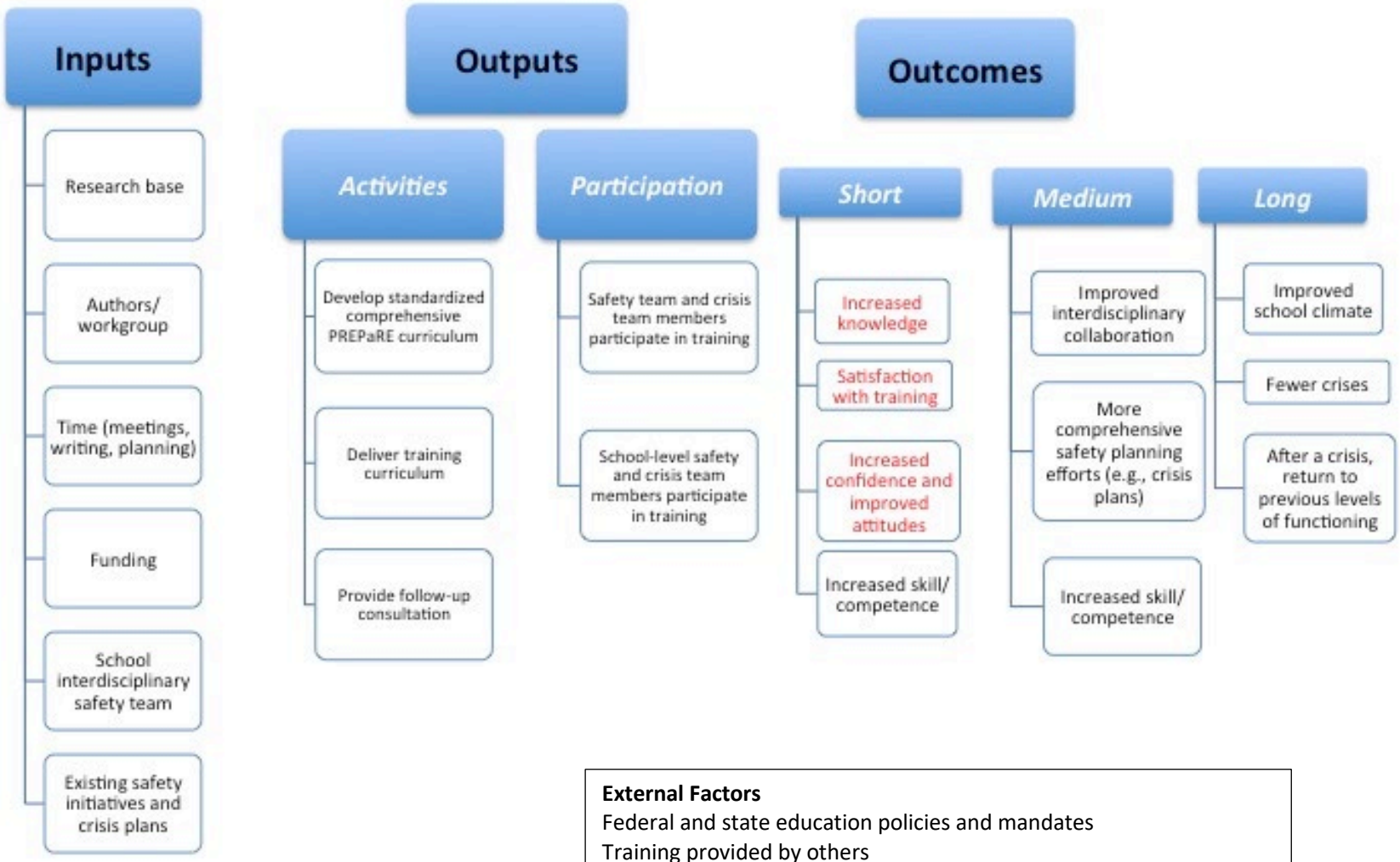
PREPaRE CRISIS PREVENTION AND INTERVENTION TRAINING CURRICULUM
Third Edition, 2020 PROGRAM EVALUATION SUMMARY

School crises are characterized as (a) extremely negative, (b) uncontrollable/unpredictable, and (c) have the potential to impact a large number of people (Brock et al., 2016). These include but are not limited to violent and unexpected deaths, natural disasters, and infectious disease outbreaks. Although crises are largely unpredictable, planning and preparing to respond is critical. School professionals report that they are more ready to handle a school crisis when there is a well-developed crisis plan that has been read and practiced (Steeves et al., 2017; Werner, 2015). Training is critical for improving the knowledge, attitudes, and skills of school-based professionals to prevent and respond to crises (Nickerson et al., 2014; Rees & Sutton, 2011; Steeves et al., 2017).

The *PREPaRE School Crisis Prevention and Intervention Training Curriculum* (Brock et al., 2009; Brock et al., 2016) has been developed by the National Association of School Psychologists as part of its leadership in crisis prevention and response. It is based on the assumptions that (a) the skill sets of school-based professionals are best utilized when embedded within a multidisciplinary team that engages in crisis prevention, protection, mitigation, response, and recovery; (b) because school crisis management is unique, it requires its own model; and (c) school-employed mental health professionals are best prepared to address mental health issues associated with school crises. PREPaRE Workshop 1, Third Edition: *Comprehensive School Safety Planning: Prevention Through Recovery* teaches how to establish and sustain comprehensive school safety efforts that attend to both physical and psychological safety. It addresses critical components needed to develop, exercise, and evaluate safety and crisis teams and plans and conduct building vulnerability assessments based on foundational documents provided by the U.S. Departments of Education (2013, 2019) and Homeland Security (2008). PREPaRE Workshop 2, Third Edition, *Mental Health Crisis Interventions: Responding to an Acute Traumatic Stressor in Schools* develops the knowledge and skill required to provide immediate mental health crisis interventions to the students, staff, and school community members who have experienced an acute traumatic stressor. The PREPaRE acronym includes the sequential and hierarchical steps of crisis prevention and intervention: **P**revent/Prepare for psychological trauma; **R**eaffirm physical health, security, and safety; **E**valuate psychological trauma; **P**rovide interventions **a**nd **R**espond to psychological needs; and **E**xamine the effectiveness of prevention and intervention efforts.

This evaluation focuses on the short-term outcomes (i.e., highlighted in red in Figure 1) of training participation, including changes in knowledge, changes in attitudes, and satisfaction in workshops held in 2020 (January to December). Because of the COVID-19 pandemic, the PREPaRE curriculum format and materials were adapted to be presented in a virtual/distance format to ensure the safety of trainers and participants. Virtual learning workshop participants followed the standard protocol for setting up a NASP PREPaRE online account; downloading workshop materials; completing the online pretest, posttest, and evaluation; and (for Workshop 1) watching an online video. Certificates of attendance for the virtual workshops were modified to indicate participants completed a PREPaRE workshop via distance learning. Evaluation results in this report are presented separately for in-person and virtual workshops.

Figure 1. Logic Model of PREPaRE



External Factors
Federal and state education policies and mandates
Training provided by others
Competing priorities in team members' roles/responsibilities
Size of school/district; number and extent of crises and threats

PROGRAM EVALUATION PROCEDURE, MEASURES, AND DATA ANALYSIS

Procedure. All administrative components of the workshop are conducted through the use of the online PREPaRE Catalog including mandatory preworkshop registration, access to workshop materials and preworkshop content, pre- and posttests, workshop evaluation, access to the certificate of completion, and postworkshop reports. Prior to attending the workshop, participants are required to complete a pretest. After completion of the in-person workshop, participants are required to complete both the posttest and evaluation within 7 days in order to access the certificate of completion.

Pre- and Posttests: Attitudes and Knowledge. Prior to attending the workshop, participants are asked to complete an online test that assesses demographic information about participants, attitudes, and knowledge. The Workshop 1 pretest and posttest contain four items to measure attitudes towards crisis prevention and preparedness using a 5-point Likert scale (e.g., "How anxious are you about engaging in school safety planning?") and 16 questions that assess school crisis prevention and preparedness knowledge. The Workshop 2 pretest and posttest contain four items that measure attitudes towards providing mental health crisis interventions using a 5-point Likert scale (e.g., "How anxious are you about providing school mental health crisis interventions?") and 13 questions that assess knowledge regarding mental health interventions after a crisis. All knowledge items are multiple-choice and scored as correct (1) or incorrect (0). Analyses were then conducted on participant responses to produce means and standard deviations and to assess changes in attitudes and knowledge from pre- to posttest both generally and based on demographic variables.

