Has not completed a school wide facilities assessment or did not answer the question.

Question 3: In what year did you last conduct a formal (professionally contracted) system wide (all school/LEA buildings) facilities assessment? (Respondents were given a drop-down of years from 1980 through 2023 and prior to 1980.)

Latest Year of a Professionally-Contracted, System Wide (All Buildings) Assessment						
	2022 or 2023	2020 or 2021	2015 to 2019	2010 to 2014	Prior to 2010	No Response
School Districts (SDs)						
90.0%+	5	1	3	1	0	0
80.0% - 89.9%	11	9	12	6	7	3
70.0% - 79.9%	4	1	4	4	1	2
<70.0%	<u>4</u>	<u>1</u>	<u>4</u>	<u>0</u>	<u>1</u>	<u>0</u>
All SDs	24	12	23	11	9	5
Charter Schools	5	0	2	0	1	3

Question 4: In what year did you last conduct a formal (professionally contracted) individual school site or individual building facilities assessment? (Respondents were given a drop-down of years from 1980 through 2023 and prior to 1980.)

Latest Year of a Professionally-Contracted, Individual Building Assessment						
	2022 or 2023	2020 or 2021	2015 to 2019	2010 to 2014	Prior to 2010	No Response
School Districts (SDs)						
90.0%+	8	0	1	1	0	0
80.0% - 89.9%	19	11	8	5	4	1
70.0% - 79.9%	6	3	4	2	0	1
<70.0%	<u>7</u>	<u>0</u>	<u>2</u>	<u>0</u>	<u>1</u>	<u>0</u>
All SDs	40	14	15	8	5	2
Charter Schools	5	1	1	1	0	3

Part V: General Survey Comments

Survey respondents were instructed to provide comments or additional information that may be pertinent to the survey. All responses are shown as submitted.

Allentown City SD

Very hard to assess and estimate numbers in a district like Allentown. Most students are very needy and they have an unusually high % of students that are ELL. In fact Allentown has 2 schools dedicated to students who are severely ELL (barely speak English).

Altoona Area SD

Significant costs related to the support of ED and EL students are found in function codes outside of the 1100 series (but are included in the PDE 363 calculation). The multiplier above incorporates expenditures related to school psychologists, social workers, administrative support, nursing, building security and tuition to career and technology centers. Additionally, in a community with low property values and low average income levels the reducing factor of the Local Effort Capacity Index has negative effect on the distribution of BEF to communities in need.

Avon Grove SD

Part II-First Section-Line 2 Code 1100 costs include ESSR & Title expenses = \$2,298,306 - Part II - Item #7, Student Transitions - Additional Cost per student would depend if the newly enrolled required special services. Student Departure to Charter School - If 50 students were to transfer to charter school, the additional expense would be all tuition, and increase of approx. 2% to those students that remained. If 500 students transferred the additional tuition expense would be significant with some reduction in staff costs, estimated increase of approx. 18% to those students that remained.

Blue Ridge SD

The Blue Ridge School District struggles financially in its efforts to fund rising special education costs, charter school funding and aging facilities. Our region is a low-income rural county with limited opportunities for families. We are in need of a greater state investment for our children to learn and thrive.

Bradford Area SD

The Bradford Area School District has not had a Business Manager for the past 60 days. We are uncomfortable estimating the multipliers without extensive analysis. We have given our best estimates.

Chambersburg Area SD

We continue to see an increase in enrollment of high needs students and ELL, requiring additional supports to include one-one PCAs, individualized transportation, OT/PT and Speech. We are experiencing dramatic increases to our special education expense. We currently have 26 Autistic support classrooms. Each classroom can serve a maximum of 8 students. We employ 1 teacher and 2 classroom aides for each classroom. Our ELL population is also growing with an additional 120 students over a 2-year period. The weight of these populations must be addressed in the formula.

Clearfield Area SD

Our multiplier's are lower due to the fact that our ED group is in the range of 60-70% of our student population. As a result our cost per student already reflects what we do for all students regardless of ED status. The programs apply to all students.

Corry Area SD

We are in the midst of a middle high school renovation. This school hadn't been renovated since the 1990's. The renovation includes roof, HVAC, lighting, ceiling tiles, new front office renovation and several bathrooms.

Dubois Area SD

DASD was able to slide into Plan Con during the 2019 lapse in the moratorium. Consequently, we were able to start renovation on two of our elementary schools that we would not have undertaken without the Plan Con reimbursement.

East Stroudsburg Area SD

We have a district hired engineering consultant who consults with us on individual needs but does not do "District wide" facilities assessment. The last one that was done was back in 2010 here.

Erie City SD

The District tries to utilize the best practices listed above for as many students as possible, however, the resources the District has does not allow for extensive use. Our limited resources only permits us to implement many of the best practice, student support services which are greatly needed by our most challenging students. Additional financial support through the Fair Funding formula would allow us to increase student supports, best practices as well as level the play field for all of our students. The influx of Federal COVID relief dollars allowed us to bring in some of those supports, however, with those dollars not being reoccurring and coming to an end very soon, we are fearful that those programs which we implemented will have to be taken away from our high ED population.

Forest City Regional SD

I am a brand new superintendent to the school district. Many of the questions on facilities will be part of my plan to establish. I cannot answer them based on my current knowledge of the district.

Fort LeBoeuf SD

Just to note: in 2021-2022, the Fort LeBoeuf school district used \$1,063,794 of ESSER/COVID related funding in the Instructional Costs function (Part II, column a). The District is also currently preparing for a district wide feasibility study. (Part IV Q3)

Girard SD

The district is about 60% ED, tax base is made of mostly residential, and the average assessed value of a home is a little over \$100,000. The district is very dependent on state revenue as it makes up about 57% and local being 39%. With our district being very poor it is hard to keep raising the taxes to meet shortfalls and to keep up with all the demands of having such a high economically disadvantaged percentage. With

normal costs going up each year and especially higher after covid, the district faces a battle of keeping classroom size at a level that students will be able to learn and engage while also looking at our facilities on what work needs to be done from roofing to HVAC. The School District has a community school at the elementary that is funded by our local United Way for the director and other resources. This too has been seeing decline in allocation which if it goes away will be difficult to fill due to the resources that the program has brought to the school.

Hazleton Area SD

The Hazleton Area School District, which encompasses 256 square miles, serves students from a cross representation of urban, rural, and suburban communities. The District encompasses 16 municipalities. Most of the District is located in Luzerne County; however, portions of the radius include Carbon and Schuylkill Counties.

The Hazleton Area School District, among the top 10 largest school districts in PA, is comprised of 16 school buildings. The organizational structure includes six (6) K-8 elementary/middle schools, two (2) 3-8 elementary/middle schools, two (2) K-2 elementary schools. The high school students (grades 9-12) are served by four (4) buildings that include the Hazleton Area Academy of Science, the Hazleton Area High School, the Hazleton Area Arts and Humanities Academy, and the Hazleton Area Career Center, which is the District's own Career and Technical Center. The Hazleton Area School District operates a K-12 Cyber Academy that is uniquely designed and housed at our local mall. The Hazleton Area School District operates the Luzerne/Wyoming counties early intervention programs. Hazleton Area School District also educates Pre-Kindergarten students. Our Early Intervention and Pre-K students are located in The Academy near our Arthur Street Elementary School. Hazleton Area also operates a Newcomer Center for our K-6 students. Our Newcomer 7-12 students are serviced in our other schools.

Our student population has grown in both diversity and numbers over the last several years. In 2018-2019, the District's population was approximately 11,500 students with a minority population of 54% Latinx. For the 2023-2024 school year, our student population is in excess of 13,200 students with a minority population is approximately 64% Latinx. In the last year, alone, the District increased its ELL population from 2,600 to 3,400. To meet the needs of our children, we have an ELL staff of 53 certified teachers at a cost of \$4.5 million annually. All of our schools have bilingual liaisons and bilingual paraprofessionals to assist our students and parents as well. We continue to enroll new students every day. New enrollments continue throughout the school year. The District employs approximately 1600 people. We are one of the largest employers in the area.

Although Spanish accounts for the largest percentage of languages spoken in the District buildings, there are a total of 22 different languages across our schools. The special education population was approximately 12.8% in 2018-2019 school year. The special education population in 2023-2024 is about 15%. Due to our Community Eligibility Provision (CEP) percentage, all of our students receive free breakfast and lunch.

We have addressed the increasing population through creatively renovating spaces within our existing schools. For example, we closed four (4) pools located in four (4) of our elementary/middle schools to create classroom space. Additionally, we remodeled our existing libraries in most of our schools to provide additional classroom spaces. With those projects, we were able to secure 34 classrooms for \$10 million. We purchased and renovated two (2) buildings recently. They now house our Early Intervention students,

Pre-K students, and Arts and Humanities students. By doing so, we were able to provide more space in our High School, Career Center, and Early Learning Center. By redesigning our Cyber Academy and providing a home in our local mall for those who have chosen to learn online, we increased enrollment from 70 students to over 600 students. This increase in enrollment into our Cyber Academy has allowed for additional space in our other buildings. However, with all of these changes, we are still not able to address the large influx of children we are seeing. As we know, educating children in smaller groups is a better learning environment and can positively impact their academic careers. Our regular education classrooms have large numbers of students in them. Our special education population is increasing which reduces the available space considerably due to the limited number of students permitted in a special needs classroom. For example, we are only permitted, by law, to have eight (8) Autistic Support children in a classroom. We have had to add a number of additional classrooms because of our increased Autism Spectrum Disorder population. As mentioned, this reduces the available space for regular education areas greatly.

The District's budget for the 2023-2024 school year is \$225,512,780.00, which has drastically increased over the last several years to address the needs of our growing student population. Unfortunately, we are not adequately funded to meet all the needs of our children. We are 497 out of 500 school districts for per pupil spending. We are the lowest or next to the lowest tax base in all three counties our District reaches. We do increase taxes, at least, to the index each year. Many families are on fixed incomes or are renting, which makes it difficult to continue to complete our maintenance of effort with our tax increases.

Districts of similar size and demographics receive millions of dollars more than HASD. For example, Lancaster School District received \$77,641,742. They are of similar size and demographic. Reading School District received \$201,949,819. Again, similar size and demographics. HASD received \$64,505,080, which is \$13,136,662 less than Lancaster and \$137,444,739 less than Reading.

Although we have our own Cyber Academy we are still forced to pay for students who attend cyber charter schools. We expend approximately \$6 million on cyber charter tuition each year for about 400 students. With our own Cyber Academy, we are able to minimize the costs associated with its operation. To educate a student in the HACA is approximately \$5,000 per student for roughly 600 students. Basically, we are able to educate more students in our Cyber Academy for much less. We teach students synchronously. We have dedicated special education teachers, psychologist, school counselor, administration, as well as regular education teachers who support all of our students in our Academy.

Jersey Shore Area SD

The provision of services to students who show up with needs at our doors is not only cost prohibitive, but difficult to find outside of our walls. As a district, we are paying for it and putting that burden on the local taxpayer because there is little support in rural communities to get those services from local and county social service organizations.

Jim Thorpe Area SD

Since the Superintendent and Business Manager were not working at JTASD during the 2021-22 school year we used 2022-23 information for the Best Practices section.

Lampeter-Strasburg SD

Our Title I expenses are included in the 1100 total expenditures. This money is used to provide reading and math support.

The "Percentage of Students Participating" in Part III refers to the percentage that participated based on who was able to participate, not on the total student population. For instance, approximately 50% of the students who were offered school-sponsored tutoring participated in tutoring. Likewise, all K4 students without a known disability were included in programs or activities but the K4 students do not make up 100% of our student population.

Lancaster SD

Please publish the results of this survey to ensure transparency and allow for feedback. Many of my colleagues were not certain of how best to complete the information. I am not certain of how much, if any of the information was used back in 2014/15 to create the formula, so confidence is low in how much of this will actually be taken into consideration. I am happy to discuss this with the commission and any other lawmakers as appropriate.

Mahanoy Area SD

In Part II, Line 2, an adjustment was made to reduce Instructional Costs by one time federal funds due to ESSERS/ARP ESSER.

Manheim Township SD

Instructional costs have been reduced by ESSER funds (funding source 990, 994, 996).

Mifflinburg Area SD

COVID funds were utilized in the instructional expenditures (approx.. \$2.2 mil). The monitoring individual student achievement basis response was in relation to schoolwide positive behavior.

Milton Area SD

Milton Area School District looks forward to additional state education subsidy payments. Increasing our future revenues and making them more predictable will serve our students and community immensely. We face pressure from drastically increasing cyber charter costs, declining tax base, and reliance on local revenues that puts the financial future of our district at risk. One of our primary goals is to be the center of our community and offer opportunities for students, families, and taxpayers to all benefit from what our district offers but when funding is inadequate, this is often the first priority to get cut as we always place student academic performance first.

