This training has been in existence for several years, and has been re-written and updated at least annually. The material comes from several sources. First, the training uses, with permission, elements of the Therapeutic Crisis Intervention program created by the Family Life Development Center at Cornell University of Ithaca, NY. Each of the slides used is clearly identified with their logo. Second, it also uses material from the Worker Safety Training program of the Connecticut DCF Training Academy, again used with permission. Finally, many of the elements were developed by Family Continuity Staff and especially its Safety Committee.

Specific citations and other information related to the material can be obtained by contacting Family Continuity at info@familycontinuity.org.
Agenda

1. Overview – How Did We Get Here?
2. Review of Agency Policies and Procedures
3. Stress Model of Crisis
4. Introduction to Safety Training at Family Continuity
   Break
4. Assessing the Situation
5. Triggering and Escalation
   Lunch
6. How Do I Respond?
7. Case Discussion
8. Wrap up and Evaluations
How Did We Get Here?

• Prior to February 6, 2008
• E-Trainings – Where Do We Find Them?
• Policies
• Site Reviews, Security access/egress, Safety Officers,
• Name Badges
• Emergency Contact Information
• Schedules
• Agency Safety Committee
• Safety Assessments
• Safety Handbooks/Safety Tips
Policies and Procedures

• Where to find Policies.... Intranet!!
• Weapons Policy
• Safety Assessment Scale
• Safety Tracking Form
• Critical Incidents
• Workman’s Comp
Critical Incidents

• Death client or employee.
• Any serious injury or medical condition to a Family Continuity client, or on-duty Family Continuity employee that necessitates emergency medical intervention. Also any serious injury or medical condition that may not have received proper medical treatment. This includes apparent intentional self-mutilation.
• Any incident that is considered hazardous to the environment and that causes disruption (such as food contamination or lice).
• Any A.W.O.L. (for any length of time) Family Continuity client who is considered to be an imminent threat to self and/or others, is underage, or is from a Family Continuity residential facility or site.
• Sexual involvement between clients (whether consensual or not) at a Family Continuity residential setting or between staff and clients.
Critical Incidents Cont...

- Any restraint administered outside the purveyance of operational standards for restraints.
- Any report of abuse filed by a client against an Family Continuity employee, intern, volunteer, independent contractor or caregiver.
- Any unscheduled event which necessitates the evacuation of a Family Continuity facility.
- Any serious fire involving a Family Continuity facility or client.
- Any suicide attempt by a Family Continuity client which results in injury.
- Any allegations of, or arrests for, major crimes involving clients for which Family Continuity has full-time (24 hours per day) responsibility.
- Any allegations of, or arrests for, criminal behavior involving Family Continuity staff, including substance abuse by staff while on duty.
Critical Incidents Cont....

• Any homicidal gestures or threats made by, or against, a Family Continuity client and/or Family Continuity staff.
• Any physical assault or alleged physical assault to or by clients, including hitting, kicking, and/or use of a weapon; destruction of property; any organized or other significant event on the unit that causes disruption to the milieu that could result in a potentially harmful situation for clients.
• Any incidents involving Family Continuity clients and/or staff that have unusual community involvement and/or the potential to place the organization or its employees at legal, physical, and/or political risk.
• Any incident that is considered a critical incident by the program’s contractor or regulatory entity (i.e. – DSS, DMH, MBHP, etc.).
Workman’s Comp
First Report of Injury

• Employees must complete WC Injury Form (found on HR Drive) and forward to HR **within 24 hours** of the incident. (Supervisor must complete the form if the employee is not able, due to injury/hospitalization.)

• If employee needs to, he/she should seek medical care (preferably at a local Occupational Health Center, if available).

• HR will report the claim to Liberty Mutual.

• All medical paperwork (ie: doctor’s notes, etc) related to the treatment of the injury should be forwarded to HR as soon as possible.
Important Information

• If injured employee seeks medical care, he/she **should NOT be using their “regular” health insurance coverage.** The employee should inform the provider that his/her injury is work related and is covered by Workers Compensation insurance. WC insurance policy information is on the WC Injury Form the employee completes. Employee should make a copy for his/her records.

