

WHO AM I, REALLY?

Write down your core values.

What do you want to be known for? Write it—Picture it.

How will you feel when you have reached your vision?

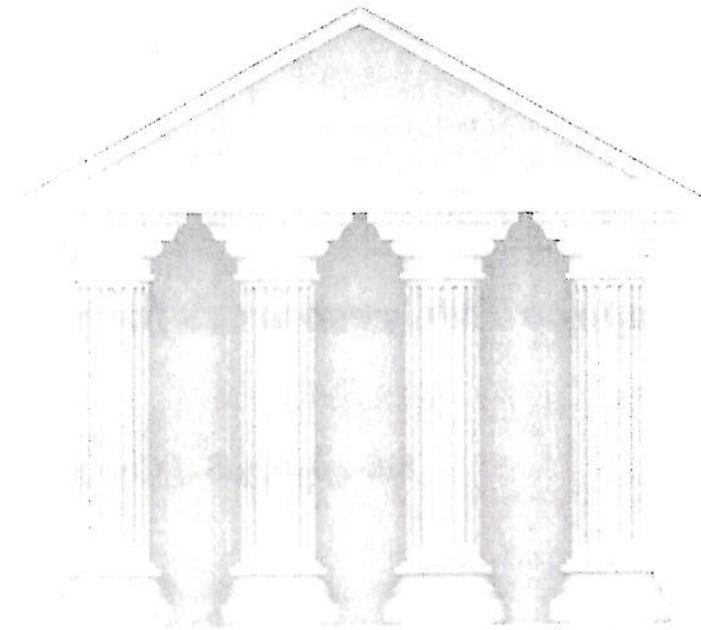
What are your unique gifts?

Who and/or what inspires you?

In a Trauma Sensitive School Culture of Resilience, give your role a title that sums up the extraordinary thing you do.

Explain simply and clearly the extraordinary outcomes you will achieve in that role.

Explain briefly how you will incrementally achieve those outcomes.



My personal
Plan for
Resilience

Mental:

Physical:

Social:

Spiritual:

Self-Care: Finding the Time

"The greatest weapon against stress is our ability to choose one thought over another."

-William James

If you have 10 minutes...

- Write in a journal
- Meditate
- Assess your self-care
- Watch a sunrise or sunset
- Listen to soothing sounds
- Read something for pleasure
- Review the past few hours to list 3 things you are grateful for and what has been sacred to you
- Talk to a friend, family member, or co-worker about a problem or frustration
- Discuss training opportunities with your supervisor
- Take some quiet time in the TMC Chapel or another quiet place.
- Call or spend time with a friend
- Tidy your work area
- Draw a picture
- Dance
- Surf the web for inspiring quotes
- Eat a meal with family or friends
- Take some quiet time to reflect on what you need from others in your life and how you can ask for help
- Plan a meeting/celebration to acknowledge an accomplishment or milestone
- Take a brisk walk at your lunch break or when you get home from work
- Add things to your work area that bring you joy- plants, photos, inspiring or funny quotes

If you have 30 minutes...

- Get a massage
- Eat lunch with a co-worker
- Read non-related work literature
- Go shopping for something fun
- Watch your favorite TV show
- Listen to your favorite album
- Write a positive letter or email to someone
- Have a "walking" meeting where you walk with colleague rather than meet in an office
- Spend time in a garden, go for walk in nature
- Write down your goals and dreams
- Volunteer for a cause you feel strongly about
- Play with a child
- Exercise vigorously
- Take a bubble bath
- Go for a walk and spend time in nature
- Practice yoga
- Play a game with family/friends
- Cook a meal
- Discuss self-care, burnout, or compassion fatigue at a staff meeting
- Attend first Friday concert, view the art at TMC, go to Farmers Market
- Visit a friend you haven't seen in a while
- Read a story of someone who has faced adversity and overcome it with resilience & hope
- Spend time with those you love
- Use transitions to/from work as "sacred space"

Self-Care: Finding the Time

Self-care does not have to be time consuming. As nice as it would be to take a 3 week vacation to a tropical island, most of us do not have the time or resources for that. Below are some tips for using the time you do have effectively.

If you have 2 minutes...