North East SD

Cyber charter school enrollments are financially devastating to small enrollment districts. We offer virtual synchronous, asynchronous or on site hybrid learning options at a third of the cost of cyber charter schools. Lack of Plancon funding has forced us to use 100% local taxpayer funds for all current and proposed renovations. Some districts are advocating for BEF to fully apply the new formula to 100% of all BEF. That would be a \$1 million swing from state to local funding in one year for NESD. Special education mandates

do not have adequate funding to support costs. Cyber charter schools should use same SEF formula for funding.

North Penn SD

For Part IV, question 3, the district completed a partial formal facilities assessment (4 buildings). To the best of my knowledge the district has not completed a professionally contracted system wide facilities assessment.

North Star SD

Our school facilities are in need of renovation. Funding is needed from the State for aging schools to be able to perform necessary renovations. Aging buildings, utilization, and roofs need attention.

Northern Bedford County SD

\$74,974.67 of instructional expenditures (1100) would have been contributed to ESSER money received in 21/22. Question 6 seems irrelevant, with an enrollment of 845, if 10% departed to charter school we would still have the base population to provide educational services to and our charter tuition cost overall would increase by those students \$956,262.72. Retained students also have an impact on these costs as an educational years of education are provided depending on when they are retained.

Penncrest SD

We only have one crossing guard through the Boro at one school. The other schools do not need a crossing guard.

Pittsburgh SD

Since 2017-18, we experienced a 33% growth in our English Language Learner population. The cost multiplier for charter school students shows the need for either charter funding formula reform or the reinstatement of the charter reimbursement subsidy.

Scranton SD

Part 3 Section 1 - N/A - no Pre-school or K4 in district. Section 2 - 100% benchmark assessments grades 3-10 adjusted to be 61.5% of all grades. Section 3 - SSD participates in School Wide Title 1 where 13 of 16 buildings receive parent and family engagement funding. Number represented above is the percentage of students eligible for title 1 services vs total enrollment (excluding outside cyber / charter) Section 4 - District had 1452 7-12 grade students participating in after school sponsored activities. Section 5 - District had 644 students participating in school sponsored tutoring after school. Section 6 - District has a teacher aid in every K classroom as well as provides 1 FTE or itinerant aides for special educations. Percentage represented above is the FTE ratio of students with aides vs total district enrollment (excluding cyber and charters) Section 9 - District and Municipality split the cost of crossing guards on an annual basis. Amount show is the wages and FICA costs paid by the SSD in calendar year 2022. Part 4 - SSD engaged a firm to do a feasibility study in 2021 and is in the process of updating by EOY 2023.

Sharon City SD

The ESSER funds provided much needed funding that allowed us to add staff, new curriculum and new technology. The amount of federal assistance in the 1100s increased from \$1 million in 2012-13 to almost

\$2.7 million in 2021-22. Please note that we answered the questions as best we could based on our interpretation. There are other issues to consider such as unfunded mandates, costs associated with implementing new programs and providing support to meet the needs of students coming to school not prepared and behind in their growth and development. The District sees a high transiency rate, which impacts student skill acquisition. Many of which have presented large gaps in learning and mastery. We have experienced an increase in students enrolling with special needs, and are seeing increased costs from COVID and inflation in general. The ESSER funds helped us, but we have huge concerns in how we will maintain needed programming and supports for students when the ESSER funding goes away.

Shikellamy SD

Part II Question 6 is confusing, so I wanted to explain the basis of our answer. Based on our base cost of \$6,787, our costs increase about 48% from the base cost for a regular education student that leaves for a charter school because now we need to pay north of \$10,000 for that student to the cyber charter school. When paying that \$10k, we aren't reducing or saving \$6,787 of cost from our district expense line. The base costs inherently remains in the system and now a new expense is created due to the student going to cyber school. The cost increase is even larger if it is a special education student because then we are paying \$26,000 per student that departs for a charter school. There are no cost savings for a student that goes to a charter school. The home district is not able to reduce staffing to offset these cost increases unless a large number of students depart in one single grade level or out of the high school alone. For example, we currently have approx. 160 students that attend cyber charter schools at a cost north of \$2 million per year. We could bring all 160 of those students back into our classrooms with minimal cost increase to our current education structure based on the assumption that 160 kids equates to somewhere around 12-15 students per grade level. The state funding cyber charter schools or providing for a greater weight in the formula would provide immediate relief to districts that have larger out of district cyber enrollments.

Shippensburg Area SD

1. We continue to experience a substantial increase in our ELL students in 22/23 and 23/24 school years
2. Since COVID, student enrollment in external cyber charter schools has remained high
3. Homeless population in the District continues to grow. One reason is due to a homeless shelter established in our school district about 1-2 years ago
4. Received a letter notifying our District of a proposed Low Income Housing to be constructed in our school district.
5. Multi-County SD's (including SASD) is harmed by the current laws governing the equalization of real estate tax millage rates across multiple counties. We lose out on tax growth/tax revenue. This should be a factor/weight in the BEF formula.

Souderton Area SD

We would respectfully request that the BEFC's funding formula recommendation be based on data that are currently being collected by the Department of Education. Much of the data requested in this survey are not currently being reported. Thank you for the opportunity to participate.

Stroudsburg Area SD

We do not employ crossing guards. Our armed security personnel conducts traffic control for the schools.

Uniontown Area SD

Part III, I based % off of total ADM. Part IV, the District does routine examinations of the buildings and inspections from our insurance providers but has been a while since we did a formal assessment. However, we did have formal inspections for safety from the PA State Police on all our buildings in 2023.

Upper Darby SD

Part II: Instructional Costs were reduced by \$10,502,911, which was all funded by various COVID relief funding. An additional note to consider, the District's "Share of ED students" is currently at 74%.

Part III. 9: Our costs should be much higher, but we were unable to staff all of our budgeted positions throughout the 21-22 school year due to staffing shortages.

Wayne Highlands SD

It is difficult to judge the effectiveness of the enacted funding formula because of the lack of funding support for the formula. Cyber Charter School tuition is a huge cost driver approaching 5% of our total budget. Spread over 12 grades and 435 square miles our 140 cyber charter school student enrollments does not allow for any reduction in costs. Wayne Highlands is a very rural district that consists of 1 K-2 building, 1 3-5 building, 1 6-8 building, 1 9-12 high school, along with two K-8 buildings in the northern regions of our district that are located at least 25 miles from our main campus. Somehow we do not qualify for the paltry sparsity factor in the current formula! These K-8 Buildings serve students from vast areas but have small enrollments. One building has 145 students and the other has 240 students K-8, on a purely economical basis, because of these small enrollments these buildings should be closed, but we strive to provide the best educational experience (our test scores prove this out) for our students, the bus rides for these students are extreme for any age student but doubly so for elementary students.

West York Area SD

III #3 is for 2 Elementary Title Building wide-Parent & Family Engagement is required.

York City SD

Full funding of Basic Education Funding (BEF) would allow equitable and appropriate levels of funding to meet the individual needs of ED, EL, Special Education and General Education students.

York Suburban SD

Part II adjustments: The district used the October 1 Enrollment PIMS reporting. Total 1100 expenditures do not include COVID dollars.

Yough SD

Part IV - the district is current conducting a contracted district-wide feasibility assessment study with the final report to be released in December 2023. The district, with the assistance of the hired Architect, will begin to prioritize projects based on facility needs and costs.

Commonwealth Charter Academy CS

It's important to note that Basic Education Funding (BEF) is only distributed to school districts as one of many sources of revenue. Due to the way public cyber charter schools are funded pursuant to Section 1725-A of the Public School Code (24 PS § 17-1725-A), their inability to raise revenue through local taxes, and the tuition rates determined through the PDE-363 (Funding for Charter Schools, Calculation of Selected Expenditures Per Average Daily Membership), the BEF formula and its components lack the specificity needed to support the unique academic, financial, technological, and facility operations of public cyber charter schools, nor do they capture the needs and characteristics of public cyber charter schools and their students. While the information provided in this survey may inform the BEF Commission's processes, it's important for the Commission to recognize and understand that any financial considerations for public cyber charter schools included in a revised BEF formula would result in a reduced benefit to public cyber charter students due to the operation of the PDE-363. Furthermore, due to the unique operations of public cyber charter schools, the Charter School Law, 24 P.S. § 17-1701-A et seq., requires cyber charter schools to "(1) provide all instructional materials; (2) provide all equipment, including but not limited to, a computer, computer monitor and printer; and (3) provide or reimburse for all technology and services necessary for the on-line delivery of the curriculum instruction. See 24 P.S. § 17-1743-A(e).

Discovery CS

A full scale assessment and appraisal of the Building was performed as done as part of our Bond renewal in April 2022.

Lincoln Park Performing Arts CS

We rent our buildings from another entity, the Lincoln Park Performing Arts Center.

Mastery CS-Mann Campus

The baseline funding that Charter schools receive per pupil in Philadelphia (\$10,786 in SY 2021-22) is not sufficient to meet the needs of students in city, particularly to tackle the challenges noted in this document. With EL needs fully unfunded, all services that are provided for English Language Learners pull funds away from the operating funding of the rest of the school, despite it being a moral and legal necessity. Additionally, substantial facility concerns exist due to the operation of buildings in Philadelphia that are nearly 100 years old and have not been maintained prior to the inception of the charter organization, leading to a position where the school must use significant operation funds to ensure the health and safety of students and staff, beyond that which is feasible. Most challenging, the socioeconomic and environmental factors, such as gun violence and poverty, a tremendous amount of resources have to go towards trauma informed mental health services to support the social and emotional needs of students, well above what standard funding allows. As such, many Philadelphia charters are faced with a challenge to provide the basic levels of service to students, let alone tackle the necessary remediation steps required to catch up with better funded suburban peers.

Souderton CS Collaborative

Our authorizing district and its board have prioritized keeping tax increases below the threshold for the past 5 years, often only raising taxes 1%. This reality impacts our funding. During the pandemic, the extra funding provided by the state and federal governments were necessary for the safe and productive

reopening of schools in the 2020-2021 school year. We proudly share that our school, offered in-person instruction for our families beginning on 9/5/2020. During the summer of 2020, our teachers worked tirelessly, to learn and hone their use of technologies that would provide students with a similar quality education as they had pre-pandemic. We began 2020 with 67% of our students in-person and by the years end 85% of students had returned to in-person. During this year, the teachers had to find the balance between academic and social emotional learning. We leaned into our SEL team to meet the needs of the students. By 2021-2022 SY, we continued with a focus on social emotional learning and basic skills like executive functioning and socialization. Beyond the additional funds that we and other schools used to rebound from COVID, we believe that charter school funding in Pennsylvania continues to be inequitable due to districts abilities to hold back funds for capital programs and debt.

While the BEC is addressing unequal funding between districts, I appreciate your inclusion of charters in the discussion. An impact that charters experience, and we did recently, is contention with our authorizers. Though we are one of the highest performing schools in the state, we had to seek remedy for our last charter through the courts. While we prevailed, the monies that were spent on legal costs versus going to programming for students, was disheartening. Despite this reality, we have been able to regain losses experienced over the past several challenging years. We would ask that authorizers not place undue financial burdens on charters who are performing because they believe that charters are unnecessary. We ask that the 363 funding formula be reviewed so more taxpayer monies flow to charters, if one is available in their district.

Sylvan Heights Science CS

Sylvan Heights Science Charter School contracted with our architects to conduct a complete facilities/feasibility assessment in 2019. The results were released January 2020. The School was not able to move forward with recommendations due to COVID-19 interruptions because the School was required to close March 2020. The School is once again in the process of evaluating our School building and is considering moving to a new location based on the results of the current assessment. Also note, that Sylvan Heights Science Charter School experienced disruptions to the School's learning environment which negatively impacted the school's ability to implement programs involving parent and community engagement.

Staff Acknowledgments

The survey results were compiled by Karen Maynard and Rachel Flaugh. Questions regarding the survey results can be directed to kmaynard@ifso.state.pa.us.



Commonwealth Charter Academy School Partnership Options

Commonwealth Charter Academy (CCA), the largest K-12 public cyber charter school in Pennsylvania, believes it is prudent for schools to work together to provide a modern, world-class education to students and their families, and to ensure taxpayer dollars are used wisely and taxpayers receive a return on their investment.

During the 2018-19 school year, CCA launched its own in-house, custom-designed learning management system that is user-friendly, easy to navigate, and customizable for students and families. Known as edio, our proprietary learning management system was created with input from students, families, teachers, content specialists, and administrators.

CCA also is on a multi-year plan to develop and implement its own curriculum, courses, and materials that are aligned with Pennsylvania's academic standards and prepare students for post-high school success.

With more than 20 years of experience in delivering an online education, CCA desires to share its expertise in virtual learning with schools, students, and families across Pennsylvania.

To meet the needs of students across Pennsylvania, CCA welcomes the opportunity to partner with schools to deliver courses and instruction based on student interests and career pathways.

For the 2023-24 school year, CCA is partnering with three schools in Luzerne, Potter, and Philadelphia counties.