Satisfaction. Immediately following the completion of the posttest, participants are asked to complete an evaluation survey to assess their satisfaction with the training content and experience. Evaluations for both workshops have both quantitative and qualitative sections. For Workshop 1, nine items evaluate workshop satisfaction and six items evaluate workshop objectives. For Workshop 2, nine items evaluate workshop satisfaction and nine items evaluate workshop objectives. With regard to the qualitative sections, both workshop evaluations use six open-ended questions: three questions pertain to workshop details (e.g., location and date) and three questions evaluate participant suggestions for strengths of the workshop, potential improvements, and specific skills and knowledge they feel that they gained during the workshop. Quantitative analyses on participant satisfaction surveys are conducted to produce means and standard deviations and qualitative analyses are conducted to identify trends in participant responses.

Missing Data. Not all participants provide complete data. There were complete data (e.g., pretest, posttest, and evaluation) for 66% of participants for the In-Person Delivery workshops and 86% of participants in the Virtual Delivery workshops. Analyses were conducted for participants for whom matched data on pre- and posttests were available, and multiple imputation was used for item-level missing data. Evaluation data were analyzed separately (not matched), and item level data were listwise deleted.

Qualitative Analyses. In addition to the quantitative evaluation survey, participants are asked three open-ended questions about strengths of the workshop, specific knowledge and/or

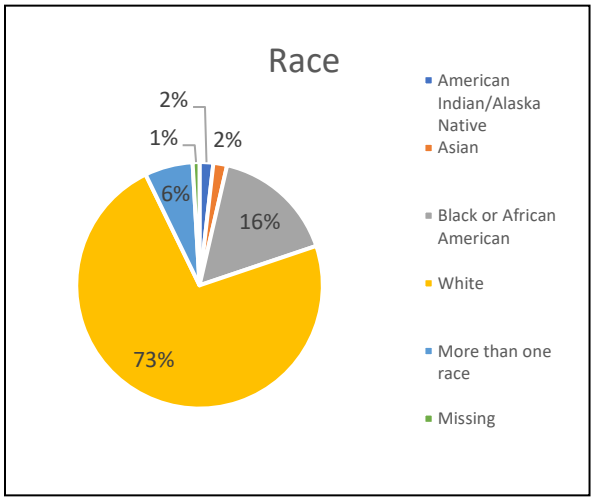
skills gained, and recommendations for improvements. While numerous potential themes emerged from each of the three open-ended evaluation questions in each PREPaRE workshop, only those found to be occurring in at least 10% of the sample were deemed common enough to summarize. This is aligned with Ryan and Bernard's (2003) recommendation that themes be identified by repetition as determined by the researcher. The 10% threshold provided an opportunity to analyze a sufficiently robust, yet manageable, number of themes. This level was determined based on the procedures of a similar qualitative study of the PREPaRE curriculum (Brock et al., 2011). The themes, as developed, were intended to be mutually exclusive. That is, each theme category could stand on its own. Participants wrote responses that were then categorized into content areas. This convention was employed based on the observations of the two graduate-level university faculty members and two graduate student assistants and agreed upon through consensus according to the guidelines established by Hill et al. (2005).

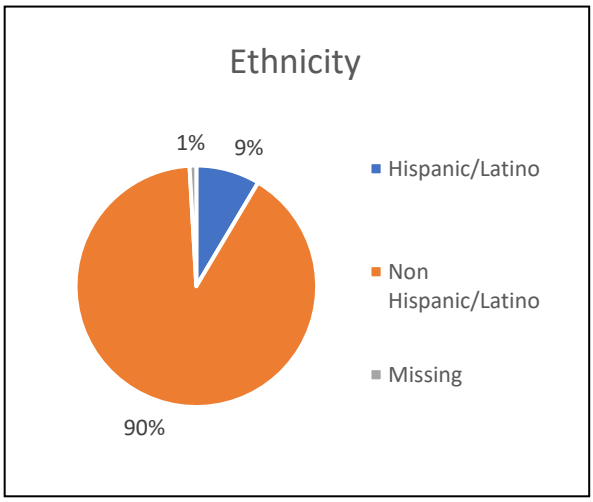
PREPaRE WORKSHOP 1 IN PERSON AND VIRTUAL DELIVERY

Participant Information

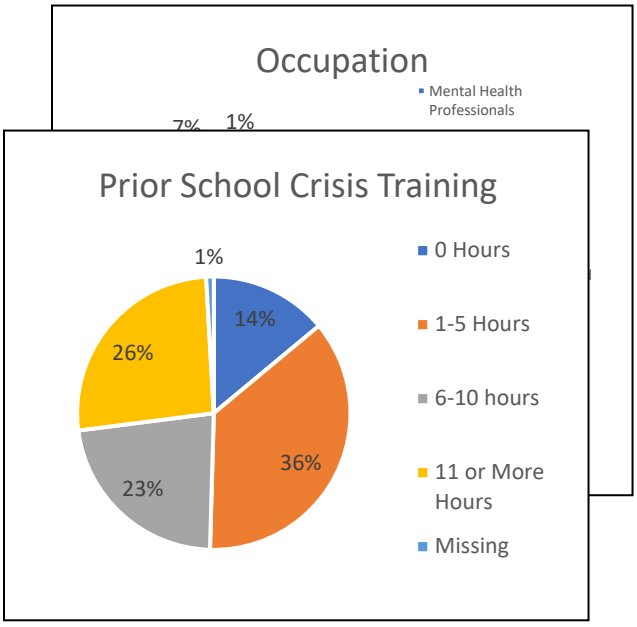
Workshop 1 is appropriate for all members of multidisciplinary school crisis teams. Specific demographic information for all 221 *in-person* participants from January 1, 2020 to December 31, 2020 is presented in Figure 2. Specific demographic information for all 1,104 *virtual* participants from January 1, 2020 to December 31, 2020 is presented in Figure 3.

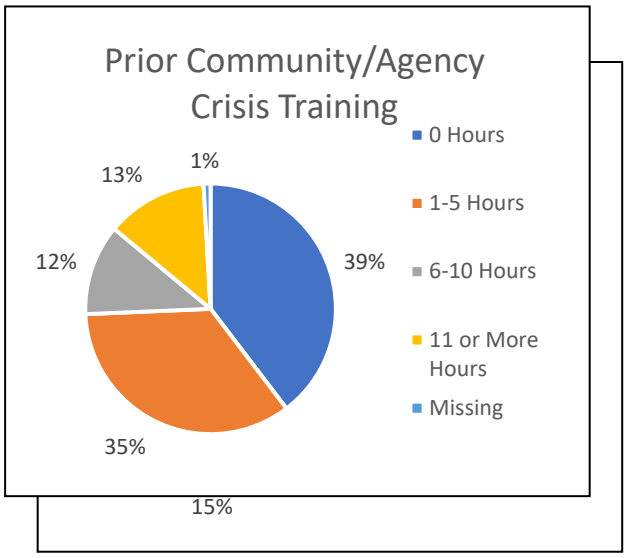
Figure 2. Demographic Data for Participants From PREPaRE Workshop 1 In-Person