- Take a few deep breathes
- Doodle
- Do some stretches
- Acknowledge one of your accomplishments
- Daydream
- Say no to a new responsibility
- Share a smile or laugh with a coworker
- Complement yourself
- Look out the window
- Spend time with your pet
- Let someone know that you may need some time to talk later in the day.
- Leave a message or send an email to someone important to you, letting them know you are thinking of them.
- Read or tell a good, appropriate joke
- Do an "Act of Kindness", no matter how small or humble
- Make coffee
- Sign up for a training opportunity
- Note a strength or quality you value in someone else and share it with them.
- Suck on a peppermint or a stick of gum
- Have a cup of tea, coffee or a refreshing drink
- Look at a photo of someone you love

If you have 5 minutes...

- Listen to music
- Have a cleansing cry
- Chat with a coworker
- Sing out loud
- Jot down your dreams
- Step outside for fresh air
- Enjoy a healthy snack
- Check in with family/friends
- Look at pictures of loved ones
- Send an email that has been nagging you.
- Have a conversation with someone you don't normally work with
- Schedule a team meeting
- Straighten up your desk or work area
- Massage your forehead or hands
- Take a brisk walk to drop off something to another department
- Run in place, do some jumping jacks, or touch your toes 10 times
- Think of three things for which you are grateful.
- Take a spiritual break
- Have a piece of dark chocolate
- Take a quick break from technology

Trauma-Sensitive School Checklist

Lesley University
Center for Special Education

Trauma and Learning Policy Initiative
of Massachusetts Advocates for Children
and the Legal Services Center of Harvard Law School

This checklist is organized by five components involved in creating a trauma-sensitive school. Each component consists of several elements. Please assess your school on each element according to the following scale:

- 1** Element is **not at all** in place
- 2** Element is **partially** in place
- 3** Element is **mostly** in place
- 4** Element is **fully** in place

School _____ Date _____

Team Members (name and position)

A trauma-sensitive school is a safe and respectful environment that enables students to build caring relationships with adults and peers, self-regulate their emotions and behaviors, and succeed academically, while supporting their physical health and well-being.

School-wide Policies and Practices

1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

- School contains predictable and safe environments (including classrooms, hallways, playgrounds, and school bus) that are attentive to transitions and sensory needs.
- Leadership (including principal and/or superintendent) develops and implements a trauma-sensitive action plan, identifies barriers to progress, and evaluates success.
- General and special educators consider the role that trauma may be playing in learning difficulties at school.
- Discipline policies balance accountability with an understanding of trauma.
- Support for staff is available on a regular basis, including supervision and/or consultation with a trauma expert, classroom observations, and opportunities for team work.
- Opportunities exist for confidential discussion about students.
- School participates in safety planning, including enforcement of court orders, transferring records safely, restricting access to student-record information, and sensitive handling of reports of suspected incidents of abuse or neglect.
- On-going professional development opportunities occur as determined by staff needs assessments.

Classroom Strategies and Techniques

1	2	3	4
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1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

- Expectations are communicated in clear, concise, and positive ways, and goals for achievement of students affected by traumatic experiences are consistent with the rest of the class.
- Students' strengths and interests are encouraged and incorporated.
- Activities are structured in predictable and emotionally safe ways.
- Opportunities exist for students to learn and practice regulation of emotions and modulation of behaviors.
- Classrooms employ positive supports for behavior.
- Information is presented and learning is assessed using multiple modes.
- Opportunities exist for learning how to interact effectively with others.
- Opportunities exist for learning how to plan and follow through on assignments.

Collaborations and Linkages with Mental Health

1	2	3	4
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1	2	3	4
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1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

1	2	3	4
---	---	---	---

- Policies describe how, when, and where to refer families for mental health supports; and staff actively facilitate and follow through in supporting families' access to trauma-competent mental health services.
- Access exists to trauma-competent services for prevention, early intervention, treatment, and crisis intervention.
- Protocols exist for helping students transition back to school from other placements.
- Mental health services are linguistically appropriate and culturally competent.
- Staff has regular opportunities for assistance from mental health providers in responding appropriately and confidentially to families.

Family Partnerships

1	2	3	4
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1	2	3	4
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1	2	3	4
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- Staff uses a repertoire of skills to actively engage and build positive relationships with families.
- Strategies to involve parents are tailored to meet individual family needs, and include flexibility in selecting times and places for meetings, availability of interpreters, and translated materials.
- All communications with and regarding families respect the bounds of confidentiality.

Community Linkages

1	2	3	4
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1	2	3	4
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- School develops and maintains ongoing partnerships with state human service agencies and with community-based agencies to facilitate access to resources.
- When possible, school and community agencies leverage funding to increase the array of supports available.