Currently Available Options (each option can be tailored to meet a school's needs):

- CCA Course Without Support
 - A school would receive CCA's course and related curriculum to use at its discretion within its own system.
 - Teacher(s), technology, course materials, and support would be provided by the local school entity.
- CCA's Course With Support
 - A school would receive CCA's course and related curriculum to use at its discretion within its own system.
 - Teacher(s), technology, course materials, and/or support would be provided for a nominal fee.
- Per-Seat Option Within CCA's System
 - A school could enroll one or more students in a CCA course with students using CCA's learning management system.

- Teacher(s), technology, course materials, and/or support would be provided for a nominal fee.
- Per-Course Option Within CCA's System
 - A school could have its own, dedicated section of a course for only its students using CCA's learning management system.
 - Teacher(s), technology, course materials, and/or support would be provided for a nominal fee.

Under the current funding model for public cyber charter schools, CCA has the capacity, capability, and infrastructure to partner and collaborate with other schools, including public school districts, private schools, and homeschooling families, by providing them with Pennsylvania academic standards-aligned, high-quality core, elective, and supplemental elementary and secondary educational programs.

CCA is hopeful that schools across Pennsylvania – public, nonpublic, and private – take advantage of this opportunity.

We look forward to working with the General Assembly, schools, students, and families to ensure that today's students are prepared for the jobs and economy of tomorrow.



PENNSYLVANIA

13 December 2023

Hon. Kristin Phillips-Hill
362 Main Capitol
Harrisburg, PA 17120

Hon. Mike Sturla
106 Irvis Office Building
Harrisburg, PA 17120-2096

Dear Chair Phillips-Hill, Chair Sturla, and Members of the Basic Education Funding Commission:

A perfect storm of a shrinking workforce paired with ongoing skills / eligibility gaps is causing labor shortages and fierce competition for qualified individuals in most employment sectors, including our Armed Forces.

The U.S. Army, Navy, and Air Force all missed their active-duty recruiting goals in FY 2023, with the three branches reporting a combined shortfall of more than 20,000 enlistees. The U.S. Coast Guard will fill only 75 percent of the number of needed recruits in 2023. The Pennsylvania Army National Guard missed its 2023 recruiting goal by almost 25 percent and the Pennsylvania Air National Guard by more than 45 percent.

Part of this problem is the fact that 77 percent of youth between the ages of 17 and 24 nationwide cannot meet the military's eligibility requirements due to inadequate education, obesity or other disqualifying health conditions, or having a record of crime or substance use. The problem is further compounded by the low percentage of young people (nine percent) who are interested in military service in the first place. Some have described the current situation as the "worst recruiting environment in the 50-year history of the all-volunteer military."

Readiness concerns are echoed by the private sector. According to September 2023 U.S. Chamber of Commerce data, there are currently 340,000 job openings in Pennsylvania, with only 82 available workers for every 100 open jobs, and a labor participation rate of 61.9, below the national average. Research has estimated that educational and skill shortages could cost Pennsylvania's economy more than \$66 billion in lost economic output by 2029. With more than 60,000 Pennsylvanians reaching retirement age each year, retirements and slow population growth are expected to decrease the commonwealth's working-age population every year through 2030. These numbers make it clear that we have more work to do to ensure that ALL young Pennsylvanians are ready for college or careers, including military service. Nothing less than our economy and future national security depend on it.

With the vast majority of children attending public schools, ensuring that all schools are adequately and equitably funded can help ensure that more students gain the knowledge and skills they need to succeed. Multiple studies show that more education spending consistently means better outcomes for students—higher test scores, higher graduation rates, and sometimes even higher wages as adults. Research also shows that money must be spent wisely to yield benefits. Investments in smaller class sizes, skilled teachers, additional student supports, and early childhood education are all associated with positive student outcomes. In short, money (and how you spend it) does impact student success. This is especially true when additional school funding is directed towards solving adequacy and equity gaps in higher-poverty school districts.

105 North Front Street / Suite 305 / Harrisburg, PA 17101 / 717.233.1521

StrongNation.org/MissionReadiness

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Unfortunately, too many young Pennsylvanians attend schools that lack adequate resources to ensure a quality education. Our state's overreliance on local property taxes to fund public education has drastically limited poorer communities' ability to adequately fund their schools. Pennsylvania is especially shortchanging Black and Hispanic students who disproportionately live in low-wealth communities and attend high-poverty schools with less educational opportunity. In fact, Pennsylvania's racial and economic gaps in accessing educational opportunity rank among the worst in the nation.

All of this supports the notion that as our workforce contracts, we must ensure that more young Americans are ALL THAT THEY CAN BE – for the sake of our economy and for the sake of our national security. We are hopeful that the ongoing work of the Basic Education Funding Commission will yield a new pathway to ensure that all Pennsylvania schools are adequately funded so that all students are ready for success in the workforce, including service to our nation in the military if they so choose.

Respectfully Submitted,

Dennis L. Benchoff
Lieutenant General (Ret.)
United States Army
Lancaster, PA

George M. Schwartz, Ed.D.
Brigadier General (Ret.)
United States Army
Manheim, PA

Thomas J. Wilson, III
Rear Admiral (Ret.)
United States Navy
Biglerville, PA

**Pennsylvania Basic Education Funding Commission
Public Meeting with the
Independent Fiscal Office
State Capitol
Harrisburg, Pennsylvania
December 14, 2023**

Testimony of Betty Lee Davis, Ph. LCSW

Good Afternoon, Basic Education Funding Commission--

I am Dr. Betty Lee Davis, and I am honored to provide written testimony to the Basic Education Funding Commission Public Meeting with the Independent Fiscal Office Meeting today. I am a Licensed Clinical Social Worker at the Ph.D. level with many years of experience providing behavioral health services to children, adolescents, families, individual adults, and couples in a variety of behavioral health settings and range of capacities with a special interest in trauma-informed behavioral health care and demonstrated commitments to the establishment of policy requiring that youth violence be treated as a public health epidemic; Statewide trauma-informed education; and the recognition of and programming for Secondary Trauma in the workplace. I am a founding member of the Trauma Informed Education Coalition (TIEC) (www.traumainschool.org, see Appendix A); a 2012 inaugural member, until the film's completion in 2015, of the Advisory Committee for the film, *Portraits of Professional CAREgivers: Their Passion, Their Pain*, an award winning documentary by Vic Compher and Rodney Whittenberg (<https://caregiversfilm.com>, see Appendix B) about the effects of exposure to others' trauma in the workplace, Secondary Trauma, on professional caregivers, among them, teachers; and a member, until its task was completed, of the Philadelphia ACES Taskforce Policy Coordinating Committee Workgroup (see Appendix C) for the 2018 Philadelphia City Council Informational Hearings on Secondary Traumatic Stress and Resiliency Programs for Professional and Family Caregivers and First Responders. The concept of Secondary Trauma, known, also, as Compassion Fatigue, or Secondary Traumatic Stress, was coined by Figley (1995). Reflecting my commitment to this initiative in the educational setting, I have developed and led workshops focused on Secondary Trauma and its effects

on teachers. Other TIEC members have provided testimony to you focused on the recognition and support of the trauma needs of students. My testimony will focus on the recognition and support of the Secondary Trauma needs of teachers resulting from their classroom exposure to students' trauma.

Policy Advocacy

To familiarize you with my policy advocacy, in July, 2011, at the invitation of Dr. Joan Duvall Flynn, Education Committee Chair of the Pennsylvania State Conference NAACP Branches, I gave testimony at the Pennsylvania General Assembly House Education Committee Hearings which provided the clinical underpinnings for what, in combination with the education testimony of Dr. Flynn, became PA General Assembly 2019 ACT 18 mandating trauma informed education Statewide. In 2013, I was given a leadership role organizing panels for the Pennsylvania House Democratic Policy Committee "Youth Violence as a Public Health Epidemic" Hearings. In my July 28, 2011 NAACP testimony to the Pennsylvania House Education Committee, I reconceptualized youth violence as a *medical disorder*, Posttraumatic Stress Disorder, and an *untreated public health epidemic*.

On December 7, 2018, as member of the CAREgivers film Advisory Committee and the Philadelphia ACE Task Force, I gave testimony (see Appendix D) at Philadelphia City Council's "Secondary Traumatic Stress and Resiliency Informational Hearing" where I called upon City Council to petition OSHA to create a standard for Secondary Trauma in the workplace, which resulted on December 5, 2019 in a City Council Resolution (see Appendix E) to petition OSHA to "recognize STS as a workplace hazard, recommend steps to address mental health injury as a psychological hazard in the workplace as they do with physical injury, and create a standard to protect workers' from psychological harm from the exposure to others' trauma in the workplace in the same way that it protects them from physical harm."

“A Thorough and Efficient System of Public Education”

The Pennsylvania Constitution requires the General Assembly to “provide for the maintenance and support of a thorough and efficient system of public education to serve the needs of the Commonwealth.” In order to provide for the “maintenance and support of a thorough and efficient system of public education,” the education system must, also, include protection for teachers from the workplace hazard of exposure to students’ trauma and its effects on teachers in the classroom through organizational resiliency programming. In addition to mandating teacher trauma training to recognize and support students’ trauma needs, PA General Assembly Act 18 in Section 2.c. mandates “Recognition of the signs of the impact of secondary trauma on school employees and appropriate resources for school employees who are experiencing secondary trauma.” As stated by a leading trauma pioneer (Perry, 2015),

Any teacher working in a setting with episodic, unpredictable stressors will be a high risk for developing trauma-related symptoms. This teacher will not only personally suffer from these problems but will—as described above—have a negative impact on his or her student’s capacity to learn. The dysregulated teacher will have a dysregulated classroom.

Not only do teachers need to be protected from Secondary Trauma, but for them to provide students with a “thorough and efficient system of public education,” students need to be protected from dysregulated teachers, who from exposure to students’ trauma, can negatively affect students’ capacity to learn in a dysregulated classroom.

Secondary Trauma

STS symptoms and its effects are similar to Posttraumatic Stress Disorder (PTSD). Both involve exposure to danger, but the route of exposure differs. With PTSD, exposure to danger is *personal* and *direct*. With STS, the exposure is to *someone else* in danger. Symptoms include feelings of isolation, anxiety, dissociation, physical ailments, sleep disturbances, intense negativity, and difficulty coping. Vicarious trauma, post-traumatic stress disorder, burnout, and compassion fatigue are similar terms representing a facet of STS (see Appendix F,

Companion Resources for Public Hearing, p.6). With both *safety and calming* of the brain are essential to recovery (Herman, 1992; Perry, 2014). A viewing of Caregiver's film, which can be rented, will familiarize you in deeply personalize ways with the Secondary Trauma. Included in the film is a deeply personal story, "Raisheda—A Teacher's Story," about the Secondary Trauma effects of a student's homicide while doing a school-related errand that she requested him to do. Tragically, Raisheda's loss of a student by homicide is not an isolated event. A report revealed in 2022 that firearm homicide rates grew nearly 35% from 2019 to 2020 with disparities by race/ethnicity and poverty level widening. (CDC Newsroom, May 10, 2022). Increasing possible exposure of teachers to students' homicidal death, homicide rates among individuals ages 10 through 24 in 2021 reached its highest level in 20 years according to a report from the CDC (*Health*, June, 2023).

Mitigating the Effects of Secondary Trauma in the Classroom

Essential to mitigating the effects of Secondary Trauma is *self-care*, or purposefully engaging in activities or experiences demonstrated to create emotional safety and effect calm and *organizational resiliency programming*. A trauma-informed workplace model provides support to staff through resiliency programs, restructures the organization for staff and administration to work together to support one another while working toward the common goal of serving the community. It will change the workplace climate across the entire system. It is the most efficient avenue to reduce the monetary, time and productivity costs to organizations due to workers experiencing STS (TAKE CARE PH *Initiative*, see Appendices F and G)). A trauma-informed workplace model in the educational system promotes self-care and provides resiliency programming within the educational setting. It provides a safe place for teachers to talk about what they are experiencing when they are feeling stressed and engage in mitigating program activities provided in the course of their workday by the education system.

Advocating for organizational intervention to protect teachers, Pennsylvania Department of Education Mental Wellness and Trauma Specialist said:

We talk about self-care obviously, but we focus more on systems. It is like when you come in with self-care, now on top of everything else you are doing during your day, I am going to really need you to fit self-care in there

somewhere. And when you are not doing it, I am going to make you feel guilty about the fact that you didn't do it. This is your issue rather than an organizational issue. (Milakoic, 2022)

Compassion Satisfaction

Mitigating the potential exposure to workplace trauma, the workplace also provides Compassion Satisfaction, or the gratification brought about by helping others. (Figley, 1995). It is a natural by-product of service work. It is promoted by staff resiliency programs that are designed to mitigate STS and build resiliency.

