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Educator Self-Care: How do we save the lifeguards?

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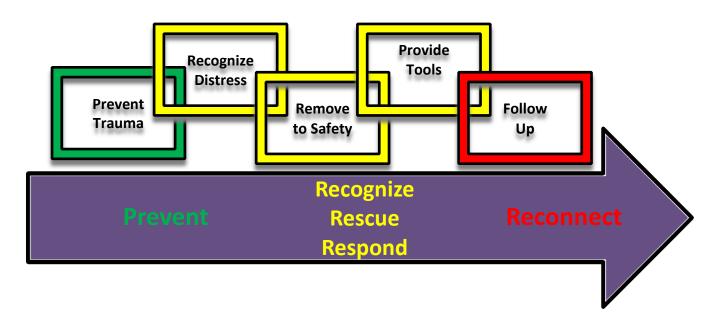
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Educator Self-Care: How do we save the lifeguards?

The impact of an educator cannot be dismissed especially when we consider that they are entrusted with a very difficult responsibility of cultivating productive and knowledgeable citizens. However, what happens when educators are exposed to trauma, either directly or indirectly? With the pressures of academic and behavior achievement surmounting, what can schools do to support their teachers who are entrusted with our future leaders? Coastal Academy GNETS will present a framework that is analogous to the Drowning Chain of Survival for Lifeguards to meet this growing need. Participants will gain an awareness of the impact of trauma on educators as well as strategies for schools to implement so that we protect our most valuable resources; the teacher. In addition, we will provide examples of how Coastal Academy GNETS is meeting the needs of our educators in this area of concern which includes a look into our Healing Rooms, creating a Plan of Connection, and forming a Compassion Team.





Healing Room Surveys

Coastal Academy GNETS

Anonymous Healing Room Survey

3.	3. Circle on or more of the following areas where you experienced difficulty after an incident					
	before spending time in the room?					
	Mentally	Emotionally	Physically	Other:		
4.	How would y	ou rate the are	a(s) now after	spending time in the ro	oom? (Circle)	
1 Poo	r (needed mo	re time or supp	ort) 2 Be	etter (ready to return)	3 Great (ready to return)	
Optional: What is the best part of the Healing room? Or, how can we make it more useful?						

Coastal Academy GNETS

Anonymous Healing Room Survey

		-		•	•	
1.	Circle on or r	more of the follo	owing areas w	here you experience	d difficulty after an incid	dent
	before spen	ding time in the	e room?			
	Mentally	Emotionally	Physically	Other:		
2.	How would y	ou rate the are	a(s) now after	spending time in the	e room? (Circle)	
1 Poo	r (needed mo	re time or supp	ort) 2 Be	etter (ready to return	a) 3 Great (ready to	return)
Optional: What is the best part of the Healing room? Or, how can we make it more useful?						

Plan of Connection

Staff Member	MPC	SPC	CT Member	Coordinator
Date of Plan:	Data of Incident	Time of Incident:	Safe	Healing Room
Date of Flan.	Date of incluent.	Time of incident.	Sale	Used
			Yes or No	Yes or No

			105 01 110	105 01 110
If sta	iff's personal safety i	s in question, notify (Coordinator immedi	iately.
•		1		•
Incident Descrip	otion:			
includit Buscil	3410114			
D 111 G	. 37 1 1			
Possible Suppor	t Needed:			

Follow Up Timeline:

Type of contact (phone, email, text, in-person)	Notes: include date of next contact and resources discussed/provided
	(phone, email, text,

Date of Closure for Plan:

Healing Room Procedures

Coastal staff may make use of the *Healing Room* any time they have experienced a difficult situation. The following are general guidelines and procedures for the room's usage:

- If at any time you feel as if you may harm yourself, please do not use the room alone! Please notify a member of the Compassion Team as posted on the schedule or contact the Coordinator immediately at (912) 580-6285.
 STAY CONNECTED!
- O If you are stressed, burned out, or have experienced direct/indirect trauma today, please make use of this room for relaxation purposes. Notify your teammate in the classroom/office before leaving. If needed, an admin will cover your class during this time. You or your teammate should notify the admin as soon as possible.
- Once arriving at the Healing Room, please notify the front office that you are using the room. If you want to talk to someone on the Compassion Team, please contact one of the members for the current month's rotation or your Coordinator.
- O Please be mindful that we may have multiple staff members who may need to use the room throughout the day. We ask that if you use the room and need to stay longer then please contact an administrative staff immediately.