First name, Last Initial

Age:	X
DOB	X/XX/XX
School:	Sunny Side Elementary
Grade:	X

Background Information	
Home:	Lives with mom (Jane), dad (John), sister (age 4), brother (age 12)
Allergies:	Needs enzymes with every meal
Verbal/ Nonverbal	One word utterances, picture book [2 pics max]
Other:	Independent toileting but prompting needed

Triggers	Behaviors
Being itchy Loud sounds Too much visual stimulation Items being taken away Unexpected transitions Being told "No" Lack of attention Eye contact when upset	SIB: biting hand/head banging Pinching others Running off Non-compliance Hands in pants Screaming

Motivators	Tools
Social interaction Arranging items Water play Movement: skates, bikes, physio ball, cutting paper brushing	Hook ups Squeezes Chewy tube "weighted backpack" errands

Strategies	Goals
First/then Review schedule Time Timer	Increase verbalization with pic book Improve transitions to non-preferred activities Increase time in classroom Appropriately gain attention of others

Adapted from Kuypers, Leah M. (2011). *The Zones of Regulation*®, San Jose, CA: Think Social Publishing Inc.
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 (510) 639-2929 www.cwtherapy.com
 CW Speech & Language Pathologists, Inc.

First name, Last Initial

Age:	
DOB	
School:	
Grade:	
Background Information	
Home:	
Allergies:	
Verbal/ Nonverbal:	
Other:	

Triggers	Behaviors
Motivators	Tools
Strategies	Goals



PERSONAL COPING SKILLS FORM

PATIENT IDENTIFICATION

TRIGGERS AND CAUSES FOR ESCALATION

Please tell me/us what kinds of things can be upsetting enough to trigger a crisis.

INITIAL RESPONSE FROM INDIVIDUAL

- Being yelled at/loud noises, Being pointed at, Feeling of being ignored, Losing Privileges, People too close to me, Certain times of the year, Being touched when I don't want to be touched, Being disrespected, Being called a name

BEHAVIORS EXHIBITED WHEN CLIENT IS LOSING CONTROL

Please talk about any behaviors that may let us know that you are thinking about harming yourself or others.

INITIAL RESPONSE FROM INDIVIDUAL

- Pacing, Isolating yourself, Rocking, Provoking others, Becoming irritable, Becoming loud

TECHNIQUES THAT HELP THE CLIENT CALM DOWN

Please tell me/us what has worked in the past for you to help you calm down. We may be able to offer all of these alternatives, but we would like to work together with you to determine how we can best help you while you are here.

INITIAL RESPONSE FROM INDIVIDUAL

- Wrapping in a blanket, Writing in a journal or a letter, Watching TV/listening to music, Talking to staff/another peer, Voluntary time in a quiet/peaceful area of unit, Thinking/talking about something pleasant or positive, Hugging a stuffed animal, Reading an encouraging statement, Counting to 50 slowly by myself or with coaching, Call a friend or family member, Drinking ice water, Taking a shower, Getting involved in an activity or craft, Deep breathing/relaxation techniques, Thinking of consequences of losing control and benefits of keeping control, Asking for precaution until crisis subside, PRN (medication), Walking in courtyard or in the halls of unit

Signature, Patient or Authorized Representative, Date, Time, Signature, Case Manager, Signature, TMC representative, Date, Time, Signature, TMC representative, Date, Time, Reserved for bar code



PERSONAL COPING SKILLS FORM

PATIENT IDENTIFICATION

☐ Attention grabbing sensation (please be specific – e.g., wash your hands in cold water, hold a piece of ice, or splash cold water on your face):

☐ Reading a comforting prayer from Bible or a comforting statement from other book:

TECHNIQUES THAT MAY CONTINUE TO ESCALATE THE CLIENT

Please tell me/us anything that staff or peers might do that may cause you to continue to escalate.

INITIAL RESPONSE FROM CLIENT

- ☐ Yelling/loud noises ☐ Being forced to do something ☐ Being around others who are going off
☐ Being touched by peer or staff ☐ Being isolated ☐ Being lectured on how I should behave
☐ Called names or made fun of ☐ Being threatened ☐ Being told to behave
☐ Contact with person who is upsetting ☐ Being restrained

HISTORY OF TRAUMA (Information from this section may need to be referred for trauma screening/assessment).

