**



*Definitions of themes/sub-themes and supporting quotes*

|  |  |  |
| --- | --- | --- |
| **Themes and Nested Sub-Themes** | **Definition** | **Example Quote** |
| **Vision and Hopes** | Participants’ initial vision and hope for RSC project. | P: …*creating a culture of inclusivity, teach kids alternative coping skills, so that they can learn how to talk about what happened to them, rather than going into that negative cycle with substance abuse and. I had really high hopes for what this type of work could do.* |
| **Defining and Measuring Success** | Participants’ description of what success for the project would look like at their site and how this could be measured. | P: *On the teacher's side I think we would see a culture among teachers of positivity and resilience themselves and of problem solving rather than of complaining and friction…And then, with the students and the teachers on board, I think you would see more positive relationships and that would just lead to less suspensions, less drug use on campus, lower drop-out rates.* |
| **Implementation Progress To-Date** | Participants’ descriptions of the progress (or lack thereof) their site has made with implementing RSC. | P: *It stopped basically. Fortunately, we were able to get through the needs assessment and the focus groups really well, which was great.* |
| **Factors Inhibiting Implementation** | Participants’ perceived barriers to implementing RSC at their site. | See sub-themes |
| Turnover | Implementation barriers related to turnover. | P: *Unfortunately,…we haven't been able to do the integration that we were hoping to do, because we have to start over so often.* |
| Insufficient By-in or Support | Implementation barriers related to insufficient buy-in or support. | P: *The biggest roadblock I see is the buy-in from the teachers and getting that time and shifting their perspective on this*. |
| Competing Priorities | Implementation barriers related to competing priorities. | P: *We just didn't get a lot of time with teachers. The idea was "Yes. You know, the teachers want it. We think this is great." And then where the rubber, you know, meets the road with time, the time wasn't available for us.* |
| Limited Diffusion | Implementation barriers related to limited diffusion of RSC beyond SBHC. | I: *Do you feel that it's trickled up to administration?*  P: *Not at all.* |
| **Factors Promoting Implementation** | Factors participants perceived as promoting successful implementation of RSC at their site. | See sub-themes |
| RSC Project Champions | RSC project champions as a factor promoting successful implementation of RSC. | P: *I would say having champions is key.* |
| Adequate Buy-in and Support | Adequate buy-in and support from stakeholders (outside of CASBHC) as a factor promoting successful implementation of RSC. | P: *You have to have supportive leadership. I think the reason this project has been successful is because we have the buy-in from top administration.* |
| Support from CASBHC | Support from CASBHC project leadership as a factor promoting successful implementation of RSC. | P: *Both [CASBHC project managers] did a great job helping get information to the leadership to help them understand and also providing resources. "Hey, we can support you. We can do trainings. We have gift cards, and we can provide chimes and weighted blankets and whatnot to help you in your efforts." So, I think being the experts available to answer questions, provide training and resources was really helpful, and the fact that things are shifting.* |
| Trainings | Training as a factor promoting successful implementation of RSC. | P: T*he trauma training touched a good variety of people and really helped move the project forward. Because every single person that attended the training, I feel got motivated, or it impacted everyone in some way. It kind of built that buzz or more empowered like, "Okay, we can do this. We're gonna make it happen."* |
| Data | Data as a factor promoting successful implementation of RSC. | P: *If we had something a little bit more concrete, for the sales pitch, I think rooted in research data, I think that might be impactful on the front end. Because if you can come in saying, "I can improve your grades, your teacher turnover will be reduced, and kids will be more regulated and ready to learn and less disruptive," then you've got their attention.* |
| **Perceived Impacts** | Participants’ perceived impact of the RSC program on their site. | See sub-themes. |
| Culture and Climate | Participants’ perceived impact of the RSC program on the culture and climate of their site. | P: *[T]he last two years we've been talking “trauma-informed care, trauma-informed care, trauma-informed care”. And now we have these other pockets talking about the reflection of trauma-informed care in all of these facets, whether it's health, wellness, education, community, so it's been fun to have a foundation to build off of, and I think that's the project has helped us create.* |
| Knowledge, Awareness, Perceptions | Participants’ perceived impact of the RSC program on knowledge, awareness, and perceptions of trauma-informed care at their site. | P: *I think it's been really eye-opening. I feel like the staff really learned a lot and have made some "ahas" about things they might have done that might not have been the most ideal in working with students and seeing opportunities for them…* |
| Disciplinary Decision-Making | Participants’ perceived impact of the RSC program on disciplinary decision-making at their site. | A teacher’s response to RSC’s impact on their personal approach to disciplinary decision making:  *So just being mindful of [TIC] when we are thinking about discipline and where that comes in. And do we need to discipline this? Is this a conversation? Is this a consequence situation? Knowing the difference between them.* |
| **Outlook for RSC Moving Forward** | Participants’ description of their or others’ impressions of RSC to-date and/or outlook about RSC moving forward. | P: *I just think it's really positive. I feel really good. Obviously, there's so many factors, but I feel really good about where we are and the potential that this initiative has to really make a difference. So, I think it' a great program. It's great. It makes sense, and it just depends on the school district and the staff on how it gets rolled out. But I think it's a really good opportunity to make a difference in this school.* |
| **Lessons Learned and Advice** |  | I: *If you wanted another program to be successful, what would they need to know in order to pull this off well?*  P: *So, they [will] need foundational mental health knowledge or psychological knowledge of just how...well, depending on what school you are in, but for here at the high school, how the teen brain works.*  P: *I guess I would say having multiple champions…several people in the school that are school district staff and school-based health center staff who understand and are excited about the initiative so that if there is turnover, they're able to keep it moving and keep that conversation going cause I think we missed the boat on that.* |