“Hate multiplies hate, violence multiplies violence, and toughness multiplies toughness in a descending spiral of destruction.”

Dr. Martin Luther King, Jr.
Overview

- Risk recognition
- Self-assessment
- Assessment of others
- Basic motives
- Interventions
More assaults occur today in the health care and social services setting than any other field.

1. Physical assault
2. Threatening behavior
3. Verbal abuse

May occur while working or on call
“Physical restraint and seclusion are never used. If any individual becomes violent or threatens violence, 911 will be called for assistance. People in the vicinity of the violent behavior or threats will be removed to a safe location until the police arrive.”
Fight fire with fire?
Signs that an intervention or de-escalation may be imminent:

• Pacing
• Appearing fearful or anxious
• Appearing stressed or threatened
• Acting suspicious or hostile
• A dramatic change in behavior

• Holding a potential weapon
• Clenched fists
• Approaching or avoiding others
• Nonresponsive to direction
• Challenging or threatening others
• Stating a plan of intent to harm others
Signs that an intervention or de-escalation may be imminent:

- Slamming doors or pushing furniture
- Talking loudly and swearing
- Physical appearance: intoxicated, poor hygiene, odor, disheveled clothing
- Behavior that doesn’t match what is being said
- Blaming others for problems
- Reoccurrence of significant date or event
Work Together to Change Behavior

1. Listen
2. Empathize
3. Give reassurance and space.
4. Offer options
LISTEN

Allow them to express their concern. Be empathetic. (Trauma Informed Care) Apologize if appropriate.
Follow through on their problem.
Avoid blaming others or becoming defensive.
Agree with them when you can.
Try “mirroring” their words.
“What I’m hearing you say is…”
“You seem to be saying…”
“After listening to what you’ve said,…”
“Let me see if I’m hearing you correctly…”

Be careful that your mirroring doesn’t sound patronizing.
Verbal Interventions for Moderate Stress Level

Help them identify the problem.
Encourage verbalization and description of perceptions or feelings.
Align yourself with them by focusing on a common goal.
Provide alternatives.
Ask open-ended questions. (questions that aren’t answered with yes or no)
Place the events in a timed sequence.
Restate and reflect.
Verbal Interventions for Moderate Stress Level

Suggest collaboration.
Summarize.
Encourage formation of an action plan.
Verbalize the implied.
Seek clarification. (Find out what they “need”.)
Focus on what happened rather than how they are acting.
What do they want?

**MOTIVES**
- Fear
- Anger
- Frustration
- Manipulation
- Intimidation
- Responses to pain, medication, illness

**FACTORS**
- History of violence
- Psychiatric commitment, jail, homelessness
- Availability of weapon
- History of abuse
- Economic instability
- Increased domestic violence

Helping America’s most vulnerable™
Medications

- Be aware of the medications they are currently taking and **possible side effects**.
- **They should not stop taking a medication without talking to their doctor first.** Suddenly stopping a medication may lead to "rebound" or worsening of symptoms. Other uncomfortable or potentially dangerous withdrawal effects also are possible.
- Report any concerns about side effects to their doctor right away. They may need a change in the dose or a different medication.
Work Together to Change Behavior

1. **Listen**
2. **Empathize**
3. **Give** reassurance and space.
4. **Offer** options
Individual Characteristics/Predisposition Factors

Individual characteristics a person brings into a situation which may contribute to a violent incident:

- Loner/withdrawn
- Fascination with violent music, games, movies
- Obsession with weapons
- Poor interpersonal skills
- Poor employment history
- Suspicious of others
- Problem with authority
- Frequent mood swings

- Substance abuse
- Views world as hostile or threatening
- Low frustration level
- Impatient
- Financial stress
- Blames others for problems
- Shunned by coworkers
Lighting the Fuse or Increasing the Odds

ODDS INCREASERS
• Lack of privacy
• Loss of dignity
• Loss of control
• Fear of pain
• Frustration with system
• Loss of independence

FUSE LIGHTERS
• Unpleasant environment
• Poor customer service
• Excessive noise
• Poor lighting
• Inflexible process
• Overcrowding
• Changes in routine
Work Together to Change Behavior

1. **Listen**
2. **Empathize**
3. **Give reassurance and space.**
4. **Offer options**
Nonverbal and Alternative Interventions

Respect personal space.
Use active listening.
Project empathy and willingness to help.
Convey calmness.
Demonstrate supportive body language.
Go for a walk.
Play some music.
Find a quiet place.
Offer them a cup of water.
Use relaxation and visualization techniques.
Interventions for Severe Stress