• If injured employee needs a prescription filled for treatment of a work related injury, he/she should inform the pharmacy that the prescription is for a work related injury and provide pharmacy with WC insurance policy information. **Most major retail pharmacies (CVS, Walgreens, etc) will direct bill the WC insurance company** and not expect the employee to make any payments when the prescription is filled.
Understanding Stress Model

- When does a crisis occur?
- Dynamics of a Crisis
- Types of Crisis
- What are the goals of Crisis Intervention
- Stress Model of Crisis
- Recovery Phase
A Crisis Occurs When

A person’s inability to cope with a situation which results in a change in behavior
Understanding Aggressive Behavior

Reactive Aggression
Affective or expressive aggression
Loss of control and emotional flooding
Emotions are dominant

Proactive Aggression
Instrumental or operant aggression
Goal oriented
Cognitions are dominant
Stress Model of Crisis

THE STRESS MODEL OF CRISIS: A TYPICAL CRISIS 11
Model for Proactive Aggression
Immediate Response Priorities

REACTIVE
- Safety
- Understanding and support
- Remove or reduce stimulus

PROACTIVE
- Safety
- Containment and negotiation
- Engagement and reasoning
Ongoing Response Priorities

**REACTIVE**
Teach coping skills
Teach self-regulation skills
Anger management

**PROACTIVE**
Teach appropriate thinking, values, and social skills
Reward socially appropriate behavior, not anti-social behavior
The Goals of Crisis Intervention Are To

**SHORT TERM:**
**SUPPORT:** environmentally and emotionally to reduce stress and risk

**LONG TERM:**
**TEACH:** children better ways to cope with stress
Stress Model of Crisis
Recovery Phase

- Higher (Éducateur)
- No Change (Fire Fighter)
- Lower (Abuser)
Assessing the Situation

• Understanding our responses
• Understanding the responses of our teammate
• What is going on for the client
• What is going on for the family
• Assessing the physical environment
Skills Building Pyramid: Self-Awareness
Emotional Competence Means

Being aware of personal goals, values, beliefs
Understanding cultural and ethnic differences and each other’s worldview
Demonstrating self-regulation skills
Knowing personal triggers
“What Am I Feeling Now?”

Anger can undermine objectivity
Anger is an emotional and physical state
Cognitive abilities are reduced
Appropriate Dress

- Shoes
- Scarves
- Lanyards
- Clothing
- Jewelry
Understanding Co-Workers

- Different Perspective
- Different Life Experiences
- Different tolerance levels
- Communicating with each other
- One leaves, ALL leave!
Outreach

• Physical Space
• Exits
• Others in home
• Ability to Move Quickly
• Animals
• Weapons
• Other...
Office

- Objects in Space
- Location of Exit
- Loud/Escalated Sessions
- How to get help
To and From Car

- Car Legally parked?
- Car in driveway
- Groups of individuals
- Gas
- Cell Phone
- Safe Location
Triggering and Escalation

- Anger and the Crisis Cycle
- Verbal and Non Verbal Crisis Communication
“When we are at our angriest, we are at our stupidest.”
Feelings, Needs, and Behaviors
Elements of a Potentially Violent Situation

A potential **TRIGGER** to violence

A **TARGET**

A **WEAPON**

Level of stress or motivation (**AROUSAL**)
Stress Model of Crisis
PROTECTIVE INTERVENTIONS

Remove the Potential Trigger to Violence By

- Never touching an angry and potentially violent person
- Avoiding any aggressive moves and provocative statements
- Avoiding the conflict cycle and counter aggression
- Removing others who might trigger the violence

– Body language is critical –
Conflict Cycle

- Stressful Situation/Incident
- Young Person's Feelings
- Young Person's Behavior
- Adult's Response
We Can Avoid the Conflict Cycle By

● Using positive self-talk
● Listening and validating feelings
● Managing the environment, e.g., removing others
● Giving choices and the time to decide
● Redirecting the person to another positive activity
● Appealing to the person’s self-interest
● Dropping or changing the expectation
The Goals of Crisis Intervention Are To