Call to Action

1. Fund the resources necessary to protect teachers from the Secondary Trauma effects from exposure to students' trauma by the recognition of it and funding resiliency programming resources to protect them as mandated by ACT 18.
2. Fund research designed specifically to focus on Secondary Trauma in the educational setting with a specific focus on teachers and resiliency programming.
3. Protect students from exposure to teachers' unregulated Secondary Trauma resulting from exposure in the classroom to students' trauma by providing organizational programming in the education setting.
4. Include teachers as well as trauma specialists in developing Statewide educational Secondary Trauma resiliency programming
5. Watch the *Caregivers film*. Viewing the film led Helen Gym, then Philadelphia City Council member, to introduce it to City Council which resulted in its Secondary Trauma Hearing and Secondary Trauma Resolution to petition OSHA to provide Secondary Trauma protections. The education system is outside of OSHA regulation but there is important information to be learned from that initiative.

6. To learn more about organizational resiliency programs, go to Virtual Cafes | ACES Philadelphia to see how two major organizations in Philadelphia. Childrens Hospital of Philadelphia, and the Support Center for Child Advocates (see Appendix H) have implemented organizational resiliency programming. (PhiladelphiaACEs.org).

Thank you for the opportunity to provide this testimony and your thoughtful consideration of the information given in it. It is well known that teachers are leaving the field in unprecedented numbers (see Appendix I). I call upon you not to let their being unprotected from Secondary Trauma be among the reasons.

Respectfully Submitted,



Betty Lee Davis, Ph.D., LCSW
Youth Violence as a Public Health Epidemic Activist
Trauma-Informed Education Advocate
Secondary Trauma in the Educational Setting Advocate

Behavioral Health Services Provider-Adults, Adolescents, and Children
Mothers in Charge--Grief Support Provider
Trauma Informed Education Coalition--Founding Member
Portraits of Professional Caregivers: Their Passion, Their Pain--Advisory Committee Member
Philadelphia ACE Task Force-- Policy Workgroup and Policy Coordinating Committee Member

Resources

Compher, Vic and Whittenberg, Rodney. *Portraits of Professional CAREgivers: Their Passion, Their Pain* www.caregiversfilm.com

Figley, Charles. (1995). Compassion fatigue: coping with secondary traumatic stress disorder in those who treat the traumatized. New York: Taylor and Francis Group. (PDF) Compassion fatigue as secondary traumatic stress disorder: An overview

Herman, J. (1992). Trauma and recovery. New York: Basic Books

Perry, Bruce. M.D., Ph.D. *The Neurosequential Model of Therapeutics (NMT) Case-Based Training Series* (2015)

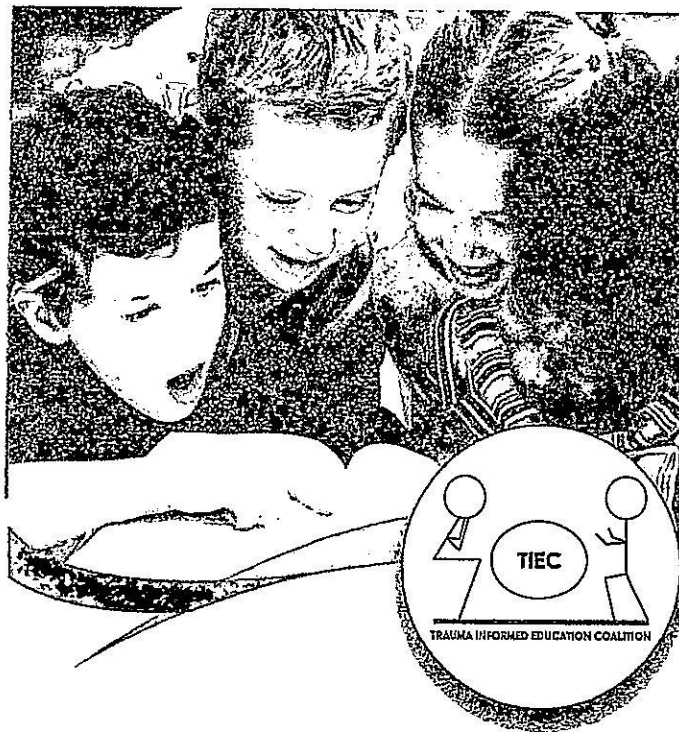
Perry, Bruce. "Use of Principles of Traumatology in Educational Settings: The Compton School District Class Action Law Suit." *The Neurosequential Model of Therapeutics (NMT) Case-Based Training Series* (2015)

Perry: Rhythm Regulates the Brain (Posted April 11, 2014)
<http://attachmentdisorderhealing/developmental-trauma-3>

Report of the Attorney General's National Task Force: Children Exposed to Violence. December, 2012

APPENDIX A

Trauma Informed Education Coalition



TRAUMA INFORMED EDUCATION COALITION

The Trauma Informed Education Coalition (TIEC) is an organization of lay members and professionals from the fields of education, counseling, psychology, human development, and social work. We plan and conduct the most expert trauma-informed professional development and training offered for entities that serve children and their families. TIEC is a Pennsylvania Department of Education Act 48 (Act 45) approved provider. CEU's are also available.

TIEC provides state of the art collaborative professional experience and outstanding expertise that together deliver the highest quality, most transformational service available. We are committed to advance a strength based, resilient society.

APPENDIX B

Portraits of Professional CAREgivers: Their Passion, Their Pain

PORTRAITS OF PROFESSIONAL

caregivers

THEIR PASSION; THEIR PAIN

A FILM ABOUT THE EMOTIONAL IMPACT ON PROFESSIONALS WHO CARE FOR OTHERS.

"...deep and definitely an eye-opener. I laughed and cried. Great film..."

- Sara Johnson • Social Worker

"An incredibly important and moving film..."

- Megan Johnson • Social Worker

"...an outstanding and beautiful film..."

- Heather Jackson • Physical Therapist

"...I felt recognized and validated..."

- Lisa Miller • Respiratory Therapist



DOCUMENTARY • DIRECTOR: MARGARET MCGEE • PRODUCED BY: MARGARET MCGEE • EDITOR: MARGARET MCGEE • MUSIC BY: MARGARET MCGEE

www.caregiversfilm.com

(<http://caregiversfilm.com/dvddonate/>)

Purchase the Film (<http://caregiversfilm.com/purchase-film/>)

Filmmakers

(<http://caregiversfilm.com/filmmakers/>)



(<http://caregiversfilm.com/wp-content/uploads/2011/03/care1.png>)

Tim Fryett (Videographer, Editor), Vic Compher (Director and Co-Producer), Rodney Whittenberg (Co-Producer and Composer).

CONTACT

Vic Compher
604 S. Washington Square – 802
Philadelphia, PA 19106

Phone: 267-266-0842

Email: viccompher@comcast.net

Introducing the film team:

Vic Compher, Director and Co-Producer

Vic is a filmmaker, licensed clinical social worker, workshop trainer, and author. His most recent documentary is an intergenerational portrayal of remarkable older adults sharing their dramatic stories of peace and justice with young people. Broadcast on WYBE's public television series, "Philadelphia Stories", this film has been screened in a variety of venues and by several film festivals, including the New York Independent International Film and Video Festival of 2011. See: <http://icannotbesilent.com> (<http://icannotbesilent.com>)

Rodney Whittenberg, Co-Producer and Composer

Rodney is an Emmy Award winning modern "renaissance man." His interests and professional endeavors are broad ranging from full-length film production to music composition. He is fascinated by discovering what makes things tick and how to creatively intersect with them, whether it is the inner vision of his clients or new ways to use the latest technical advances.

see: http://www.melodyvision.com/about_us.html (http://www.melodyvision.com/about_us.html)
and
www.rodnevwhittenberg.com (<http://www.rodnevwhittenberg.com>)

Tim Fryett, Film Editor

A graduate of the fine arts program of the University of PA, Tim is currently a graduate student in film at Northwestern University in Chicago. He has been the videographer and editor of a number of documentary projects and provided art education to youth in Philadelphia. He is the chief editor of "I Cannot be Silent: Testimonies of Peacemaking"

see also: http://fryett.org/files/ICBS_PressKit.pdf (http://fryett.org/files/ICBS_PressKit.pdf)



(<http://caregiversfilm.com/wp-content/uploads/2011/03/care2.png>)

Vic Compher (Director and Co-Producer), Rodney Whittenberg (Co-Producer and Composer),
Tim Fryett (Videographer and Editor) collaborating on the film

Michael Adamo, Animator and Assistant Editor

Michael originally hails from Long Island, NY. A graduate of Philadelphia University, Michael does expert motion graphic design and video editing. Over the past four years, his work has also included creating content for commercials, promotional spots and marketing videos. Additionally, he has designed animated information graphics, logo animations and VFX segments. Michael enjoys documenting his experiences through photography, discovering new musical artists, attending concerts, and evaluating and discussing the latest films and television series.

See also: www.behance.net/madamo (<http://www.behance.net/madamo>) and
www.threepiecesuit.tv (<http://www.threepiecesuit.tv/>)

Introducing the Advisory Board**Betty Lee Davis, PhD, LCSW**

is a licensed clinical social worker who provides trauma-informed treatment to children, adolescents, and their families in outpatient and community based settings. She specializes in grief support for mothers whose children have died as a result of violence; in addition, she has advocated successfully at the legislative level in Pennsylvania for policy that will declare youth violence a public health epidemic requiring public health intervention and mandating statewide trauma-informed education.

Donald M. Friedman, MD

currently teaches at Jefferson Medical College where he helps students explore the healing potential of the doctor-patient relationship and the role of compassion, empathy, and attentive listening skills in patient care. Interested in spirituality and healthcare, he writes a column on aspects of this topic for www.jewishsacredaging.com. In his teaching, he stresses the role of

emotional and spiritual factors in illness and wellness and is attuned to ways in which the medical provider can sustain one's own emotional health and stamina, including the use of humor. Dr. Friedman received his medical degree from the University of Pennsylvania School of Medicine and trained in Internal Medicine at Rhode Island Hospital and Hahnemann Hospital in Philadelphia. He was Chief of the Section of Rheumatology at Crozer-Chester Medical Center in Chester, PA for 28 years.

Robert Groves, MA, MPH,

has 40 years experience in health and human services. For 25 of those years he held CEO positions with the Health Promotion Council of Southeastern Pennsylvania and Philadelphia Senior Center. He holds masters degrees in Urban Studies (University of Wisconsin-Milwaukee) and Public Health (University of Massachusetts). Bob received The Merit Award from the Pennsylvania Public Health Association for innovative approaches to public health problems and the Individual Award in Public Health from the Philadelphia College of Physicians. As a volunteer, he teaches a course on human rights, has blogged for the Philadelphia Social Innovations Journal on aging health and service issues. He also volunteers with the Center for Literacy, serves on the board of directors of several non-profit organizations and is a consultant with LaSalle University's Executive Service Corps.

Katherine K. Kinsey, PhD, RN, FAAN,

has significant expertise in public health, urban health, health disparities, program evaluation, HIV/AIDS prevention, women's health, home health, and health sciences/nursing education. Presently, she is the Administrator of the Philadelphia Nurse-Family Partnership (NFP) program, the administrator of the Mabel Morris Early Childhood Home Visitation Program, and involved with First Steps which targets underserved, urban families with one or more children suspected of or recently diagnosed with Autism Spectrum Disorder. Dr. Kinsey is recognized for grantsmanship and has been awarded more than 30 million dollars in federal, state, city and foundation grants. She serves on several non-profit boards and is a consultant to community non-profits and public health nursing faculty across the nation.

Katherine C. Maus, MSS, ACSW, LSW,

a graduate of the Bryn Mawr College Graduate School of Social Work and Social Research, has worked for the past 35 years in the maternal and child health and child welfare fields in both public and private agencies in Philadelphia. Her work has included services to families experiencing child abuse and neglect, families caring for children with serious chronic health conditions, and mothers with substance use disorders caring for newborns. She has been actively involved for the past five years promoting trauma-informed practice in public health and child welfare in Philadelphia. Kate is a past chairperson of the Philadelphia Division of the Pennsylvania Chapter of the National Association of Social Workers and was recognized as the Pennsylvania NASW Social Worker of the Year in 1995.

Leslie Lieberman, MSW

is the director of Multiplying Connections whose mission is to build and sustain a trauma informed system of services for young children and their families in Greater Philadelphia. She has more than 20 years of experience designing, implementing, and evaluating award-winning health care programs for children and families. She created a multi-level program for childhood injury prevention; and she directed the "Born Free Project" in Contra Costa County, California, one of the nation's first perinatal substance abuse intervention programs which integrated substance abuse services with routine prenatal care. Leslie built and led Kaiser Permanente's Northern California Early Start Program, a nationally recognized model of care for pregnant women at risk of substance abuse. She has presented at numerous national conferences, provided training and published on topics ranging from building effective coalitions to integrating behavioral health

published on topics ranging from building effective coalitions to integrating behavioral health and primary care.