- Have an escape route. Don’t let the person get between you and the door.
- Don’t crowd the person. Keep a distance of 5-7 feet from them.
- Stay calm. Slow deliberate movements signal to the agitated person that you will not harm them.
- Don’t try to talk when they are shouting.
- Embrace silence as an opportunity for them to collect their thoughts.
- Don’t argue or become defensive. Encourage them to verbalize their feelings.
- Call for backup if necessary.
Give Reassurance

- “This is a safe place.”
- “This is a place where we help people.”
- “What can we do to help?”
- “What do you need right now?”
- “Tell us what would make things better.”
When to Call 911

SIGNS
• Danger to self and/or others
• Unable to process information
• Irrational, aggressive, or freezing

INTERVENTIONS
• Remove others and self from area.
• Use personal safety skills (plan of escape, positioning, etc.)
• NOTE: Volunteers of America of North Louisiana does NOT use any form of physical restraint.
Plan Ahead

- Always have a plan of escape.
- Give space to an individual, move away, or position barriers between you and them.
- Maintain low risks in the workplace; clear area of objects that could be used as weapons.
- Isolate the situation, not yourself. (MHFA)
- Know all available exits.
- Volunteers of America has a NO TOUCH policy for workplace violence.
- Remove yourself and others and call 911.
Reduce Workplace Risks

• Assess the safety of your workplace.
• Remove scissors, letter openers, staplers, paperweights, picture frames.
• Maintain calm lighting and appropriate temperature.
• Always have adequate staffing.
• Have workstations set up to avoid becoming trapped.
• Be aware of your surroundings.
Reduce Workplace Risks

• Be aware of current events that may cause tension.
• Be aware that seasonal changes can cause heightened tension.
• Train staff to report physical or verbal abuse, self-injurious behaviors, credible threats, sexual or racial harassment, or possession of weapons.
• Act on reported behavior by staff to remove or reduce irritants before they occur.
Assess Yourself

You are the professional. Part of your job is customer service. You are allowed to take a break to calm yourself. Tag someone else or find someone who works well with the client. Are you responding or reacting? Watch your breathing.
Work Together to Change Behavior

1. **Listen**
2. **Empathize**
3. **Give** reassurance and space.
4. **Offer** options
Offer Options

• Use a shared-problem approach. “How can we work together to solve this problem?” “What can I do to help?”

• Offer options: “Who has been helpful in the past? Which of those would you like to call?” “Would you like to sit outside or get something to eat?”

• Keep in mind that threatening to call the police may actually make things worse.
Understanding Agitation: De-escalation

The goal in verbal de-escalation is to help the person regain control so that he or she can better communicate needs with health care providers.
How do you handle yourself in a crisis?

**ANGER vs. CALM**

- Loses temper
- Offends others
- Can’t see reality
- Stops thinking
- Makes bad decisions

- Remains self-possessed
- Listens to others
- Has the facts
- Thinks clearly
- Makes excellent decisions

- Bruce Kasanoff
Ask yourself these questions.

- Am I reacting or responding?
- How’s my vocal tone?
- Am I taking this personally?
- Am I being defensive?
- How’s my body language?
- Am I wearing anything dangerous?
- What do I look like to others? (Can they tell the difference between you and the client?)
Home Visits

1. Check surroundings before getting out of your car.
2. Don’t park in the driveway; always park where you can easily leave if you need to.
3. When you knock, step to the side of the door and wait while paying attention to your surroundings.
4. Always let the client lead you into the home.
5. If it’s dark inside, ask for lights to be turned on.
6. Never sit with your back to hallways or room entry points.
7. Know all available exits
8. If a client becomes irate, leave ASAP.
9. If you need to call the police, do it from your car, not in the home.
10. Always remember that your safety is first so you can live to help another day.
Prevention Strategies

Intervene at the lowest level of stress.

Early recognition of escalation reduces risk.

Assess the individual’s level of stress – moderate, severe, or panic?

Debriefing is essential.
Choose one of the scenarios in the “Crisis Scenarios” document in the “Management of Aggressive Behavior…” folder on the Public drive. Answer the following questions:

1. What questions would you ask the individual in crisis in order to show that you are LISTENING to them.

2. What could you do or say that would express EMPATHY?

3. What would you do or say to GIVE THEM REASSURANCE AND SPACE?

4. What OPTIONS could you offer them in order to give them a sense of empowerment and cooperation?
Work Together to Change Behavior

1. Listen
2. Empathize
3. Give reassurance and space.
4. Offer options
 Upon completion of this training, please click [HERE](#) to complete the test electronically. After you have submitted your test, you will receive a confirmation email. When the test has been scored by the Training Manager, you will receive an email with your score.

“Psychosis,” Mental Health First Aid.