When you are upset, angry or fearful, do you usually remember certain events in your life?

- ☐ YES ☐ NO

DO YOU HAVE A HISTORY OF TRAUMA IN

Please specify (sexual, emotional or physical abuse?)

- ☐ CHILDHOOD ☐ ADULT

Signature, Patient or Authorized Representative

Date

Time

Signature, Case Manager

Signature & Title, TMC representative

Date

Time

Signature & Title, TMC representative

Date

Time

PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

COMPASSION SATISFACTION AND COMPASSION FATIGUE (PROQOL) VERSION 5 (2009)

When you *[help]* people you have direct contact with their lives. As you may have found, your compassion for those you *[help]* can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a *[helper]*. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

1=Never

2=Rarely

3=Sometimes

4=Often

5=Very Often

- _____ 1. I am happy.
- _____ 2. I am preoccupied with more than one person I *[help]*.
- _____ 3. I get satisfaction from being able to *[help]* people.
- _____ 4. I feel connected to others.
- _____ 5. I jump or am startled by unexpected sounds.
- _____ 6. I feel invigorated after working with those I *[help]*.
- _____ 7. I find it difficult to separate my personal life from my life as a *[helper]*.
- _____ 8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I *[help]*.
- _____ 9. I think that I might have been affected by the traumatic stress of those I *[help]*.
- _____ 10. I feel trapped by my job as a *[helper]*.
- _____ 11. Because of my *[helping]*, I have felt "on edge" about various things.
- _____ 12. I like my work as a *[helper]*.
- _____ 13. I feel depressed because of the traumatic experiences of the people I *[help]*.
- _____ 14. I feel as though I am experiencing the trauma of someone I have *[helped]*.
- _____ 15. I have beliefs that sustain me.
- _____ 16. I am pleased with how I am able to keep up with *[helping]* techniques and protocols.
- _____ 17. I am the person I always wanted to be.
- _____ 18. My work makes me feel satisfied.
- _____ 19. I feel worn out because of my work as a *[helper]*.
- _____ 20. I have happy thoughts and feelings about those I *[help]* and how I could help them.
- _____ 21. I feel overwhelmed because my case *[work]* load seems endless.
- _____ 22. I believe I can make a difference through my work.
- _____ 23. I avoid certain activities or situations because they remind me of frightening experiences of the people I *[help]*.
- _____ 24. I am proud of what I can do to *[help]*.
- _____ 25. As a result of my *[helping]*, I have intrusive, frightening thoughts.
- _____ 26. I feel "bogged down" by the system.
- _____ 27. I have thoughts that I am a "success" as a *[helper]*.
- _____ 28. I can't recall important parts of my work with trauma victims.
- _____ 29. I am a very caring person.
- _____ 30. I am happy that I chose to do this work.

YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

Compassion Satisfaction _____

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

Burnout _____

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 43, this probably reflects positive feelings about your ability to be effective in your work. If you score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a “bad day” or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

Secondary Traumatic Stress _____

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other's trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

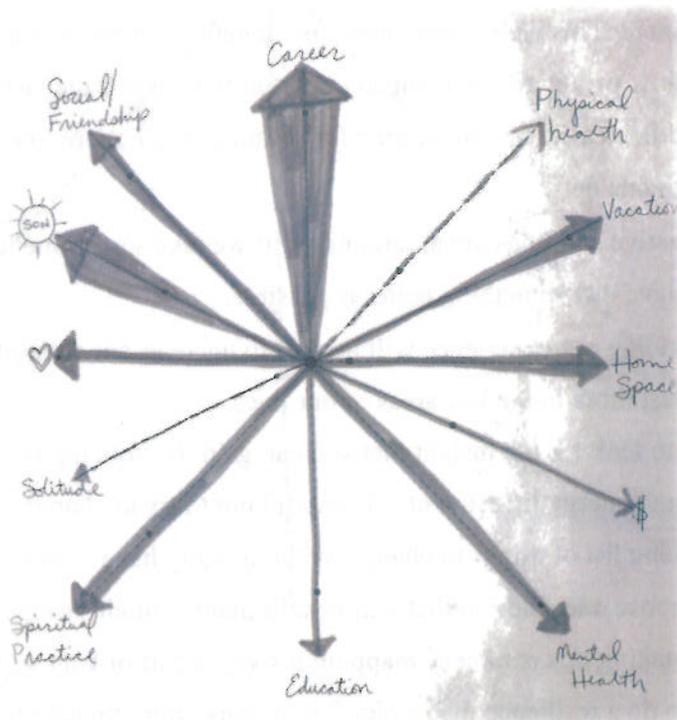
7 Steps to Mapping Your Resilience

1. Label each spoke with at least 8 life domains (use the circle matrix on page 3).

- Solitude
- Family
- Children
- Recreation/Leisure
- Profession/ Job
- Education/ Learning
- Friendship
- Home Space
- Community Service
- Spiritual Practice
- Physical Health
- Mental Health
- Social Health
- Hobbies
- Other