Contact Caregivers Film | email: viccompher@comcast.net | phone: 267-266-0842 |



(<https://www.facebook.com/CaregiversFilm/>)



(<https://twitter.com/caregiversfilm>)



([https://www.youtube.com/channel/UCNo12zTOhtx35ImVGkbiNoA/featured?](https://www.youtube.com/channel/UCNo12zTOhtx35ImVGkbiNoA/featured?&ab_channel=CaregiversFilm)

https://www.youtube.com/channel/UCNo12zTOhtx35ImVGkbiNoA/featured?&ab_channel=CaregiversFilm)



(<http://www.imdb.com/title/tt4733434/>)

APPENDIX C

The Philadelphia ACE Project

Subject: **Fwd: 2019 Highlights - Philadelphia ACE Task Force**
Date: 12/17/2021 11:48:12 AM Eastern Standard Time
From: csmith-brown@healthfederation.org
To: bdavispa@aol.com

Carolyn Smith-Brown

Project Manager & Staff to Philadelphia ACE Task Force
Health Federation of Philadelphia
123 S. Broad Street, Suite 650
Philadelphia PA 19109

Stay connected to the Philadelphia ACE Task Force - join our email [list](#)
or for Resilience Events through TakeCarePHL sign up [here](#)

----- Forwarded message -----

From: **Philadelphia ACE Task Force** <csmith-brown@healthfederation.org>
Date: Wed, Dec 18, 2019 at 5:45 AM
Subject: 2019 Highlights - Philadelphia ACE Task Force
To: <csmith-brown@healthfederation.org>

THE PHILADELPHIA



PROJECT

Philadelphia ACE Task Force 2019 Highlights



A Big Step Forward!

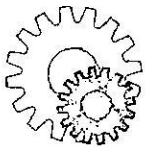
Exciting news! On December 10, 2019, the Philadelphia City Council approved [Resolution No. 19098900](#), "Calling upon the Occupational Safety and Health Administration to recognize Secondary Traumatic Stress as a workplace hazard, recommend steps to address mental health injury as a psychological hazard in the workplace as they do with physical injury, and create a standard for Secondary Traumatic Stress." Sponsors:

Councilmember Green, Councilmember Gym, Councilmember Henon, Councilmember Reynolds Brown.



Policy Workgroup Fall 2019

The Policy Workgroup re-convened in August to kick off a second wave of work, and build skills and understanding of how policy is made. Guest speakers Duwayne Terry, Legislative Aide from Philadelphia Councilmember Derek Green's office spoke about the process of City Council and PA State Representative Christina Sappey spoke about the Trauma Informed Education legislation and steps for bringing work to the State Legislature. Group members worked on their own policy agenda proposals and discussed whether policy or a different advocacy approach was most effective for reaching their desired goals. Active project groups include 1) STS & Resiliency Toolkit - identifying and publicizing local resources on Secondary Traumatic Stress; 2) participating in the Campaign for Trauma Informed Care-Community Action Network ([CTIPP-CAN](#)) and 3) drafting and support to bring the City Council Call-Upon Resolution to fruition (completed! - special thanks to Dr. Betty Lee Davis for her leadership) and drafting the letter to OSHA. If you would like to get involved in PATF Policy work or have other questions or ideas, please reply to this email.



WHY STS?

Have you wondered how Secondary Traumatic Stress (STS), ACEs and Community Resilience are linked? If you read the recent news articles highlighting the pain endured by Philadelphia Police officers, SEPTA train operators, Teachers, and Substance Use Professionals, you can see the impact STS has and its potentially preventable negative outcomes. Supporting workplace health supports healthy communities and reduces likelihood of events leading to ACEs. It is "trauma preventive."

Steps leading to Council Resolution

The Philadelphia ACE Task Force launched its policy work in Fall 2018, working with Caregivers Film to prepare background material and identify potential panelists for an informational hearing at City Council on secondary traumatic stress and resilience programs for city workers. The council resolution for the hearing was sponsored by Councilman Derek Green and Councilwoman Helen Gym. We had an overwhelming response of Task Force members who responded with the call for contributors to this project, and a core group who committed to organizing the work.



City Council Informational Hearing Panelists



Hearing Working Group & City Council Members

The PATF Policy Hearing Coordinating Group produced the materials and worked with Councilman Green's office to identify panelists and prepare them for the hearing. Panelists provided a cross section of information from the biology of STS to the impact on workers from different sectors to highlights from DHBIDS and DHS, PPD and PFD, and PhilaPOSH on what those are doing to prevent and mitigate the impact of STS. Additional testimony included the value of providing information for all levels of departments. This work is part of the #TakeCarePHL Initiative and is chronicled as a policy case study in the [Mobilizing Action for Resilient Communities \(MARC\) Policy and Advocacy toolkit](#).

Welcoming Dr. Roberta Waite to PATF Steering Committee

Roberta Waite, EdD, PMHCNSBC, FAAN, ANEF, has joined the [PATF Steering Committee](#). Director of Stephen and Sandra Sheller 11th Street Family Health Services, Roberta brings to the Task Force her expertise and passion from her work in a Sanctuary-Certified organization that continues to actively work to uphold the tenants of Sanctuary. Additionally, 11th Street, has engaged deeply in examining how racism and community level ACE-related issues affect the patients and service delivery. Roberta's interest in research is extensive having conducted the 11th Street ACE survey and recently co-authored the book, *"Adverse Childhood Experiences – What Students and Health Professionals Need to Know"*.



Philadelphia at APHA

APPENDIX D

Philadelphia City Council
Informational Hearings on Secondary Traumatic
Stress Resiliency Programs for Professional and
Family Caregivers and First Responders
December 7, 2018

Testimony
of
Betty Lee Davis, Ph.D., LCSW

**Philadelphia City Council
Informational Hearings on Secondary Traumatic Stress and
Resiliency Programs for Professional and Family Caregivers and
First Responders
Council Chambers, Room 400
Philadelphia City Hall
1401 John F. Kennedy Blvd.
Philadelphia, Pennsylvania 19102
December 7, 2018 10:00 AM**

Good Morning, Philadelphia City Council.

Thank you, you Philadelphia City Council, with special appreciation to Council Members Green and Gym as sponsors, for holding today's hearings about Secondary Traumatic Stress [STS] as a workplace hazard for Philadelphia's professional caregivers and first responders and resiliency programs.

I am Dr. Betty Lee Davis. I am a Licensed Clinical Social Worker, and I am honored to be here. As a member of the *CAREgivers film* Advisory Group, I joined the Philadelphia ACE Task Force Advocacy and Policy Workgroup, which brings me here today.

Before beginning my testimony, I would like to note that I have not made a practice of wearing hats, indoors or out, but I am wearing one today, not to make a statement as a working woman, as those of you of a certain era will know that Bella Abzug did, but to protect my scalp as it heals from a medical procedure and in doing so, I join Bella Abzug in the spirit of activism, not as a working woman, but as a woman working to protect workers from secondary trauma in the workplace.

As our Committee set about its task preparing for these hearings, we considered ways that we might achieve our goal of protecting Philadelphia workers from workplace STS. Given the volume and variety of workplaces, that was a formidable task. As we considered the myriad of possibilities, the light went on for me—OSHA! That is the job of OSHA, to protect workers from workplace hazards. My task for the group, then, became learning how to get OSHA to identify STS as a workplace hazard.

This testimony will highlight information about OSHA protection, how to secure it, and why Philadelphia could be a national leader for taking care of its workers by proposing OSHA guidelines for STS.

Appendix B provides excerpts from the OSH Act of 1970 specifically relevant to STS and resiliency programs; relevance of the OSHA Workplace Violence website to STS; and the benefits of STS and resiliency programs to the workplace and the worker.

Why OSHA Protection?

OSHA exists to help us protect our workers and communities. It sets standards that our diverse departments follow to take care of workers. It has recommendations, which are not required, but provide a guide for protection.

How Is It Secured?

In a telephone conversation with Maureen Ruskin, Deputy Director, Directorate for Standards and Guidance, Occupational Safety and Health Administration, I learned that the way to secure OSHA protection is by writing a letter “to bring STS to light” and ask OSHA to consider the request that it be regulated [personal communication, October 16, 2018]. Anyone can write the letter, which serves as a petition. It must be robust. Her follow-up written communication cited the article that sets the parameters for a letter of petition (see Appendix A). There are two options for OSHA requests: a website and a rule. They are not mutually exclusive. Both can be requested. The regulating process can take seven years. A website can be created immediately.

Philadelphia—A National Leader for Taking Care of Its Workers

Deputy Director Ruskin said that STS has never come to OSHA’s attention. She said that there is an OSHA website for emergency responders focused on physical safety, but they had not looked at psychological safety. She said that there are areas where a standard for STS might “fit in.” I was directed to Deputy Director Ruskin by the Philadelphia office where I was told that getting STS protection would be at the national policy level.

Concluding Statement

Not only is securing OSHA protection for Philadelphia's professional caregivers and first responders the most an efficient, effective, and comprehensive route to protect them from the effects of workplace exposure to others' trauma, providing employees with safe and healthful workplaces is the law (see Appendix D).

Invitation

Philadelphia's professional caregivers and first responders have a right to protection from workplace harm (See Appendix C). We invite you, Philadelphia City Council, to initiate the process to secure that right by submitting a letter of petition to request a new standard, which would create national policy to regulate STS as a workplace hazard, not only in the City of Philadelphia, but across the nation!

Be the trail blazer. Start now by requesting that a STS worksite be created to inform the public while OSHA goes through the regulating process. Make Philadelphia the leader. Do that, and I will say happily, with gratitude, "Hats off to you, Philadelphia City Council!"

APPENDIX E

Philadelphia City Council Call
upon the Occupational Safety and Health
Administration
Resolution
Introduction
December 7, 2019

RESOLUTION

Calling upon the Occupational Safety and Health Administration to recognize Secondary Traumatic Stress as a workplace hazard, recommend steps to address mental health injury as a psychological hazard in the workplace as they do with physical injury, and create a standard for Secondary Traumatic Stress.

WHEREAS, The Occupational Safety and Health Act of 1970 created a public law "to assure safe and healthful working conditions for working men and women; by authorizing enforcement of the standards developed under the Act; by assisting and encouraging the States in their efforts to assure safe and healthful working conditions; by providing for research, information, education, and training in the field of occupational safety and health; and for other purposes"; and

WHEREAS, Secondary Traumatic Stress ("STS"), defined as the emotional distress resulting when an individual hears or learns about the firsthand traumatic experience of another, also referred to as vicarious trauma, compassion fatigue or burnout, is a natural but disruptive byproduct for workers exposed to the trauma of others in the workplace and puts many types of professionals, such as first responders, police officers, physicians, nurses, teachers, child welfare workers, and other human services and behavioral health providers, at risk of developing its symptoms, including feelings of isolation, anxiety, dissociation, physical ailments, sleep difficulty, eating disturbance, intense negativity, difficulty coping, and for some, tragically, suicide; and

WHEREAS, 1910.3(a) "sets the parameters for someone to petition OSHA to set a standard: '1910.3 (a) Any interested person may petition in writing the Assistant Secretary of Labor to promulgate, modify, or revoke a standard. The petition should set forth the terms of substance of the rule desired, the effects thereof if promulgated, and the reasons therefor'" and recommends that the petition be sent to OSHA's Acting Assistant Secretary; and

WHEREAS, On December 7, 2018, Philadelphia City Council held a public hearing on STS and resiliency programs for professional and family caregivers and first responders, where professional caregivers and first responders representing firefighters, police officers, city unions, emergency medical services, child welfare workers, behavioral health and other human services providers, hospitals, public health, and criminal justice, testified about workplace STS effects among City of Philadelphia workers; and

WHEREAS, The Philadelphia ACE Task Force ("PATF"), a cross-sector network of individuals, institutions, organizations and departments which addresses adversity and trauma, joined with City Council to hold this hearing and unite around strengthening the health and resilience of the City's workforce by addressing STS through the *Take Care PHL* initiative; and

WHEREAS, At this hearing, City agencies with staff resiliency programs that address and mitigate STS were recognized and highlighted, concluding with a recommendation to create a citywide online STS "toolkit," including existing resiliency programs and other useful resources; and

WHEREAS, In a review of existing STS research, *Take Care PHL* found that in Pennsylvania, 39% of providers at a children's hospital were at moderate to high risk for compassion fatigue/STS, 21% at risk for burnout. 36-64% of intensive care nurses in one study reported burnout and 44-56% reported STS. Among police officers, 78.5% reported using psychiatric services outside of their departments; and

WHEREAS, Compassion satisfaction, the gratification brought by helping others, can also be a natural by-product of service work and can be significantly promoted by staff resiliency programs designed to mitigate STS and build resiliency, such as the Sanctuary Model, an institutional system for implementing a trauma-

informed approach that is supported by research and adaptable to a variety of organizational settings, for YOU from the University of Missouri Health System which uses a 3-tiered STS intervention model, and Trauma Informed Oregon, a statewide initiative to increase awareness of trauma, build staff resiliency and promote wellness; and

WHEREAS, Research studies, media reports, documentaries, and new workplace initiatives all point to an urgent need for OSHA STS workplace regulation, which would significantly advance workplace STS and resiliency program research through OSHA Act Sec.2(2): "for research in the field of occupational safety and health, including psychological factors involved, and by developing innovative methods, techniques and approaches for dealing with occupational safety and health problems;" and

WHEREAS, Given that workplace STS often goes unrecognized, OSHA regulation would benefit workers and employers through the provisions of OSHA Act Section 2: "(6) by exploring ways to discover latent diseases, establishing causal connections between work and environmental conditions, and conducting other research relating to health problems, in recognition of the fact that occupational health standards present problems often different from those involved in occupational safety; (7) by providing medical criteria which will assure insofar as practicable that no one employee will suffer diminished health functional capacity, or life expectancy as a result of the work experience, and (8) by providing for training programs to increase the number and competence of personnel engaged in the field of occupational safety and health;" and

WHEREAS, OSHA regulation would benefit workers by reducing the disruptive by-products of STS, increasing job satisfaction, and benefiting employers with increased job engagement and productivity and lower rates of absenteeism; and

WHEREAS, OSHA regulation of workplace STS would create national policy and the absence of such policy puts workers in the City of Philadelphia, Commonwealth of Pennsylvania, and the nation at risk for workplace STS and its many costs to workers, employers, and society. Now, therefore, be it

RESOLVED, BY THE COUNCIL OF THE CITY OF PHILADELPHIA, That this Council calls upon the Occupational Safety and Health Administration to recognize Secondary Traumatic Stress as a workplace hazard, recommend steps to address mental health injury as a psychological hazard in the workplace as they do with physical injury, and create a standard for Secondary Traumatic Stress.