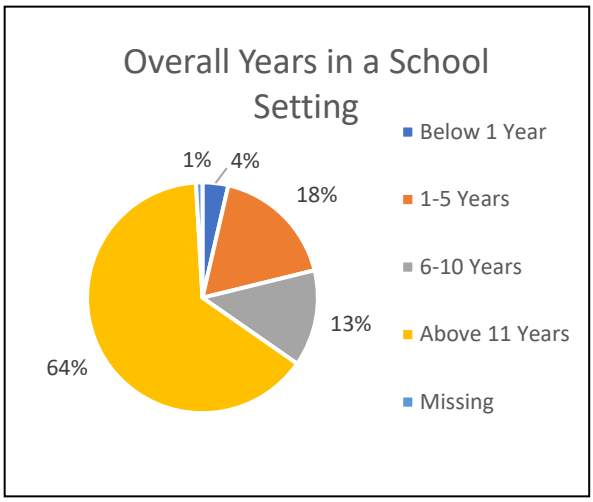




Delivery







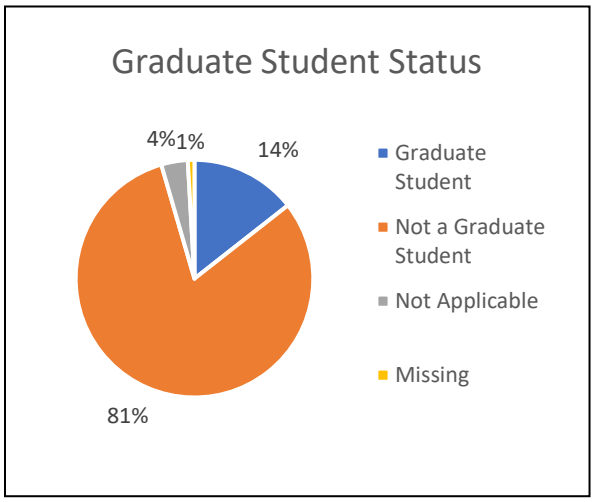
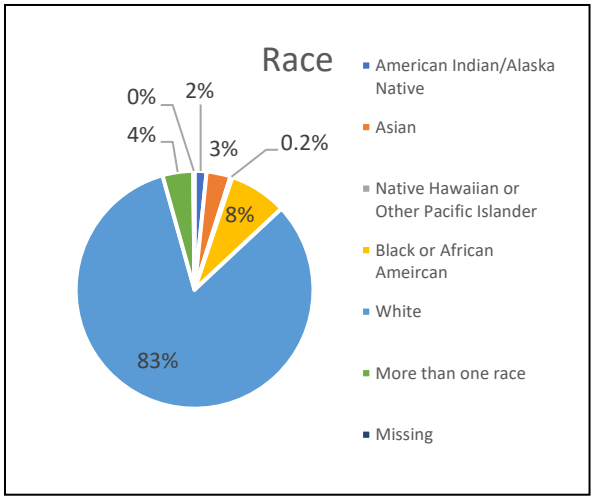
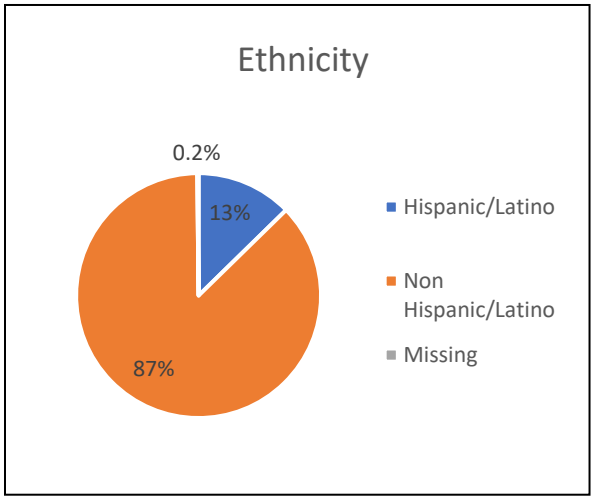
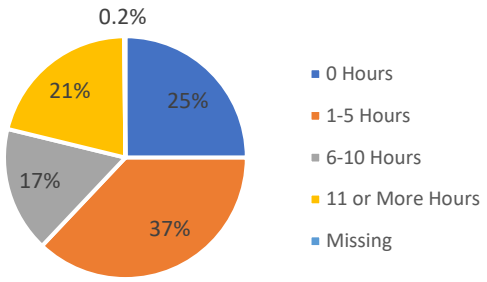


Figure 3. Demographic Data for Participants From PREPaRE Workshop 1 Virtual Delivery

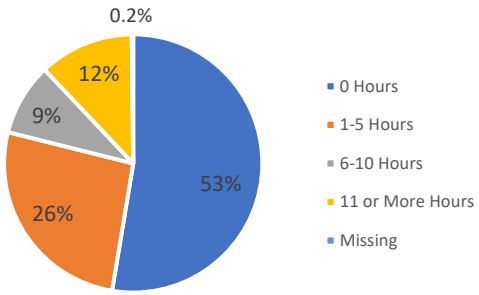




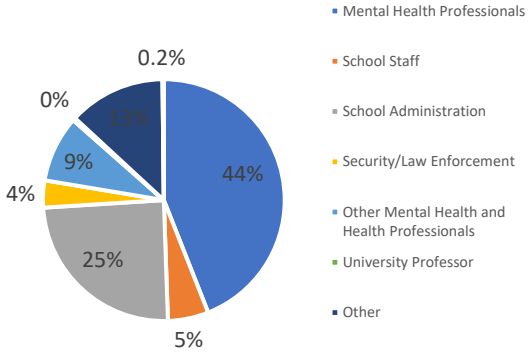
Prior School Crisis Training



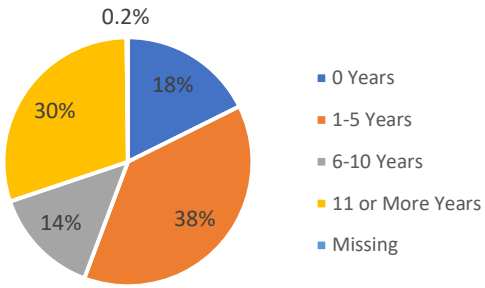
Prior Community/Agency Crisis Training



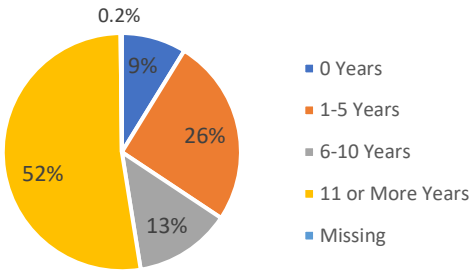
Occupation



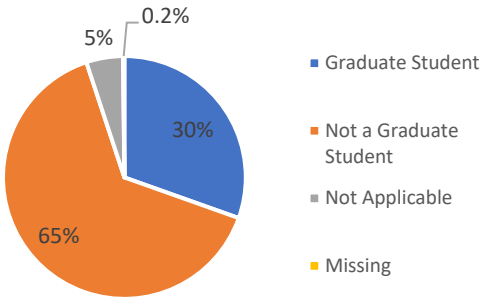
Years in Current Occupation



Overall Years in a School Setting



Graduate Student Status



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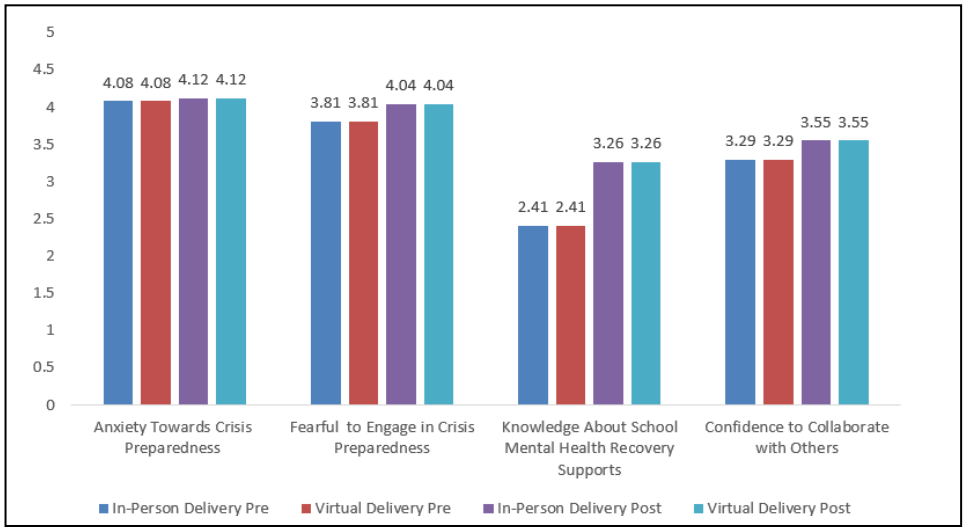
Workshop 1 In-Person Delivery Attitudes. As seen in Figure 4, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest (M = 3.74, SD = .50) compared to pretest (M = 3.40, SD = .53), t (220) = 8.27, $p < .001$, $\eta^2 = .20$; this result is considered to be a large effect size. With regard to demographic variables significant changes were found for participants feeling less fearful to engage in crisis preparedness, t (220) = 4.50, $p < .001$, $\eta^2 = .11$; higher perceived knowledge about school mental health recovery supports, t (220) = 13.6, $p < .001$, $\eta^2 = .13$; and higher confidence to collaborate with others, t (220) = 3.35, $p < .01$, $\eta^2 = .07$. There was not a significant change in participants' feelings of anxiety towards crisis preparedness. Attitude toward crisis prevention and preparedness differed as a function of the number of prior community agency crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes as compared to those with 11 or more hours, and those with 1–5 hours demonstrated significantly greater changes in attitudes as compared to those with 11 or more hours). There were no significant differences in attitude changes by graduate student status, number of prior school-crisis training hours, occupation, years spent in current occupation, or years spent in a school setting.

Workshop 1 Virtual Delivery Attitudes. As seen in Figure 4, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest (M = 3.71, SD = .52) compared to pretest (M = 3.29, SD = .61), t (1,103) = 22.40, $p < .001$, $\eta^2 = .19$; this result is considered to be a large effect size. With regard to demographic variables, significant changes were found for participants feeling less anxious towards crisis preparedness, t (1,103) = 3.99, $p < .001$, $\eta^2 = .11$; less fearful to engage in crisis preparedness, t (1,103) = 13.61, $p < .001$, $\eta^2 = .15$; higher perceived knowledge about school mental health recovery supports, t (1,103) = 31.36, $p < .001$, $\eta^2 = .12$; and higher confidence to collaborate with others, t (1,103) = 11.05, $p < .001$, , $\eta^2 = .16$. Attitude toward crisis prevention and preparedness differed as a function of graduate student status (i.e., those who were a graduate student demonstrated significantly greater changes in attitudes as compared to those who were not a graduate student and those who selected not applicable), prior school related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes compared to those with 1 or more hours; those with 1–5 hours demonstrated significantly greater changes compared to those with 11 or more hours; and those with 6–10 hours demonstrated significantly greater changes compared to those with 11 or more hours), community or agency related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes compared to those with 1 or more hours; and those with 1–5 hours demonstrated significantly greater changes compared to those with 11 or more hours), occupation (i.e., those who were mental health professionals demonstrated significantly greater changes in attitude compared to those in school administration; and those whose occupation was listed as "other" demonstrated significantly greater changes compared to mental health professionals, other mental health or health professionals, university professors, school administrators, and individuals in security/law enforcement), number of years in current occupation (i.e., those with 0 years demonstrated significantly greater changes in attitudes compared to those with 1 or more years; and those with 1–5 years demonstrated more changes in attitudes compared to those with 11 or more years), and number of years in a school setting (i.e., those with 0 years demonstrated significantly greater changes in attitudes compared to those with 1 or more years; and those with 1–5 years demonstrated significantly greater changes in attitudes compared to those with 6 or more years).