Below are some possible relaxation/mediation suggestions available in this room:

- Journaling
- Coloring
- > Pray or meditate
- > Exercise such as yoga, stretching
- Zen Sand Garden
- Music
- > Drinks and snacks in the small fridge in the room
- > Take your shoes and socks off
- Work tension and knots out of your body with the foam roller
- ➤ Debrief with someone on the Compassion Team
- Lay down and rest
- Close your eyes and focus on your heart beat or breathing
- Make use of the essential oils for aromatherapy
- ➤ Read

Compassion Team (CT) Responsibilities and Procedures

- The Coordinator will notify the CT when a staff member has made use of the healing room.
- Most importantly, the CT will first ensure the staff member is safe.
 - At any time that the team feels that a staff member may be at a risk of harm especially self-harm, the MPC will contact the Coordinator immediately.
- o Members will rotate every two months on the list.
- Each team will consist of four members with the *Coordinator serving as full time member*.
- o Staff will notify the CT of potential stressful/traumatic situations experienced by others.
- o CT team will create a **Plan of Connection** for staff members involved in potentially traumatic situations.
 - o Plan of Connection
 - Discuss how best to help/support the staff member.
 - This includes creating a brief description of how members will stay
 in contact with the staff member, selection of a Main Point of
 Contact (MPC), selection of a Secondary Point of Contact (SPC),
 and a summary of the incident. See below for a Plan of Connection
 example.
 - The MPC will report to the CT frequently, information regarding the wellbeing of the staff member in question. The SPC will act as a backup in this area. *Staff and student confidentiality must be upheld at all times*.
 - At any time that the CT feels that a staff member may be at a risk of harm especially self-harm, the MPC will contact the Coordinator immediately.
 - The Plan of Connection will be closed if the CT agrees unanimously. The plan will continue unless closed by the CT or Coordinator.
 - CT will reach out in person as well as through other forms of communication to debrief, check in, and provide suggestions to the exposed staff.
 - The team should have a minimum of three check in's (one initial contact and two follow-up check-ins.)
 - These attempts must be documented on the planning sheet, as well as:
 - If the staff member has asked that their emergency contact is called. Coordinator must be made aware of this request, first.
 - Any resources that have been suggested/used (see list of available resources/services/suggestions.)

- o As always, the CT will make sure that the staff member is safe.
- o CT will discuss monthly Plan of Connection(s) as well as preventative/treatment measures including additional resources to be shared with the staff.

References

- Baker, P., White-McMahon, M. (2014). The hopeful brain: NeuroRelational repair for disconnected children and youth. Lulu Publishing Services
- Berger, R., Abu-Raiya, H., & Benatov, J. (2016). Reducing primary and secondary traumatic stress symptoms among educators by training them to deliver a resiliency program (ERASE-Stress) following the Christ church earthquake in New Zealand. *American Journal of Orthopsychiatry*, 86(2), 236-251. doi:10.1037/ort0000153
- Brandell, J. R., & Ringel, S. (2012). *Trauma: Contemporary directions in theory, practice, and research.* Thousand Oaks, California: SAGE Publications, Inc.
- Figley, C. R. (1995). Compassion fatigue: Coping with secondary traumatic stress

 disorder in those who treat the traumatized. New York: Routledge. Retrieved from

 https://login.ezproxy.library.valdosta.edu/login?url=http://search.ebscohost.com/login.

 aspx?direct=true&db=nlebk&AN=72836&site=eds-live&scope=site
- Franklin, C. G., Kim, J. S., Ryan, T. N., Kelly, M. S., & Montgomery, K. L. (2012).

 Teacher involvement in school mental health interventions: A systematic review. *Children and Youth Services Review*, *34*(5), 973-982.

 doi:10.1016/j.childyouth.2012.01.027
- Gentry, J. E., Baranowsky, A. B., & Rhoton, R. (2017). Trauma competency: An active ingredients approach to treating posttraumatic stress disorder. *Journal of Counseling & Development*, 95(3), 279–287. https://doi.org/10.1002/jcad.12142
- Georgia Department of Education. (2018) Georgia network for educational and therapeutic support (GNETS). Retrieved from http://www.gadoe.org/Curriculum-Instruction-and-Assessment/Special-Education-Services/Pages/Georgia-Network-for-Special-Education-

- and-Supports.aspx
- Herman, J. L. (1992). Trauma and recovery: The aftermath of violence from domestic abuse to political terror. New York: Basic Books.
- Im, S., & Follette, V. M. (2016). Rumination and mindfulness related to multiple types of trauma exposure. *Translational Issues in Psychological Science*, 2(4), 395–407. https://doi.org/10.1037/tps0000090
- Marsay, G., & Higson-Smith, C. (2005). Exploring compassion fatigue and trauma in the South African learning environment. *Johannesburg: Learning and Violence*. Retrieved from https://learningandviolence.net/violence/MarsayViolence.pdf
- Kahill, S.(1988). Interventions for burnout in the helping professions: A review of the empirical evidence. *Canadian Journal of Counselling Review*, 22(3), 310–342.
- Meszaros, J. (2010). Building blocks toward contemporary trauma theory: Ferenczi's paradigm shift. *The America Journal of Psychoanalysis*, 70, 328-340. DOI: 10.1057/ajp.2010.29
- Rogers, C. (1992). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting and Clinical Psychology*, 60(6), 827-832.
- U.S. Department of Health & Human Services. (2018). NIH Fact Sheets Post-Traumatic Stress

 Disorder (PTSD). Washington, DC. Retrieved from https://report.nih.gov/

 NIHfactsheets/ViewFactSheet.aspx?csid=58
- White-McMahon, M., & Baker, P. (2016). Better behavior positively!: Brain-based strategies and solutions. Lulu Publishing Services