FURTHER RESOLVED, That a copy of this Resolution be transmitted to the Occupational Safety and Health Administration as evidence of the sentiments of this legislative body.

Introduced by:

Councilman Derek S. Green

December 5, 2019

APPENDIX F

Companion Resources for Public Hearing on Secondary Traumatic Stress and Resiliency Programs for Professional and Family Caregivers and First Responders

TakeCare PHL Initiative

December 7, 2018

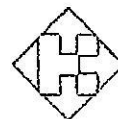
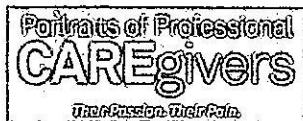
Companion Resources for
Public Hearing

**SECONDARY TRAUMATIC STRESS AND RESILIENCY PROGRAMS
FOR PROFESSIONAL AND FAMILY CAREGIVERS AND FIRST
RESPONDERS**

Committee on the Disabled and Persons with Special Needs
Council of the City of Philadelphia
December 7, 2018



- 3 About**
Overview of the Take Care PHL initiative and partners.
- 5 Infographic**
Visual tool describing secondary traumatic stress and Take Care PHL initiative.
- 7 Staff Resiliency Programs**
Short descriptions of select staff resiliency programs from across the country.
- 8 Research**
Brief literature review of evidence regarding secondary traumatic stress.



**HEALTH FEDERATION
OF PHILADELPHIA**
The keystone of community health since 1983

"Health care professionals, social workers, family caregivers, first responders, and other individuals who work with traumatized people or people in crisis can often experience trauma themselves. We are holding this hearing to hear their stories, and to learn how the City and other employers can best support Philadelphians who work as professional caregivers."

—Councilmember Derek S. Green

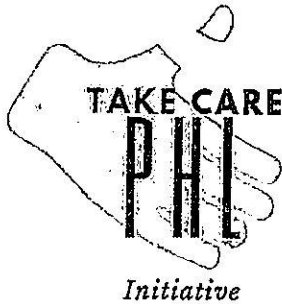
We would like to acknowledge the Philadelphia ACE Task Force Policy Workgroup and give special thanks to the following:

Vic Compher
Betty Lee Davis
Sandhyaa Iyengar
Leslie Lieberman
Lian Liu

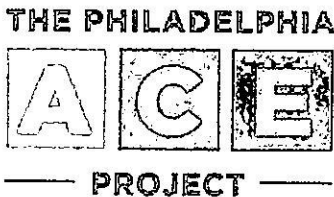
Chris Lyons
Sadie Mahmoud
Meghana Sharma
Carolyn Smith-Brown



About



Take Care PHL is an initiative which seeks to raise awareness of the presence and severe impact on our workplaces and community of secondary traumatic stress (STS). Take Care PHL aims to support professional and family caregivers and first responders by advocating for policies and practices that prevent or mitigate its toxic effects. Our goal is to position the City of Philadelphia at the forefront of defining a new culture in which we *take care* of each other.



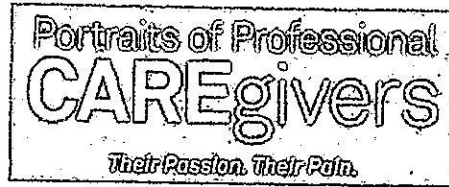
The Philadelphia ACE Task Force (PATF) is a network of more than 100 individuals from pediatrics, behavioral health, education, law, philanthropy, and others who are committed to building a resilient Philadelphia. Current strategic goals are to:

- Strengthen networks among professionals addressing ACEs
- Enhance research strategies to better understand the challenges we face and their possible solutions
- Partner with communities affected by trauma to better understand and identify related concerns and build awareness about ACEs and trauma, develop advocates, and co-create solutions
- Educate policymakers and advocate for systems change to better support trauma-informed approaches.

PATF holds periodic "Community of Practice" meetings as well as informal networking events to bring people together to accelerate the cross-sector uptake and implementation of trauma-informed practice. By convening engaged stakeholders across sectors, the Task Force seeks to provide professionals and community members with the tools necessary to envision and create a trauma-informed city.

For more information, visit <http://www.philadelphiaaces.org/>.

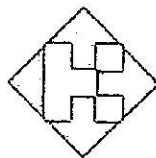




Portraits of Professional CAREgivers: Their Passion, Their Pain is a documentary film based on interviews with nurses, social workers, clinical psychologists, doctors, firefighters, first responders who rescue, assist, and help to heal the injured and traumatized—and also tell their own remarkable and often painful stories. The film takes us on a journey into a world the public rarely sees, depicting emotional costs experienced by professional care providers and probing the emotional consequences of professional public service.

The film asks the question: How are professional caregivers and first responders affected emotionally and physically? Who helps them? Viewers discover that engaged, empathic caregiving can sometimes be an occupational hazard; we explore the painful and human sides of these professions and vulnerable responses to trauma – Compassion Fatigue – also known as Secondary Traumatic Stress or Vicarious Trauma. The film also addresses high levels of career satisfaction and professional meaning that caregivers experience. Ultimately, the film provides ways to cope and recover from toxic stress in the workplace.

For more information, visit <https://caregiversfilm.com/>.



HEALTH FEDERATION
OF PHILADELPHIA

The keystone of community health since 1983

The mission of the Health Federation of Philadelphia is to improve access to and quality of health and human services for underserved and vulnerable populations.

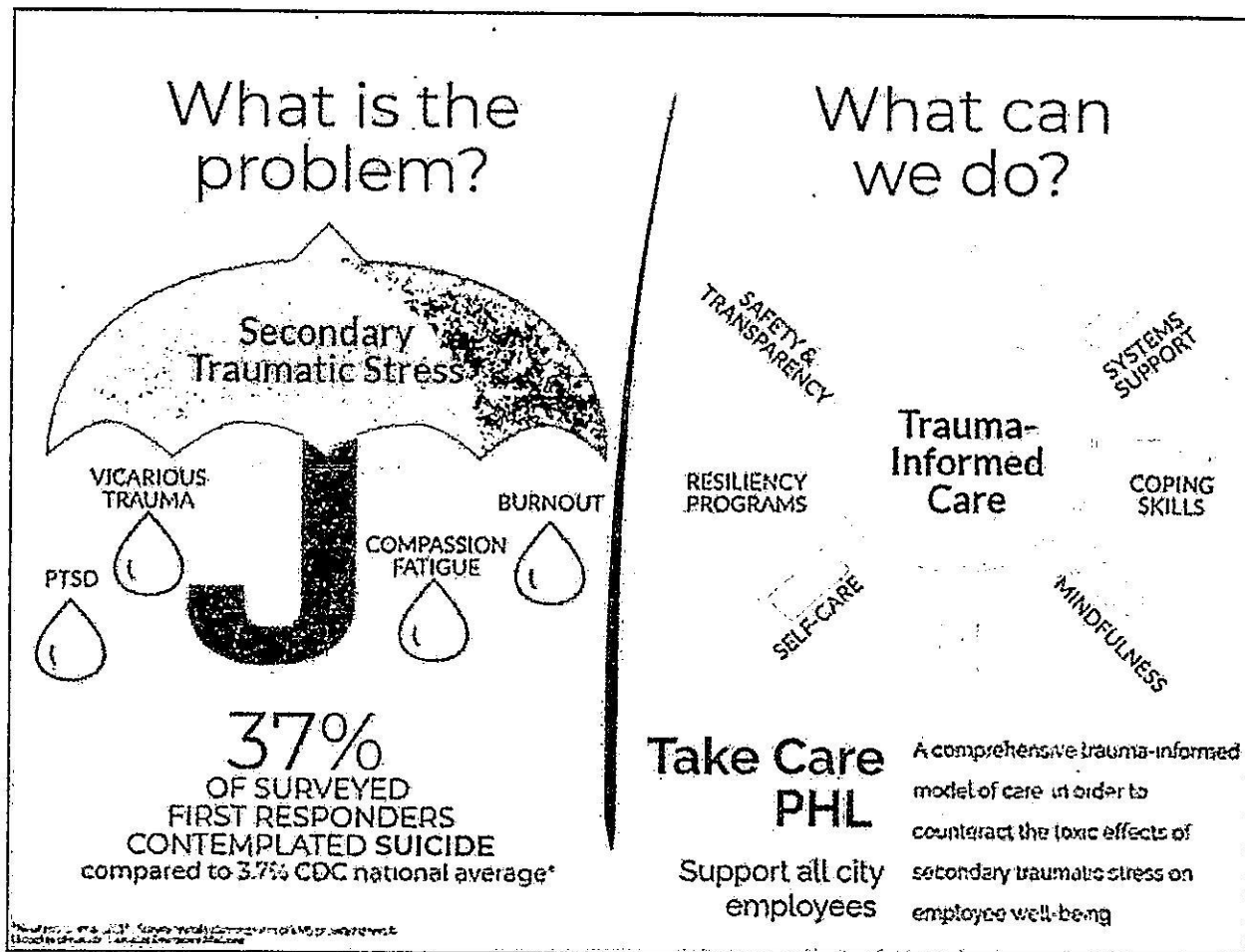
The Health Federation of Philadelphia serves as a keystone supporting a network of Community Health Centers as well as the broader base of public and private-sector organizations that deliver health and human services to vulnerable populations. We take a collaborative approach to promoting health by:

- Improving access to and quality of health care.
- Identifying, testing and implementing solutions to health disparities.
- Providing training and technical assistance to help other organizations operate more efficiently and effectively.

For more information, visit <http://healthfederation.org/>.



Infographic



Front



Secondary traumatic stress (STS) is a natural but disruptive by-product of working with traumatized people. Many types of professionals, such as first-responders, police officers, teachers, and human service workers, are vulnerable to developing this type of stress.

Symptoms of STS include feelings of isolation, anxiety, dissociation, physical ailments, sleep disturbances, intense negativity, and difficulty coping. Similar terms that each represent a facet of STS include vicarious trauma, post-traumatic stress disorder, burnout, and compassion fatigue.

It is preventable and treatable, however, if unaddressed, the symptoms can result in problems with mental and physical health, strained personal relationships, and poor work performance.

A comprehensive trauma-informed care model for the workplace is defined as one that **provides support to staff through resiliency programs and restructures the organization** so that staff and administration work together to **support one another** while working toward the common goal of serving the community at large.

It is an approach that will **change workplace climate** across the entire system and will ultimately be the most efficient avenue for reducing the monetary, time, and productivity costs to organizations due to the secondary traumatic stress workers experience.



Initiative

THE PHILADELPHIA



PROJECT



Back



Staff Resiliency Programs

This is a guide to resources and programs designed to lessen the impact of secondary traumatic stress (STS) and build resiliency.