Figure 4. Mean Changes in Attitude Toward Crisis Prevention and Preparedness From Workshop 1 In-Person and Virtual Delivery

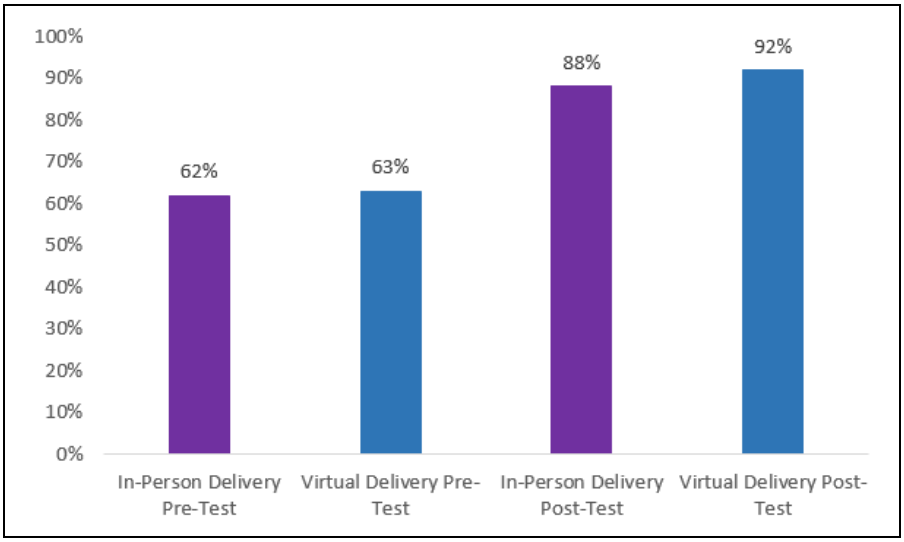


Note. Items on a 5-point scale, higher scores indicate more positive attitudes (e.g., *5 = not at all anxious, 1 = extremely anxious*).

Workshop 1 In-Person Delivery Knowledge Results. As seen in Figure 5, Workshop 1 In-Person Delivery participant responses indicated large, significant increases in knowledge t (220) = 17.67, p <.001, η^2 = .14, from pretest (M = 9.86 out of 16, SD = 2.91) to posttest (M = 14.03, SD = 2.73). Knowledge gains differed as a function of number of years in a school setting (i.e., those with 6–10 years demonstrated significantly greater changes in knowledge gain compared to those with 1–5 years). There were no significant differences in knowledge gain by graduate student status, number of school related crisis training hours, number of community or agency related crisis training hours, occupation, or number of years in current occupation.

Workshop 1 Virtual Delivery Knowledge Results. As seen in Figure 5, Workshop 1 Virtual Delivery participant responses indicated medium, significant increases in knowledge t (1,103) = 53.29, p <.001, η^2 = .08, from pretest (M = 10.05, SD = 2.79) to posttest (M = 14.78, SD = 1.65. Knowledge gains differed as a function of status prior school related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in knowledge gain compared to those with 11 or more hours; those with 1–5 hours demonstrated significantly greater changes compared to those with 11 or more hours; and those with 6–10 hours demonstrated significantly greater changes compared to those with 11 or more hours), and community or agency related crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in knowledge gain compared to those with 11 or more hours, those with 1–5 hours demonstrated significantly greater changes compared to those with 11 or more hours). There were no significant differences in knowledge gain by graduate student status, occupation, number of years in current occupation, and overall years in a school setting.

Figure 5. Mean Percentage of Items Correct From the Pretest and Posttest for Workshop 1 In-Person and Virtual Delivery



Satisfaction

Overall, participants in Workshop 1 In-Person Delivery indicated high satisfaction with their workshop experience (M = 4.38 out of 5, SD = .53) and with the outcomes of the workshop (M = 4.38 out of 5, SD = .50). Participants in Workshop 1 Virtual Delivery also indicated high satisfaction with their workshop experience (M = 4.54 out of 5, SD = .52) and with the outcomes of the workshop (M = 4.44 out of 5, SD = .52). The results from the satisfaction analyses are presented in Table 1.

Table 1. Comparison of Results for Workshop 1 In-Person and Virtual Satisfaction Responses

Question	2020 In-Person Mean (SD)	2020 Virtual Mean (SD)
Q1. Objectives were clearly stated.	4.51 (.58)	4.60 (.62)
Q2. The content was clear/understandable.	4.44 (.60)	4.52 (.62)
Q3. Materials were well organized.	4.32 (.73)	4.51 (.69)
Q4. Trainer(s) was/were well organized.	4.45 (.70)	4.62 (.63)
Q5. Materials facilitated participation.	4.31 (.71)	4.50 (.70)
Q6. Trainer(s) facilitated participation.	4.39 (.67)	4.60 (.64)
Q7. This workshop increased my knowledge.	4.42 (.59)	4.56 (.62)
Q8. I will be able to apply information and skills learned to my professional duties.	4.31 (.69)	4.44 (.64)
Q9. I recommend this workshop.	4.29 (.83)	4.47 (.69)
Q10. I recommend this/these trainer(s).	4.36 (.78)	4.62 (.64)
Q11. I am now better able to identify the importance of comprehensive safety planning and preparedness.	4.42 (.59)	4.50 (.59)
Q12. I am now better able to identify the five mission areas of crisis preparedness.	4.38 (.59)	4.46 (.59)

Q13. I am now better able to understand how crisis response teams use the Incident Command System to respond to multiple emergencies.	4.35 (.60)	4.43 (.58)
Q14. I am now better able to define the key components of effective school emergency operations plans.	4.35 (.52)	4.42 (.57)
Q15. I am now better able to identify guidelines for exercising and evaluating emergency operations plans.	4.38 (.51)	4.39 (.57)
WS 1 Satisfaction	4.38 (.53)	4.54 (.52)
WS 1 Outcomes	4.38 (.50)	4.44 (.52)

Strengths of Workshop 1 In-Person Delivery

Four broad strength themes emerged from the Workshop 1 In-Person Delivery qualitative analysis. The most prominent theme was the helpful/useful information/increased awareness (34%). Other prominent themes included discussions/group time/opportunities to participate/collaboration (19%), handouts/form templates are good resources (14%), content clarity/ease of understanding (13%), and endorsement of the knowledge base of the trainer (10%).

"Provided very useful information to a very diverse audience. This allowed for parties who are not normally able to collaborate to get together to develop relationships."

"[Presenter's] knowledge of the subject matter. Practicality of the information presented. Numerous workshop handouts to reference and use as guiding documents."

Development of crisis prevention and/or intervention knowledge and skills. Five broad areas of new knowledge and skills emerged when reviewing Workshop 1 In-Person Delivery evaluations. The most prominent theme endorsed pertained to the structure, roles, and responsibilities of a crisis team, or the Incident Command System (29%). Other themes that emerged included an increased awareness of the participant's school to address shortcomings or preparation needs for crisis situations (15%); a general sense of readiness for planning and crisis preparation (14%); awareness of how to design, create, and revise an Emergency Operations Plan (EOP; 10%); and an awareness of the EOP Functional Annexes (10%). An exemplar statement that endorsed several of these knowledge or skill areas listed: "How to incorporate the Incident Command System, how to construct an Incident Action Plan in event of a crisis, identifying and addressing any unique hazards specific to our school community, and the importance of school safety and school climate," while another noted "All the things to think about with each annex. Loved that! Also, great information regarding the crisis team—we will be going back and tweaking some things at our school."

Suggestions for Improvement. Analysis of Workshop 1 In-Person Delivery evaluations resulted four improvement themes. The most prominent theme noted pertained to the encouragement to include larger school teams in the training, including administrators, teachers, and mental health professionals (20%). Other improvement themes included recommendations to improve pacing or an increase in offering breaks (19%), tailoring presentation content to the knowledge base and professional identity of the location and attendees (12%), and the suggestion to improve the session materials (10%). Specific exemplar participant statements supporting these themes included: "Great information, but I feel school administrators should attend the training or equip counselors with school safety plans prior to the training to ensure that the material is best understood," and "Too much information at once; need administrators at this training to make these decisions."