SHORT TERM:
SUPPORT: environmentally and emotionally to reduce stress and risk

LONG TERM:
TEACH: better ways to cope with stress
Meaning in Emotional Communication

Meaning in Spoken Communication During Times of Crisis

Meaning = Facial Expression + Tone of Voice + Words

55% 38% 7%
Nonverbal Techniques

- Silence
- Nods
- Facial Expression
- Eye Contact
Encouraging and Eliciting Techniques

Tone of Voice
Minimal Encouragements: “uh-huh,” “go on,” “I see”
Door Openers: “I’d like to hear more,” “Tell me about that,”
Closed Questions: “Do you like your teacher?”
Open Questions: “How did you respond?” “What happened next?”
Nonverbal Behaviors

Eye contact
Body language
Personal space
Height differences
Gender differences
Cultural differences
How Do I Respond

- Behavior Support Techniques
- Emotional First Aid
- When do I leave?
Skills Building Pyramid: Active Listening
Pain-Based Behavior Includes

- Impulsive outbursts
- Aggression
- Running away
- Self-injury
- Defiance
- Inability to regulate emotions
- Trauma re-enactment
Identifying a Young Person’s Needs

What is this individual child’s baseline behavior? Is this typical behavior?
Is this normal for a young person of this age?
Does this behavior reflect the child or family’s worldview?
Is this a pain-based behavior related to past trauma?
What feeling is the child expressing?
Understanding Responses

Reflective Responses:

“You feel uncomfortable when your friends talk about school.”

“You are angry about your visit being cancelled. I’d be upset, too.”

Summarization:

“Here is what I hear you saying, you felt good at first, but now....”
Active Listening

Identifies and validates feelings
Reduces defensiveness
Promotes change
Communicates that we care and understand
Is an effective co-regulation strategy
Helps young people “talk out rather than act out”
Skills Building Pyramid: Behavior Support Techniques
Active Listening Is NOT

- Throwing up roadblocks
- Arguing or blaming
- Giving permission
- Giving advice or solving the problem for the child
- Necessarily time consuming
Decrease the Level of Stress or Motivation By

- Using your relationship
- Actively listening to identify feelings
- Removing the audience
- Using co-regulation strategies (reactive aggression)
- Offering alternative, nonaggressive ways to achieve goals (proactive aggression)
Managing the environment
Prompting
Caring gesture
Hurdle help
Redirection and distractions
Proximity
Directive statements
Time away
Skills Building Pyramid: Emotional First Aid
Goals of Emotional First Aid

1. Provide immediate help and support to reduce emotional intensity (co-regulation)
2. Resolve the immediate crisis
3. Keep the child in the program/activity
Strategies for Emotional First Aid

Drain off emotions
Clarify events
Maintain the relationship and lines of communication
Remind the child of expectations and mediate the situation if necessary
Stress Model of Crisis

- **Pre-crisis State (Baseline)**
- **Triggering Event**
- **Escalation Phase**
- **Outburst Crisis**

**Degree of Stress** vs **Time Duration**

**Baseline Behavior**

- **Agitation**
- **Aggression**
- **Violence**

**Recovery**
Stress Model of Crisis
Skills Building Pyramid: Crisis Co-Regulation
Stress Model of Crisis
Objective of Crisis Co-Regulation

To provide support in a way that reduces stress and risk
What To Think (Self-Awareness)

Ask yourself the four questions
Use positive self-talk
What To Do (Nonverbal Strategies)

Take a deep breath
Use protective stance
Step back
Give the situation time
Sit down if appropriate
Remember the importance of body language and facial expression
What To Say (Verbal Strategies)

Very little
Understanding responses
  “I can see... “ (validate feelings)
  “When you...” (encourage positive behaviors)
  “I know we...” (emphasize desirable outcomes)
  “I am sorry...” (offer an apology)
Remember the importance of tone of voice
Stress Model of Crisis

- Degree of Stress
- Time Duration
- Baseline Behavior
- Pre-crisis State (Baseline)
- Triggering Event
- Escalation Phase
- Outburst Crisis
- Violence
- Aggression
- Agitation
- Recovery