The Sanctuary Model

- The Sanctuary Model is an institutional system for implementing a trauma-informed approach. The Sanctuary Model is supported by research and can be adapted to various organizational settings.
- <http://www.sanctuaryweb.com/>

CLEAR at Washington State University

- Collaborative Learning for Educational Achievement and Resilience (CLEAR), through Washington State University, sends consultants to work within school districts to help professionals develop practices to help students manage stress and achieve success.
- <https://s3.wp.wsu.edu/uploads/sites/2103/2015/09/CLEAR-BROCHURE-8-20-2015-for-web.pdf>

forYOU from The University of Missouri Health System

- forYOU uses a 3-tiered model of intervention for STS, starting with support within an employee's department or unit and progressing to additional resources and referrals as needed.
- <https://www.muhealth.org/about-us/quality-care-patient-safety/office-of-clinical-effectiveness/foryou>

Trauma Informed Oregon

- A statewide initiative to increase awareness of trauma and build resiliency, Trauma Informed Oregon has a large number of resources and recommendations for organizations seeking to limit the impact of STS and related issues.
- <https://traumainformedoregon.org/resources/resources-organizations/>

Schwartz Rounds Program:

- This program was developed in Massachusetts for healthcare professionals but could easily be adapted to schools, police departments, and other organizations. The Rounds Program features time built into healthcare providers' schedules to discuss the emotional challenges that can arise from their work to relieve stress and promote wellness.
- <http://www.theschwartzcenter.org/supporting-caregivers/schwartz-center-rounds/>

Recommendations to Improve Employee Assistance Programs (EAPs)

Below are some recommendations to enhance existing EAPs and reduce the impact of STS:

- Provide mental health services employees can access without a referral
- All employees to use unlimited sessions with EAP services
- When using a contracted service, seek out programs that offer STS-specific support
- Provide referrals and resources to cover a range of needs including food, housing, addiction assistance, etc.



Research

Key Findings and Statistics from Pennsylvania Studies

<p>39% of the care providers at a children's hospital were at moderate to extremely high risk for compassion fatigue (CF), and 21% was at moderate to high risk for burnout (BO).</p>	<p>Paul M. Robins, Lisa Meltzer, Natalya Zellkovsky, The Experience of Secondary Traumatic Stress Upon Care Providers Working Within a Children's Hospital, <i>Journal of Pediatric Nursing</i>.</p>
<p>Police officers express willingness to use a department referral to a psychologist, psychiatrist, or therapist (51.9%). In addition, among officers who reported using services outside department-provided options, 78.5% reported using psychological service providers.</p>	<p>Violanti, J.M. (2011). Police organizational stress: The impact of negative discipline. <i>International Journal of Emergency Mental Health</i>, 13(1), 31-36.</p>
<p>As a strong component in patient healing, interpersonal connection in the psychiatric/mental health setting can threaten nurses' health. Findings from 12 nurses highlighted connectedness as a process and personal decision that, with self-awareness and individualized self-protective, self-separating strategies, can enhance patient healing as well as nurse satisfaction and growth.</p>	<p>Judith E. Van Sant & Barbara J. Patterson (2013) Getting In and Getting Out Whole: Nurse-Patient Connections in the Psychiatric Setting, <i>Issues in Mental Health Nursing</i>, 34:1, 36-45.</p>
<p>When examining Intensive Care Unit nurses' scores, 40% of the group had average compassion satisfaction (CS) scores and 60% scored in the high range. Review of ICU nurses' individual scores showed that approximately 82% had average levels of CS and about 18% had high levels. The level of low BO was 36% and 64% had average levels. The level of STS for the low category was 56% and 44% fell in the average category.</p>	<p>Young, J. L., Derr, D. M., Cicchillo, V. J., & Bressler, S. (2011). Compassion Satisfaction, Burnout, and Secondary Traumatic Stress in Heart and Vascular Nurses. <i>Critical Care Nursing Quarterly</i>.</p>
<p>After adjusting for nurse and hospital characteristics, each additional patient per nurse was associated with a 23% increase in the odds of burnout and a 15% increase in the odds of job dissatisfaction.</p>	<p>Aiken, L. H. (2002). Hospital Nurse Staffing and Patient Mortality, Nurse Burnout, and Job Dissatisfaction. <i>Journal of American Medical Association, JAMA</i>.</p>
<p>Low professional quality of life measures (compassion satisfaction, compassion fatigue, and burnout) may be more prevalent in certain nursing specialties than others. Using cutoffs established by the ProQOL Scale guidelines (Stamm, 2010), this investigation found that the majority of study population nurses experienced average levels of CS (65%) and average levels of burnout (66%).</p>	<p>Mooney, C., Fetter, K., Gross, B. W., Rinehart, C., Lynch, C., & Rogers, F. B. (2017). A Preliminary Analysis of Compassion Satisfaction and Compassion Fatigue With Considerations for Nursing Unit Specialization and Demographic Factors. <i>Journal of Trauma Nursing</i>.</p>



Key Findings and Statistics from National Studies

<p>First responders, including policemen and firefighters, are more likely to die from suicide than in the line of duty, according to a new study. In 2017, at least 103 firefighters and 140 police officers took their own lives, compared to the 93 firefighters and 129 police officers who died in the line of duty.</p>	<p>Study: Police Officers and Firefighters Are More Likely to Die by Suicide than in Line of Duty. Ruderman Foundation, White Papers.</p>
<p>In the USA, approximately 15 % of physicians are thought to experience clinical impairment at some point in their careers with rates of anxiety, depression, and suicide higher than in the general population.</p>	<p>Cole TR, Carlin N (2009) The suffering of physicians. <i>Lancet</i> 374:1414–1415.</p>
<p>Approximately 82% of emergency nurses had moderate to high levels of burnout, and nearly 86% had moderate to high levels of compassion fatigue.</p>	<p>Hooper C, Craig J, Janvin DR, Wetsel MA, Reimels E. Compassion satisfaction, burnout and compassion fatigue among emergency nurses compared with nurses in other selected inpatient specialties. <i>J Emerg Nurs.</i> 2010;36(5):420–7.</p>
<p>The Firefighter Behavioral Health Alliance (FBHA) estimates that approximately 40% of firefighter suicides are reported. If these estimates are accurate, the actual number of 2017 suicides would be approximately equal to 257, which is more than twice the number of firefighters who died in the line of duty.</p>	<p>Study: Police Officers and Firefighters Are More Likely to Die by Suicide than in Line of Duty. Ruderman Foundation, White Papers.</p>
<p>A study in 2015 that found that 37% of surveyed providers have contemplated suicide at least once during their career. Compare this percentage to the CDC's national average of the general population (3.7%).</p>	<p>Newland, C., Barber, E., Rose, M., & Young, A. (2015). Survey Reveals Alarming Rates of EMS Provider Stress and Thoughts of Suicide. <i>Journal of Emergency Medical Services.</i></p>
<p>In a survey of more than 4,000 first responders, 6.6 percent had attempted suicide, which is more than 10 times the rate in the general population, according to a 2015 article published in the <i>Journal of Emergency Medical Services</i>.</p>	<p>Newland, C., Barber, E., Rose, M., & Young, A. (2015). Survey Reveals Alarming Rates of EMS Provider Stress and Thoughts of Suicide. <i>Journal of Emergency Medical Services.</i></p>
<p>Depression is commonly reported in first responders, and rates of depression as well as severity vary across studies. In a case-control study of certified EMS professionals, depression was reported in 6.8 percent, with mild depression the most common type (3.5 percent).</p>	<p>Bentley, Melissa A., et al. "An assessment of depression, anxiety, and stress among nationally certified EMS professionals." <i>Prehospital Emergency Care.</i></p>
<p>A recent study found both EMS and firefighting duties was associated with a sixfold increase in the likelihood of reporting a suicide attempt as compared to firefighting alone.</p>	<p>Stanley, Ian H., Melanie A. Horn, and Thomas E. Joiner. "A systematic review of suicidal thoughts and behaviors among police officers, firefighters, EMTs, and paramedics.</p>
<p>In relation to exhaustion, out of sampled midwives, 60.7% were found to be experiencing high levels of exhaustion and 30.3% burnout.</p>	<p>Mollart, Lyndall, et al. "Factors that may influence midwives work-related stress and burnout." <i>Women and Birth.</i></p>



<p>75% of the sampled Emergency Nurses reported at least one secondary traumatic stress symptom in the last week. Participants expressed that acute occupational stressors such as resuscitation and death were influencing factors towards this.</p>	<p>Morrison, L. E. and Joy, J. P. (2016) Secondary traumatic stress in the emergency department. <i>Journal of Advanced Nursing</i>.</p>
<p>Work-related stress is particularly pertinent to nurses, who make up the largest proportion of the healthcare workforce and are on the front lines of patient care. In 2006–2008, data from several national surveys showed that the overall burnout rate among nurses in the US ranged from 20% to 40%.</p>	<p>Neff, D.F., Cimlotti, J.P., Heusinger, A.S., Aiken, L.H., 2011. Nurse reports from the frontlines: analysis of a statewide nurse survey. <i>Nurs. Forum (Auckl.)</i> 46 (1), 4– 10.</p>
<p>In a study involving Child Protection Workers, 64% classified as moderate risk or higher for compassion fatigue; 40% classified as moderate or higher for burnout; 75% classified as good potential or higher for compassion satisfaction.</p>	<p>Elwood, L. S., Mott, J., Lohr, J. M., & Galovski, T. E. (2011). Secondary trauma symptoms in clinicians: a critical review of the construct, specificity, and implications for trauma-focused treatment. <i>Clin Psychol Rev.</i></p>
<p>12.7% of the sample of physicians screened positive for STS with clinical levels of intrusion, arousal, and avoidance symptom clusters, and 33.9% had at least one symptom cluster at clinical levels. Low resilience and a history of personal trauma were positively associated with positive STS screens and STS severity scores.</p>	<p>Jacob W. Roden-Foreman, Monica M. Bennett, Evan E. Rainey, John S. Garrett, Mark B. Powers & Ann Marie Warren (2017) Secondary traumatic stress in emergency medicine clinicians, <i>Cognitive Behaviour Therapy</i>.</p>
<p>Studies have reported that 56% of nurses working in acute medicine, and 20% in Accident and Emergency reported emotional exhaustion.</p>	<p>Beaumont, Elaine, et al. "Compassion for others, self-compassion, quality of life and mental well-being measures and their association with compassion fatigue and burnout in student midwives: A quantitative survey." <i>Midwifery</i>.</p>
<p>In 2011, 74% of 4614 nurses surveyed by the American Nurses Association identified acute and chronic effects of stress and overwork as a top safety and health concern.</p>	<p>American Nurses Association, 2011. <i>Health and Safety Survey Report: August</i>. ANA, Silver Spring, MD.</p>



APPENDIX G

“How TakeCare PHL Came to Be”

About

How #TakeCarePHL Came To Be

The story of Take Care PHL: People of the city take on secondary traumatic stress (STS).



Lights, Camera, Action on STS

The path toward policies that would buffer Philadelphia workers from secondary traumatic stress began with a simple ask by the Philadelphia ACE Task Force (PATF): Come see a movie.

The film was a documentary, Portraits of Professional CAREgivers: Their Passion, Their Pain. In it, workers across sectors—nurses, social workers, psychologists, doctors, firefighters, first responders—describe their efforts to assist people with injury and trauma, and about the painful, sometimes debilitating, toll of that work.

The screening, attended by more than 250 people, launched an effort to put secondary traumatic stress on the radar of Philadelphia's policy-makers.



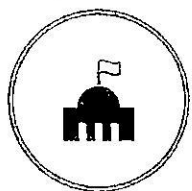
2017

A Widening Circle of Support

After meetings involving City Council members, PATF leaders and the makers of CAREgivers, Council passed a resolution marking February 17 as National Caregivers Day in Philadelphia.

PATF members and Vic Compher, CAREgivers' co-producer, briefed Council members and their staff on STS and showed them an edited version of the film.

The circle widened; later that year, members of the local chapter of AFSCME, the public employees' union, also screened the film.



2018

City Council Listens: Workplace Stress Is Real

A second City Council resolution recognized first responders along with caregivers and referred to trauma, toxic stress and the need for a \$15-per-hour livable wage.

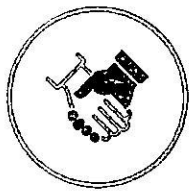
City Council called for hearings on STS.

PATF launched a policy workgroup to learn more about STS—to examine existing studies, learn about policies to prevent and mitigate STS and see what other localities were doing.

A smaller planning committee of the workgroup met weekly to prepare for the City Council hearings. The workgroup dubbed the initiative “Take Care PHL.”

On December 7, City Council members heard testimony from researchers and trauma experts, labor leaders and individuals working in health care, child welfare, behavioral health, police and firefighting.

Their message: that STS affects all of those sectors, along with teachers, juvenile justice workers, 911 dispatchers, transit drivers and emergency medical technicians. That such stress is serious and real. And that the city could become a leader in recognizing, preventing and treating its corrosive impact.

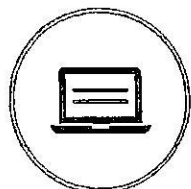


2019

PATF Partners with City on STS

PATF continued to support the city’s efforts to address STS, developing an online toolkit and helping to craft a resolution calling on the Occupational Safety and Health Administration (OSHA) to recognize STS as a workplace hazard.

That resolution passed City Council in December.

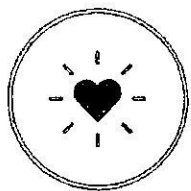


2020

Virtual Cafes and “Real World” Wellness Stories

The COVID-19 pandemic erupted, along with an economic freefall and a nationwide reckoning on racial justice. In response, the PATF launched free virtual cafes, open to city workers and residents, offering information on the biology of stress and strategies for boosting wellness and resilience.