Strengths of Workshop 1 Virtual Delivery

Six broad strength themes emerged from the Workshop 1 Virtual Delivery qualitative analysis. The most prominent theme was discussions/group time/opportunities to participate/collaboration (26%). Other prominent themes included helpful/useful information/increased awareness (16%), handouts/form templates are good resources (15%), content clarity/ease of understanding (12%), endorsement of the knowledge base of the trainer (12%), and role-plays/hands-on activities (10%).

"Adapted to online well, multiple group activities, lots of audience participation elicited, good clarity of information presented."

"Group discussions and tabletop activity were very engaging and useful to apply workshop content ."

Development of crisis prevention and/or intervention knowledge and skills. The same five broad areas of new knowledge and skills emerged as Workshop 1 In-Person Delivery when reviewing Workshop 1 Virtual Delivery, but at different ratios of endorsement. Similar to the in-person offering, the most prominent theme emerged was the awareness of the structure, roles, and responsibilities of a crisis team, or the Incident Command System (27%). Participants in this workshop also widely endorsed the increased awareness of the participant's school to address shortcomings or preparation needs for crisis situations (11%), a general sense of readiness for planning and crisis preparation (10%), awareness of how to design, create and revise an EOP (17%), and an awareness of the EOP Functional Annexes (20%). Some specific statements that signified these themes included: "Basic foundations of crisis work preparedness. How to assemble teams in crisis situations where everyone has a role. The workshop had me thinking about roles I would not have thought of before, such as who will be in charge of communications, etc. It was also important to learn the steps to take such as having a planned area of evacuation and having back up plans for reunification, etc." as well as "Recognize area of weakness and next steps we need to take as a building."

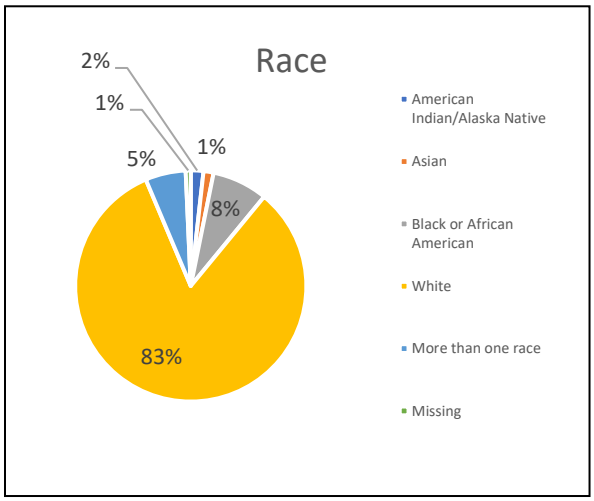
Suggestions for Improvement. Only one theme from Workshop 1 Virtual Delivery was endorsed highly enough for it to be considered noteworthy for the purposes of this analysis. This theme was the suggestion to improve the pacing or offering of breaks (10%). Some statements that expanded on this theme included: "More time with breakout rooms. We seemed to fall behind schedule so a few were skipped," as well as "To have longer breaks."

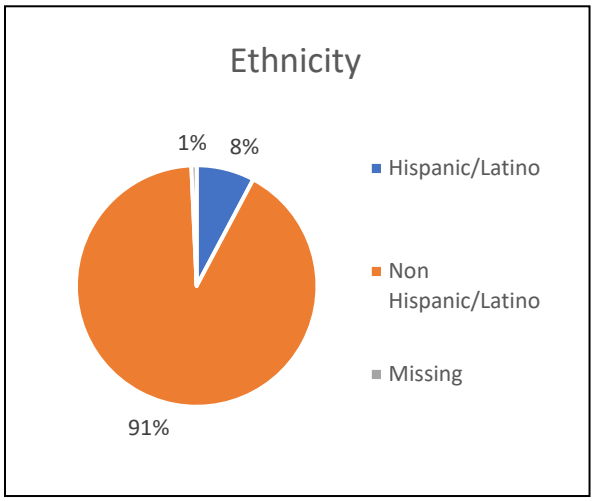
PREPaRE WORKSHOP 2 IN-PERSON AND VIRTUAL DELIVERY

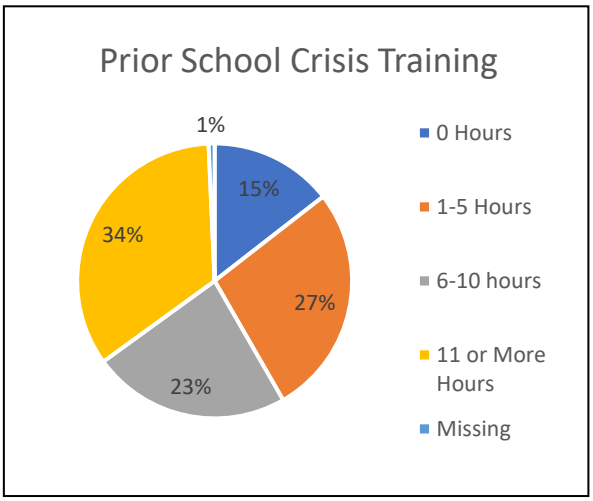
Participant Information

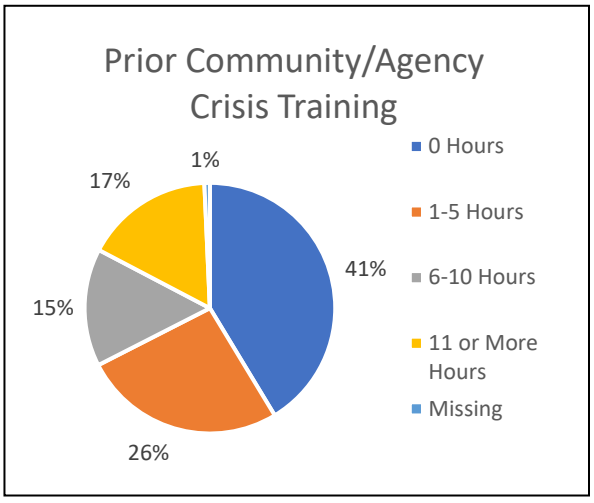
Workshop 2 is intended for school-based mental health professionals and other school crisis team members involved in meeting the mental health needs of students and staff following a school-associated crisis event. Specific demographic information for all 282 *in-person* participants from January 1, 2020 to December 31, 2020 is presented in Figure 6. Specific demographic information for all 1,571 *virtual* participants from January 1, 2020 to December 31, 2020 is presented in Figure 7.

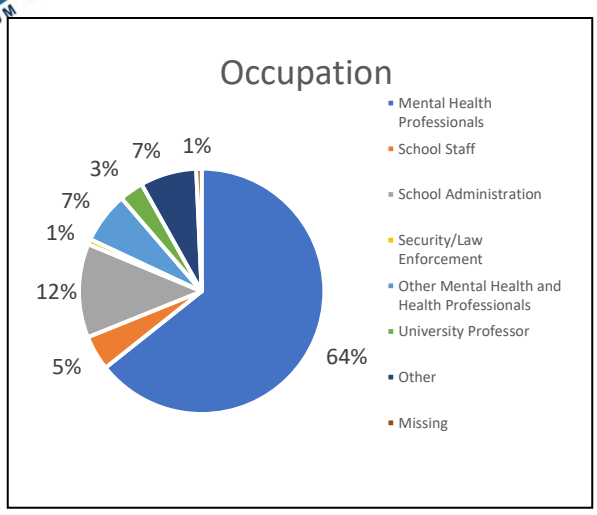
Figure 6. Demographic Data for Participants From PREPaRE Workshop 2 In-Person Delivery