2. On a scale of 0 to 10, with the center of the map being a 0= totally unsatisfied, the center of the spoke being a 5= partially satisfied and the end of each spoke being a 10= totally satisfied; place a small mark that signifies your level of satisfaction with each life domain.

3. Using a marker or colored pencil, draw an arrow on each spoke, from the center point of the map to the end. Vary the thickness of the arrow to indicate the amount of time and energy that you put into this life domain. Keep in mind, this is not an exact science, but the thicker the arrow the more time and energy that you are currently spending in this life domain. See the example below. Feel free to add extra spokes if needed.



Principles for working with children who are going through trauma

- **Principle One: Always Empower, Never Disempower**

- Show compassion by avoiding power struggles
- Response should reflect an understanding of potentially traumatized behavior
- Recognize that the youths' behavior may be outside awareness /self-control
- Discipline should be consistent and respectful
- Discipline should never resemble violence against children
 - (yelling, sarcasm, blaming, threats)

- **Principle Two: Provide Unconditional Positive Regard**

- Show genuine respect for the children as people
- Focus on building trust
- Avoid “what is wrong with you?” or telling them their faults
- Empathize with children and youth
- There is a healing power of an adult who cares
- Acknowledge their feelings
- #2: example – child yells at an adult staff: “I hate you. You suck.” staff responds: “I am sorry you feel that way. I realize this is hard for you right now, but you are bright and you can do this. I am here to help you when you are ready.”

- **Principle Three: Maintain High Expectations**

- Set consistent, expectations, limits, and routines
- Allows youth to begin to separate between arbitrary rules & ones that are purposeful
- Promotes Safety
- Most appropriate when they are immediate, related, age-appropriate, and delivered in a calm, respectful voice
- #3: example – sends a message they are worthy of attention. “I see that you are struggling and feeling angry, but you can't continue to behave in this manner. You must stop interrupting the work of others. For now I'm going to have you change your seat. Would you rather sit in the back of the room or next to my desk?”
- The “perfect choice” gives the child/youth a choice between two real options that will give you what you need from them, while empowering them with a positive choice to make.

- **Principle Four: Check Assumptions, Observe, and Question**

- Identify your own assumptions – when you catch yourself making an assumption, choose to make an observation instead
- Then ask questions – **Be sure you are willing to listen carefully to the response**
 - This is how we display respect and show unconditional positive regard
- Consider each child independent of any factors you may know about his/her personal life
- Acknowledge their feelings
- May help to record your observations – which may also allow us to remove emotionally charged responses – better to focus on the context of students behaviors.
- #4 when we make assumptions about who is likely to be traumatized based on a stereotype of any one group in our programs, we may stop from seeing who actually has been affected by trauma. Trauma is an individual response, When we consider the children in our care, all possibilities exist for each child.
- The quiet, withdrawn child who is emotionally absent during class should and can be as much of a concern as the child who misbehaves.

- **Principle Five: Be a Relationship Coach**

- Continue to teach/foster students how to get along, supporting relationships between the child and their parents as well as their peers (just like what we teach in elementary school).
- By helping students feel safe, you are allowing them to put more energy into learning
- Putting less energy into dealing with emotions and behavior that detract from learning will result in better scores
- You can help students take small but significant steps toward mending relationships with others
- Most appropriate when they are immediate, related, age-appropriate, and delivered in a calm, respectful voice
- #5: example the relationships we establish with the children in our care, influence the tone and demeanor in our classrooms and program facilities.

- **Principle Six: Provide Guided Opportunities for Helpful Participation**

- Promotes a sense of self-worth – provides an opportunity to be heard, make choices, and have a sense of accomplishment
- Helping others strengthens resiliency
- Can create trust
- #6 example: we all want to belong – gives us opportunities to be heard, make choices, have responsibility, and be engaged.