The group also gathered “real world” stories from workplaces across the city — hospitals, non-profits, city departments, unions—that are trying to build wellness and reduce the risk of traumatic stress.



2021

Take Care PHL: Supporting Each Other, Wherever We Work

The pandemic isn't over.

The work on STS continues.

Wherever people are working—in office cubicles, masked and socially distanced, in classrooms or hospitals or from a Zoom screen in their kitchens, they are vulnerable to the personal and communal traumas of this past year. When we support those who care for others, we also bolster those workers' parents, children and friends.

We knit a stronger community. We #TakeCarePHL.

#TakeCarePHL raises awareness about and destigmatizes secondary traumatic stress (STS). Through learning and sharing solutions about this occupational hazard, we build a stronger, healthier, and more productive workforce.

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APPENDIX H

“Wellness at the workplace in the time of COVID
and this time of change”

*First in a Series: One real world story on addressing
workplace stress--The Violence Prevention Initiative
at Childrens Hospital of Philadelphia*

*Second in a series: Real world story #2 on
addressing workplace stress--The Support Center
for Child Advocates*

Subject: **Betty Lee, Workplace Stress? Real-world workplace action steps for wellness in this Virtual Cafe**

Date: 7/13/2020 3:03:44 PM Eastern Standard Time

From: csmith-brown@healthfederation.org

To: bdavispa@aol.com



Free Virtual Cafe brought to you by the Philadelphia ACE Task Force - pass this invitation along!

Click to Register for Tuesday, July 21, 2020 12:00 noon - 1:00 pm

Wellness at the workplace in the time of COVID and this time of change

*First in a Series.
One real world story
on addressing
workplace stress*

Service to others is rewarding, but struggling to manage stress, sometimes traumatic stress, can be challenging for health, mental health, first responders, and other service providers when providing care to others.

This cafe session shares the story from **Violence Prevention Initiative at CHOP**, about how their workplace is grappling with traumatic stress faced by staff, what's working, and what's not.

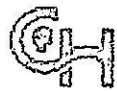
Participants will be able to ask questions during the virtual cafe session and get/share ideas to take back to their own workplaces.

The Virtual Café series seeks to build an online community that acknowledges, addresses, and prevents traumatic stress, and will offer examples of workplaces that are supporting steps to worker wellness and resilience in Philadelphia and beyond.

**Learn • Practice
Relax • Share**

Presenters:

**Laura Vega, Dr. Joel Fein and
Ayana Bradshaw**



**Children's Hospital
of Philadelphia**

Violence Prevention Initiative

Ayana Bradshaw, MPH is the Administrative Director for the Center for Injury Research and Prevention (CIRP) and the Violence Prevention Initiative (VPI) at The Children's Hospital in Philadelphia. In this capacity she oversees all financial, administrative, operational, managerial, human resources and strategic planning components of the Center. Ms. Bradshaw has over 20 years of experience in multiple facets of public health, including but not limited to developing community health interventions for underserved populations, serving as speaker and convener in community-based participatory research efforts, managing a chronic disease grantee program for the Philadelphia Department of Public Health, and serving as a curriculum writer for online continuing education credits. Additionally, Ms. Bradshaw has served as an Adjunct Instructor at Temple University and West Chester University and currently serves on several Boards of Directors, including PMHCC and The West Oak Lane Charter School.

Joel A. Fein MD, MPH is a Professor of Pediatrics and Emergency Medicine at the Perelman School of Medicine at University of Pennsylvania and an attending physician and Director of Advocacy and Health Policy for the Emergency Department at Children's Hospital of Philadelphia (CHOP). He is a Co-director of the Violence Prevention Initiative at CHOP and the Director for its Violence Intervention Program. Dr. Fein is a member of the leadership team for The Center for Pediatric Traumatic Stress, within the National Child Traumatic Stress Network. He is a Steering Committee member of the Philadelphia ACES Task Force.

Laura Vega, LCSW, DSW is the Clinical Manager for the CHOP Violence Intervention Program (VIP). She has more than 20 years of experience working with children and adolescents in the community and hospital-based settings. She is a Licensed Clinical Social Worker and received her Doctorate in Social Work from the University of Pennsylvania's School of Social Policy and Practice. Laura has worked exclusively with assault-injured youth and their families over the last eight years. She has provided ongoing leadership in establishing the CHOP VIP policies and procedures. She provides supervision, training, and consultation to hospital staff and students. Ms. Vega is trained in the Sanctuary Model, the Child and Family Traumatic Stress Intervention (CFTSI) and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). She developed the Stress-Less initiative, a trauma-informed group model to address secondary traumatic stress (STS). Her research interests are in building personal and team resilience to mitigate STS.

Watch for upcoming registration links on the Philadelphia

ACEsConnection Calendar for more Free Virtual Cafes

Subject: Betty Lee, Workplace Stress? Real-world workplace stories #2. 8/6 Join the cafe!
Date: 7/30/2020 4:45:20 PM Eastern Standard Time
From: csmith-brown@healthfederation.org
To: bdavispa@aol.com



Free Virtual Cafe brought to you by the Philadelphia ACE Task Force -
 Please pass this invitation along!

Click to Register for Thursday, August 6, 2020 3:30 pm - 4:30pm

Wellness at the workplace in the time of COVID and this time of change

Second in a series: Real world story #2 on addressing workplace stress

Service to others is rewarding, but struggling to manage stress, sometimes traumatic stress, can be challenging for health, mental health, first responders, and other service providers when providing care to others.

This cafe session shares the story from [Support Center for Child Advocates](#) about how their workplace is grappling with traumatic stress faced by staff, what's working, and what's not.

Participants will be able to ask questions during the virtual cafe session and get/share ideas to take back to their own workplaces.

The Virtual Café series seeks to build an online community that acknowledges, addresses, and prevents traumatic stress, and will offer examples of workplaces that are supporting steps to worker wellness and resilience in Philadelphia and beyond.

Have your own story to share? Let us know!

**Learn • Practice
 Relax • Share**



CENTER FOR EXCELLENCE IN ADVOCACY

Presenters

Frank Cervone

and

Meghan Johnson

Frank P. Cervone, ESQUIRE, Executive Director of the Support Center for Child Advocates (*Child Advocates*), the pro bono lawyer program for abused and neglected children in Philadelphia. Prior to his work at *Child Advocates*, Frank was a Staff Attorney at Delaware County Legal Assistance Association and Adjunct Clinical Professor at Villanova University School of Law, where he instructed law students in domestic-abuse and child-support litigation. He previously served as counsel for Saint Gabriel's System, an agency providing treatment services for juvenile offenders.

Mr. Cervone currently serves as a member of the Pennsylvania Child Welfare Council, helping to shape and guide child welfare policy and practice in the Commonwealth. He is a founder and co-director of the National Children's Law Network, former chair of the Board of the Children's Trust Fund of Pennsylvania, former chair of the American Bar Association Section of Litigation Task Force on Children, and served as a member of the Supreme Court of Pennsylvania Juvenile Court Procedural Rules Committee. In 2006-7 Mr. Cervone served as a member of the Mayor's Child Welfare Review Panel examining the Philadelphia child welfare system. Mr. Cervone lectures and trains both lay and professional audiences in child abuse and child advocacy.

He received the *Legal Intelligencer* Lifetime Achievement Award in 2013, the American Bar Association Mark Hardin Award for Child Welfare Legal Scholarship and Systems Change in 2014, the *Philadelphia Business Journal* Most Admired CEO Award in 2015, the 2017 John F. Kennedy Memorial Award presented by Northeast Community Center for Behavioral Health, the 2019 National Legal Aid & Defender Association Kutak-Dodds Civil Prize, and numerous other local and national awards. Frank is a graduate of the University of Pennsylvania and Villanova University School of Law and has a Master's Degree in Theology and Ministry from LaSalle University. He has been married to Doylestown lawyer and Warwick Township Supervisor Judith Algeo since 1990. He likes to garden, cook, swim and play with his grandkids.

Meghan Johnson, MPH is the Project Manager for the Center for Excellence in Advocacy at the Support Center for Child Advocates in Philadelphia. In this capacity, she develops, coordinates, and delivers advanced training programs to professionals throughout Pennsylvania, including lawyers, medical professionals, social workers, educators, and behavioral health professionals. Prior to joining *Child Advocates*, Ms. Johnson served as Program Coordinator for the American Academy of Pediatrics, New Jersey Chapter where she developed and coordinated training programs focused on evidence-based practices for evaluating and reporting suspected child abuse and neglect cases for pediatric healthcare providers. Ms. Johnson earned her bachelor's degree in sociology from the University of Notre Dame, with a minor in public policy through the University's Hesburgh Program of Public Service. She received her master's degree in public health from the University of Wisconsin- Madison School of Medicine and Public Health. Ms. Johnson regularly trains at agencies throughout the Philadelphia region and at national and

APPENDIX I

Teachers Leaving the Field

APPENDIX I

Teachers Leaving the Field

philadelphia inquirer article about teachers leaving the field

Sign Out

Web Images Video More Anytime SafeSearch

About 606,000 search results

Web results:

Four Philly teachers talk about why they have quit in the ...
[www.inquirer.com/news/philadelphia-teacher...](#)
 To contextualize the sharp rise in departures, *The Inquirer* spoke to four teachers who recently resigned. Three asked not to be identified because they are looking for new jobs or fear retribution. 'The number alone was overwhelming'

Here's why these Philadelphia teachers decided to quit — or ...
[www.inquirer.com/news/philadelphia-teacher...](#)
 by Kristen A. Graham Published Jun. 4, 2023, 5:00 a.m. ET Pennsylvania teachers are leaving their jobs at the highest level on record. Zach Posnan knows why. On paper, this Philadelphia educator is the perfect candidate to spend his career in classrooms, a teacher so skilled that he just won a Lindback prize for distinguished teaching.

The number of Philly teachers quitting midyear is up 200% ...
[www.inquirer.com/news/teachers-quit-philadelphia...](#)
 Between Dec. 1 and Feb. 15, 169 Philadelphia School District teachers quit, a 200% increase over the 57 resignations during the same time frame in the 2020-21 school year. Pre-pandemic, in the 2019-20 school year, 93 teachers resigned. The district has about 9,200 teachers overall.

Teachers leaving PA schools faster than ever - Inquirer.com
[www.inquirer.com/news/pennsylvania-teacher...](#)
 Teachers are leaving Pa. schools at the highest rate on record, a new analysis shows "Recent research strongly suggests that the prestige and respect for teachers has declined dramatically in recent years," a Penn State study found. Pennsylvania classrooms are losing teachers at its highest rate on record, a new study found.

Videos for Philadelphia Inquirer Article About Teachers Leaving The Field



'There Will Be No Teachers Left': Philly YouTube
 Philadelphia teachers leaving YouTube
 Why teachers in America are leaving PBS
 Public Schools Are Struggling to Retain Time

See more videos for Philadelphia Inquirer Article About Teachers Leaving The Field

Philadelphia teachers leaving classrooms at highest rate in ...
[www.fox29.com/news/philadelphia-teachers-leaving...](#)
 PHILADELPHIA - Philadelphia school teachers are leaving the profession at the highest rate in Pennsylvania, according to a new study by Penn State University.

Philly schools moved 50 teachers weeks into the school year ...
[www.msn.com/en-us/news/us/philly-schools-moved...](#)
 District-wide, 50 teachers were forced to change schools. In total, 58 schools lost teachers — an 87-percent reduction. Fifty schools gained a cumulative total of 66 teacher positions.

Teachers are calling it quits amid rising school violence ...
[www.cnn.com/2023/05/31/us/teachers-quitting...](#)
 Nearly half of the public education employees — working in elementary, secondary and postsecondary institutions — who left the profession in March resigned, according to preliminary numbers...

Hiring teachers is a challenge. Here's how one Philly-area ...
[www.inquirer.com/news/teacher-shortage...](#)
 Update: This story has been corrected to clarify that the attrition rate of 6.2% in 2021-22 represents 1,657 additional teachers leaving Pennsylvania public schools compared to the year before. Tu never isn't a new issue. But in the past, "you had hundreds of people" applying to fill the spots, said Dan McGarry.

Philadelphia school district sees 'dramatic increase' in ...
[www.foxbusiness.com/lifestyle/philadelphia...](#)
 via FOX Business Headlines 2/25 Here are your FOX Business headlines. Dozens of teachers have left the Philadelphia school district within the past two months, and filling those spots has...

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- 🔍 philadelphia teachers quitting
- 🔍 four philly teachers quitting
- 🔍 philadelphia music teacher quits
- 🔍 teachers leaving schools in pa
- 🔍 philadelphia music teacher resigns

[Sign Out](#)

leaving the field

- 🔍 philadelphia inquirer article about teachers leaving the field of education
- 🔍 philadelphia inquirer article about teachers leaving the field of philosophy
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