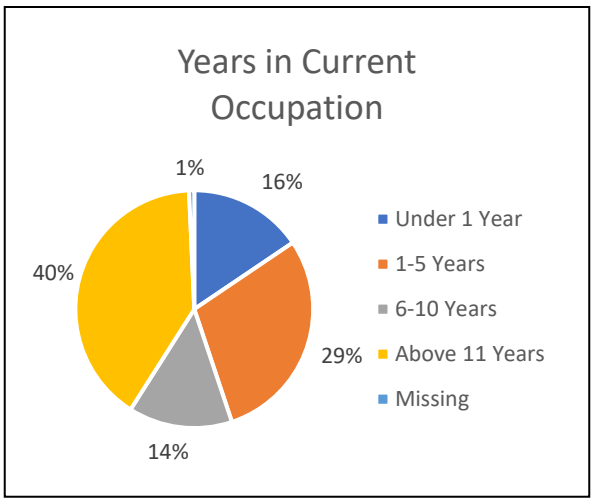


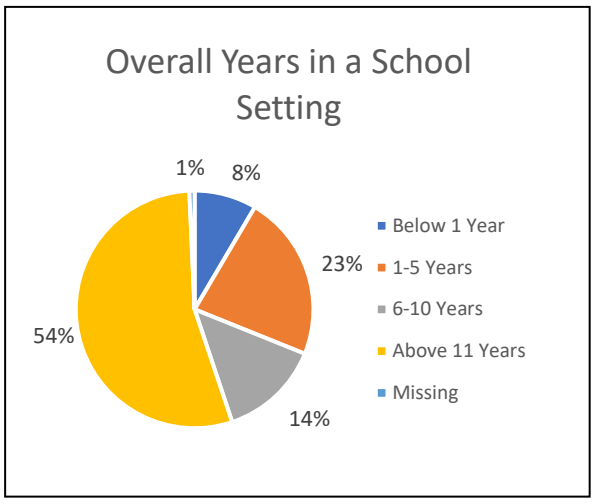







Occupation
Mental Health Professionals
School Staff
School Administration
Security/Law Enforcement
Other Mental Health and Health Professionals
University Professor
Other
Missing
64%
5%
12%
1%
7%
3%
7%
1%


Years in Current Occupation
Under 1 Year
1-5 Years
6-10 Years
Above 11 Years
Missing
16%
29%
14%
40%
1%


Overall Years in a School Setting
Below 1 Year
1-5 Years
6-10 Years
Above 11 Years
Missing
8%
23%
14%
54%
1%

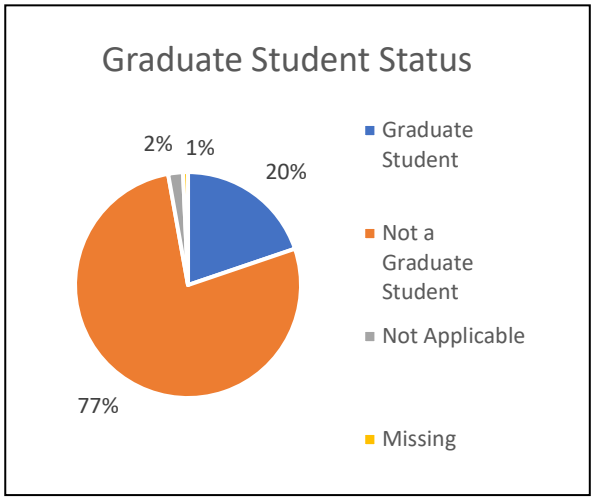
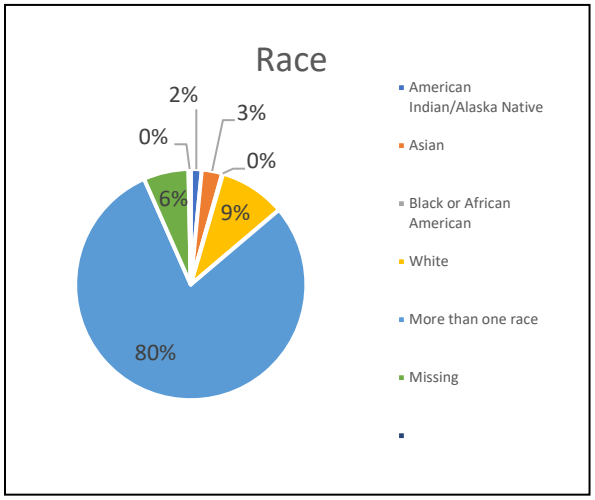
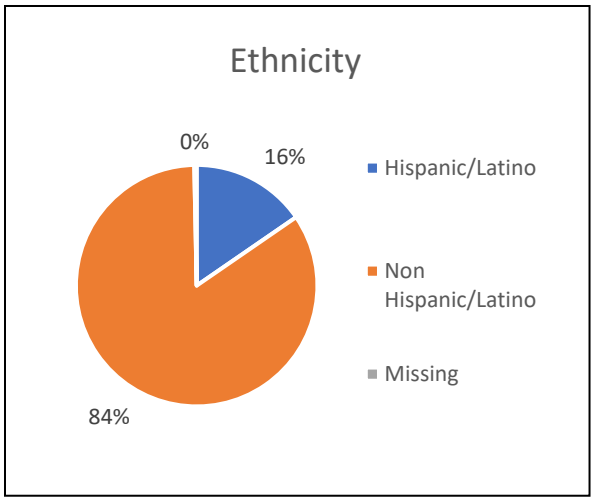
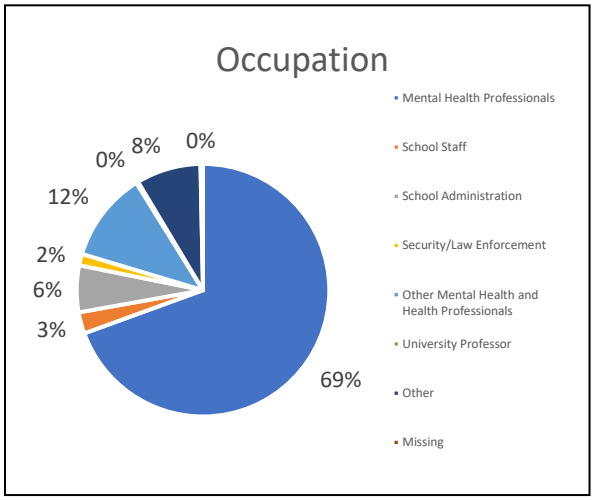
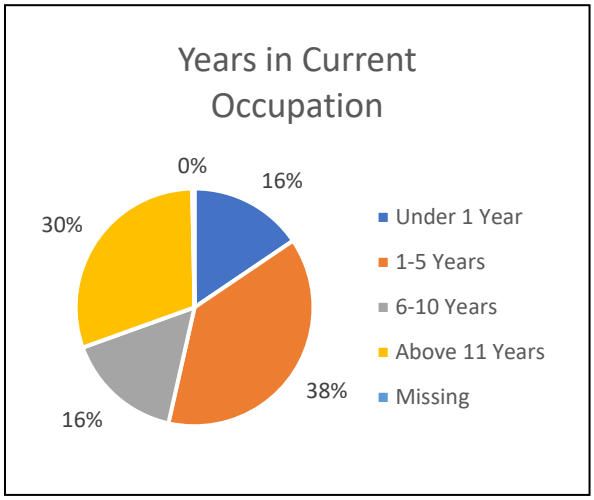

Graduate Student Status
Graduate Student
Not a Graduate Student
Not Applicable
Missing
20%
77%
2%
1%

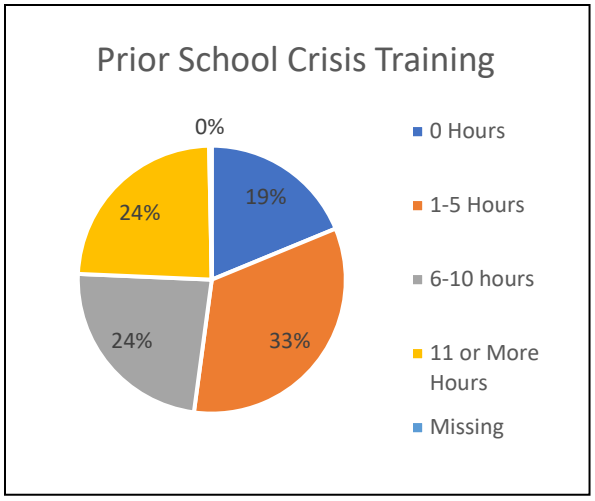
Figure 7. Demographic Data for Participants From PREPaRE Workshop 2 Virtual Delivery

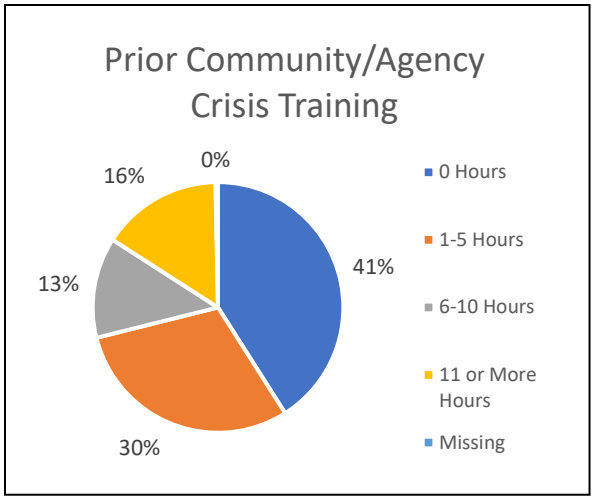


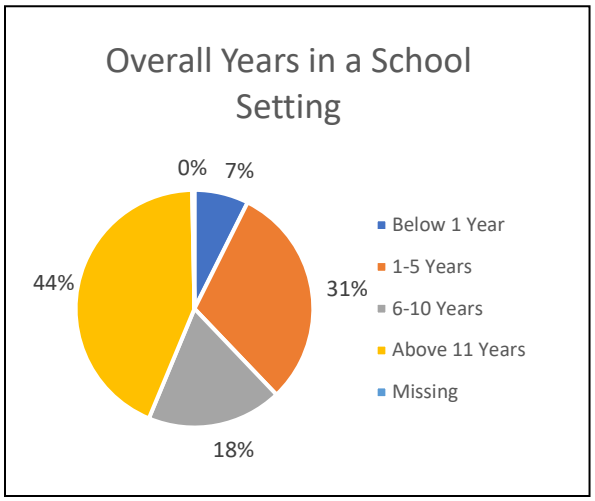


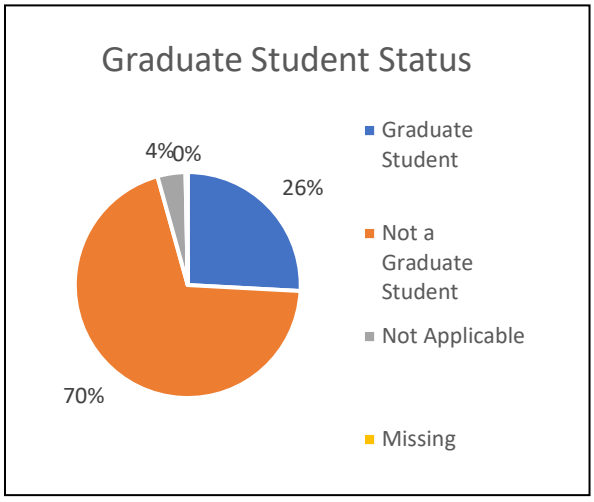










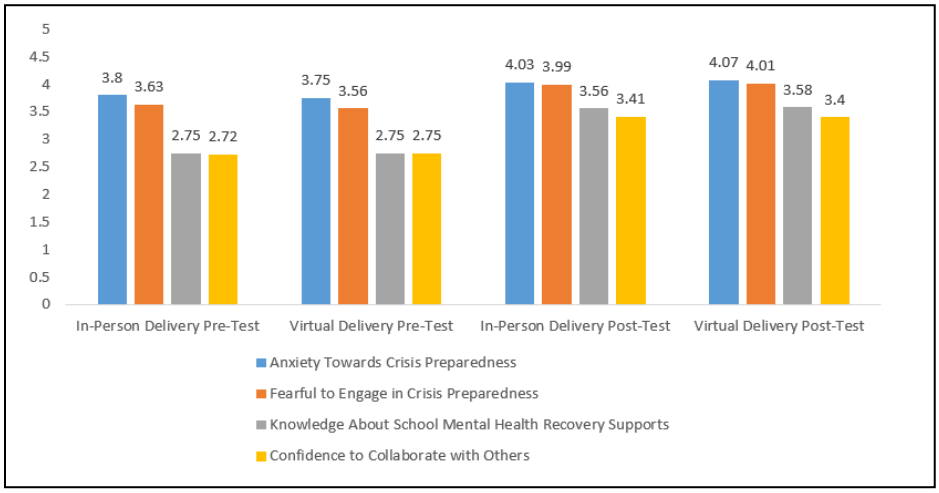


Workshop 2 In-Person Delivery Attitudes. As seen in Figure 8, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest (M = 3.75, SD = .43) compared to pretest (M = 3.22, SD = .64), t (281) = 15.04, $p < .001$, $\eta^2 = .33$; this result is considered to be a large effect size. With regard to demographic variables, significant changes were found for participants feeling less anxious, t (281) = 4.87, $p < .001$, $\eta^2 = .14$; less fearful, t (281) = 7.29, $p < .001$, $\eta^2 = .15$; more knowledgeable, t (281) = 15.74, $p < .001$, $\eta^2 = .19$; and more confident with the provision of mental health crisis interventions, t (281) = 13.89 $p < .001$, $\eta^2 = .30$. Attitude toward crisis prevention and preparedness differed as a function of number of prior school-related crisis hours (i.e., those with 1–5 hours demonstrated significantly greater changes in attitudes as compared to those with 11 or more hours), and number of community agency crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes as compared to those with 11 or more hours). There were no significant differences in attitude changes by graduate student status, occupation, years spent in current occupation, and years spent in a school setting.

Workshop 2 Virtual Delivery Attitudes. As seen in Figure 8, more positive attitudes (i.e., mean of the four separate attitude questions) were reported at posttest (M = 3.77, SD = .51) compared to pretest (M = 3.20, SD = .65), t (1,570) = 37.14, $p < .001$, $\eta^2 = .30$; this result is considered to be a large effect size. With regard to demographic variables, significant changes were found for participants feeling less anxious, t (1,570) = 16.41, $p < .001$, $\eta^2 = .22$; less fearful, t (1,570) = 20.57, $p < .001$, $\eta^2 = .16$; more knowledgeable, t (1,570) = 40.23, $p < .001$, $\eta^2 = .17$; and more confident with the provision of mental health crisis interventions, t (1,570) = 30.40, $p < .001$, $\eta^2 = .22$. Attitude toward crisis prevention and preparedness differed as a function of graduate student status (i.e., graduate students demonstrated significantly greater changes in attitudes as compared to non-graduate students), number of school-related crisis hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes as compared to those with 6 or more hours; those with 1–5 hours demonstrated significantly greater changes in attitudes as compared to those with 11 or more hours; and those with 6–10 hours demonstrated significantly greater changes in attitudes compared to those with 11 or more hours), number of community agency crisis training hours (i.e., those with 0 hours demonstrated significantly greater changes in attitudes compared to those with 1 or more hours; and those with 1–5 hours

demonstrated significantly greater changes in attitude compared to those with 6 or more hours), number of years in current occupation (i.e., those with 0 years demonstrated significantly greater changes in attitudes compared to those with 1 or more years; and those with 1–5 years demonstrated significantly greater changes in attitudes compared to those with 11 or more years), and total number of years in a school setting (i.e., those with 0 years demonstrated marginally significantly greater changes in attitudes compared to those with 6–10 years; those with 0 years demonstrated significantly greater changes in attitudes compared to those with 11 or more years; and those with 1–5 years demonstrated significantly greater changes in attitudes compared to those with 11 or more years). There were no significant differences in attitude changes by occupation.

Figure 8. Mean Changes in Attitude Toward Crisis Prevention and Preparedness From Workshop 2 In-Person and Virtual Delivery

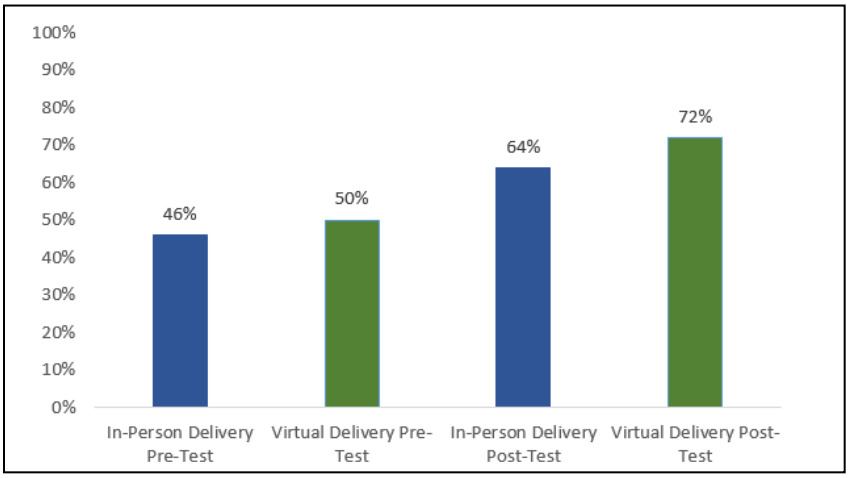


Note. Items on a 5-point scale, higher scores indicate more positive attitudes (e.g., *5 = not at all anxious, 1 = extremely anxious*).

Workshop 2 In-Person Delivery Knowledge. As seen in Figure 9, Workshop 2 In-Person Delivery participant responses indicated small, significant increases in knowledge, t (281) = 17.14, $p < .001$, $\eta^2 = .03$, from pretest (M = 5.99 out of 13, SD = 1.60) to posttest (M = 8.31 out of 13, SD = 1.53). There were no significant differences in knowledge gains based on participant demographic variables.

Workshop 2 Virtual Delivery Knowledge. As seen in Figure 9, Workshop 2 Virtual Delivery participant responses indicated small, significant increases in knowledge, t (1,570) = 49.69, $p < .001$, $\eta^2 = .03$, from pretest (M = 6.49 out of 13, SD = 1.77) to posttest (M = 9.35 out of 13, SD = 1.69). There were no significant differences in knowledge gains based on participant demographic variables.

Figure 9. Mean Percentage of Items Correct From the Pretest and Posttest for Workshop 2 In-Person and Virtual Delivery



Satisfaction

Overall, participants in Workshop 2 In-Person Delivery indicated high satisfaction with their workshop experience (*M* = 4.63 out of 5, *SD* = .48) and that they were highly satisfied with the outcomes of the workshop (*M* = 4.47 out of 5, *SD* = .51). Participants in Workshop 2 Virtual Delivery also indicated high satisfaction with their workshop experience (*M* = 4.59 out of 5, *SD* = .56) and that that they were highly satisfied with the outcomes of the workshop (*M* = 4.46 out of 5, *SD* = .58). The results from the satisfaction analyses are presented in Table 2.

Table 2. Comparison of Results for Workshop 2 In-Person and Virtual Delivery Satisfaction Responses

Question	2020 In-Person Mean (SD)	2020 Virtual Mean (SD)
Q1. Objectives were clearly stated.	4.69 (.63)	4.65 (.63)
Q2. The content was clear/understandable.	4.61 (.61)	4.56 (.67)
Q3. Materials were well organized.	4.55 (.69)	4.52 (.76)
Q4. Trainer(s) was/were well organized.	4.77 (.45)	4.64 (.65)
Q5. Materials facilitated participation.	4.58 (.62)	4.50 (.75)
Q6. Trainer(s) facilitated participation.	4.70 (.56)	4.65 (.64)
Q7. This workshop increased my knowledge.	4.60 (.67)	4.62 (.65)
Q8. I will be able to apply information and skills learned to my professional duties.	4.52 (.59)	4.56 (.62)
Q9. I recommend this workshop.	4.58 (.67)	4.58 (.68)
Q10. I recommend this/these trainer(s).	4.71 (.55)	4.67 (.66)
I am now able to do the following:		
Q11. Report improved attitudes toward, and readiness to provide, school crisis interventions.	4.50 (.59)	4.47 (.64)
Q12. Identify variables that determine the number of individuals likely traumatized by a given crisis.	4.51 (.55)	4.50 (.62)

Q13. Differentiate common crisis reactions from signs of mental illness.	4.41 (.61)	4.41 (.66)
Q14. Identify the school crisis interventions specified by the PREPaRE acronym.	4.50 (.54)	4.48 (.64)
Q15. Identify the triage risk factors that predict psychological trauma.	4.46 (.60)	4.45 (.63)
Q16. Identify the warning signs (crisis reactions) that signal psychological traumatization.	4.46 (.59)	4.45 (.63)
Q17. Sequence crisis interventions from least to most restrictive.	4.48 (.57)	4.47 (.63)
Q18. Match the degree of psychological trauma risk to the appropriate school crisis interventions.	4.44 (.57)	4.43 (.63)
WS 2 Satisfaction	4.63 (.48)	4.59 (.56)
WS 2 Outcomes	4.47 (.51)	4.46 (.58)

Strengths of Workshop 2 In-Person Delivery

Eight broad strength themes emerged from the Workshop 2 In-Person Delivery qualitative analysis. The most prominent theme pertained to the workshop materials being helpful and useful (17%). Other themes that developed included the comprehensive nature of the information provided (17%), the organization of the session (17%), the opportunities for interaction with others (16%), the knowledge base of the trainers, the offering of role-play activities (10%), the examples and real-world experiences offered (10%), and overall practical, relevant, and justified nature of the session content (10%).

"Didactic balanced with real-life examples, opportunities to work in a small group, role-playing."

"Great presenters, thorough information, well-organized, useful hands-on materials."

Development of crisis prevention and/or intervention knowledge and skills. Three broad areas of new knowledge and skills emerged when reviewing Workshop 2 In-Person Delivery evaluations. The most prominent theme pertained to the process of psychological triage, including evaluation of highest needs based on the physical and emotional proximity to the crisis and identifying immediate intervention needs as a result (40%). Other themes that emerged included a grasp of a systematic approach or model to understand or manage crisis situations (PREPaRE; 10%), and awareness of intervention techniques, including Tier 1 preventive measures (13%). Some exemplar statements reflecting these themes were: "How to conduct psychological triage and then follow through with concrete interventions for the different tiers" and "Being able to better evaluate trauma risk and delivering interventions in more of a tiered system of supports."

Suggestions for Improvement. Analysis of Workshop 2 In-Person Delivery evaluations resulted in three improvement themes. The most prominent theme was the suggestion for the

increased offerings of small-group interaction opportunities (14%). Other themes included the improvement of pacing to eliminate repetition and redundancy (12%), and the improvement of workshop materials (10%). Specific comments that reflected these themes included: "More interactive with the class participants" and "Give a few more breaks, even if very short."

Strengths of Workshop 2 Virtual Delivery

Seven broad strength themes emerged from the Workshop 2 Virtual Delivery qualitative analysis. The most prominent theme pertained to the workshop materials being helpful and useful (22%). Other strength themes that developed included the style and enthusiasm of the session trainers (21%), the comprehensiveness of the information provided (17%), the opportunities to interact (15%), the knowledge-base of the session trainers (15%), the overall organization of the session, and the examples and real-world experiences provided (11%).

> "Knowledgeable facilitator with lived experience; real-life examples; small group activities; practical, ready-to-use handouts."

Development of crisis prevention and/or intervention knowledge and skills. Four areas of knowledge or skills gained emerged from the Workshop 2 Virtual Delivery qualitative analysis. Similar to the in-person offering, the most prominent theme emerged was the process of psychological triage, including evaluation of highest needs based on the physical and emotional proximity to the crisis and identifying immediate intervention needs as a result (44%). Other highly endorsed areas included awareness of intervention techniques, including Tier 1 preventive measures (21%), grasp of a systematic approach or model to understand or manage crisis situations (PREPaRE; 14%), and intervention techniques and implementation skills (10%).

Suggestions for Improvement. In reviewing Workshop 2 Virtual Delivery survey responses, no single theme passed a threshold of 10% participant endorsement; however, the most prominent theme endorsed was the suggestion to increase offerings for small-group interactions (8%).

Summary and Recommendations

Consistent with previous years' reports, participants in both workshops demonstrated significant gains in their overall attitudes towards crisis prevention and intervention. These gains were evident in both Virtual Delivery and In-Person Delivery. In both workshops, regardless of Virtual or In-Person Delivery, participants with fewer prior community agency crisis training hours demonstrated greater changes in their attitudes compared to those with more experience. Qualitative analyses of responses to open-ended questions indicated that participants appreciated the comprehensive and practical information provided, the application and role play opportunities, and the presentation approach of the individual trainers. Trainer effectiveness, including the ability to provide practice-based examples as well as overall knowledge base, was also consistently endorsed. Workshop 2 In-Person Delivery participants with fewer prior school related crisis hours demonstrated greater changes in attitudes compared to those with more experience. In both Virtual Delivery workshops, participants who were graduate students demonstrated greater changes in their attitudes compared to those who were not graduate students. In addition, participants with less prior school related crisis training hours, number of years in their current occupation, and number of years spent in a school setting demonstrated greater changes in attitudes compared to those with more experience. Unique to Workshop 1 Virtual Delivery, mental health professionals demonstrated greater changes in attitudes compared to school administrators, and participants who indicated "other" for their occupation demonstrated greater changes in attitudes compared to mental health professionals, other mental health or health professionals, university professors, school administrators, and security/law enforcement.

With regard to changes in school preparedness and intervention related knowledge, participants in both workshops demonstrated significant changes regardless of In-Person or Virtual Delivery. Participants in Workshop 1 In-Person Delivery with greater number of years in a school setting demonstrated more knowledge gain compared to those with less experience. In Workshop 1 Virtual Delivery, participants with fewer prior school related and community agency related crisis training hours demonstrated greater knowledge gain compared to those with more experience. There were no differences in knowledge gains based on participant demographics in Workshop 2 In-Person and Virtual Delivery. Lastly, participants in both workshops, regardless of In-Person or Virtual Delivery indicated that they were highly satisfied with the workshop material, that the objectives were clearly met, and that both the workshop materials and trainers were organized. Open-ended responses indicated that workshop materials, especially handouts, were viewed as useful, thorough, and well organized. These results are consistent with previous years' reports in that participants are highly satisfied with their workshop experiences.

When considering areas for growth or continued improvement, participants identified the need for including more group learning opportunities (practice and discussion), improving the pacing, offering more breaks, and marketing the workshops to wider audiences, including school administrators. Some participants also noted that the workshops needed to make accommodations to tailor the workshop to the specific audience (e.g., participant professional identity, local context). Overall, the PREPaRE program is acknowledged by participants as a thorough introduction into school crisis management and prevention. Participants in this sample reported an increased sense of preparedness and awareness of crisis work in schools. Notably,

information regarding Incident Command System roles and responsibilities as well as triage processes following crisis situations were noted as content and skill gains. Such results suggest that the PREPaRE training leads to improved outcomes for participants in both formats, and that offering the workshop(s) virtually are a viable delivery option.

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