DE-ESCALATION 101: METHODS AND TECHNIQUES FOR MANAGING VOLATILE PERSONS & STAYING SAFE

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Executive Security Director,
Mission Health
GOALS

- Develop Skills to be a Better Ethical Protector.
- Manage Conflict More Professionally, Safely, and Effectively.
- Inspire Voluntary Compliance, Cooperation, and Collaboration.
- Creating Allies versus Adversaries.

Ethical Protector
WHAT HAVE YOU DONE TODAY TO MAKE YOUR ENVIRONMENT INCOMPATIBLE WITH VIOLENCE
Create a social contract with the Universal Greeting

- Give an appropriate, positive greeting
- Introduce yourself and your affiliation
- State the reason for your contact
- Ask the other party a relevant question

UNIVERSAL GREETING (VJ/VDI)
2 GOALS OF DE-ESCALATION

Create Calm Atmosphere

Stay Safe

Focus on creating a NON-ESCALATING environment.
There is the potential for any patient or visitor (or even staff member) to become verbally or, in more rare cases, even physically assaultive under extreme distress.
THE PREMIER 5-MINUTE “METHOD” FOR CREATING A NON-ESCALATING ENVIRONMENT
INMATE SAVES OFFICER
BE A PROTECTOR:
A SERVICE ETHOS
BENEFITS OF BEING A CONTACT PROFESSIONAL

PERSONAL SAFETY
DECREASED USE OF FORCE INCIDENTS
DECREASED INJURY RATES
DECREASED WORKMAN’S COMP CLAIMS
ENHANCED PROFESSIONALISM
DECREASED COMPLAINTS
DECREASED VICARIOUS LIABILITY
LESS STRESS
COURT POWER & ARTICULATION
INCREASED STAFF MORALE
COOPER COLOR CODE

The Premier Way to Handle any Threat

SITUATIONAL AWARENESS

COMATOSE
In shock, unable to function.

HIGH ALERT
Confirmed threat, need to take action.

FOCUSED AWARENESS
Carefully observing a potential danger.

RELAXED AWARENESS
Paying attention, but enjoying life.

TUNED OUT
Unaware of surroundings.
AWARENESS = 90% OF SELF-PROTECTION
10% = THE PHYSICAL TECHNIQUES
Safety is something that happens between your ears, not something you hold in your hands.

(Jeff Cooper)
synergy. noun

cooperation

produce a greater than the sum of its parts

acquire
PATIENT RISK FACTORS

- Head trauma
- Behavioral Health Issues
- Substance abuse
- Young age (particularly males)
- Prior history of violence
Family may have Risk Factors
THE PAIN FACTOR
WELL

THAT ESCALATED QUICKLY
I'M LIKE A PRESSURE COOKER. MY ANGER BUILDS AND BUILDS UNTIL IT POPS
A MAJOR KEY

INTERVENE EARLY
How much of our communication is verbal compared to non-verbal?
NON VERBAL COMMUNICATION

- Non Verbal: 55%
- Spoken words: 7%
- Tone of voice: 38%
HOW TO LOOK OUT FOR, SPOT ESCALATION & THINGS TO DO (TTD)
What is baseline (normal)?

**TTD**

1. Look for a noticeable increase or change.
2. Spot Gateway Behaviors.
INCREASING LOSS OF THE ABILITY TO COPE

Escalation is growing due to diminished coping ability

**TTD**

1. Strengthen boundaries
2. Call for help
3. Team Approach

VJ/VDI Redirections
VJ/VDI Persuasion Sequence
BEHAVIORAL EXPLOSION

The complete loss of control

TTD

1. Safe, non-harmful techniques.
   2. Team Approach
RECONNECT

Decrease in physical & emotional energy

**TTD**

1. Re-Establish dignity-driven, respectful connection
2. 3. Respond with U.G., Peace phrases, and dignity-driven care.
CALLING FOR HELP

Have a simple and understandable plan of action for ways of asking for help (on & off campus).
<table>
<thead>
<tr>
<th>Escalating Loudness/Shouting</th>
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<tbody>
<tr>
<td>Increasing Profanity</td>
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<td>Flushed Face/Twitching Lips</td>
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<tr>
<th>Invading Personal Space</th>
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<tr>
<td>Challenging Authority</td>
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<td>Change of Breathing</td>
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<tr>
<th>Darting/Jerking Eye Movements</th>
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<tbody>
<tr>
<td>Overly Aggressive Actions &amp; Lang.</td>
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<tr>
<td>Making statements about losing control</td>
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## SIGNS OF CONFRONTATION & ESCALATING NEGATIVE BEHAVIOR

<table>
<thead>
<tr>
<th>Image</th>
<th>Description</th>
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<tbody>
<tr>
<td><img src="https://via.placeholder.com/77x314" alt="Image" /></td>
<td>Acting chronically disgruntled</td>
</tr>
<tr>
<td><img src="https://via.placeholder.com/77x191" alt="Image" /></td>
<td>Rapid or pressured speech</td>
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<tr>
<td><img src="https://via.placeholder.com/77x69" alt="Image" /></td>
<td>Opening &amp; Closing of hands</td>
</tr>
<tr>
<td><img src="https://via.placeholder.com/77x158" alt="Image" /></td>
<td>Finger-Pointing/Fist-Pounding</td>
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<tr>
<td><img src="https://via.placeholder.com/77x280" alt="Image" /></td>
<td>Any visible change in body posture/energy</td>
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<tr>
<td><img src="https://via.placeholder.com/77x403" alt="Image" /></td>
<td>Any erratic movements</td>
</tr>
<tr>
<td><img src="https://via.placeholder.com/195x408" alt="Image" /></td>
<td>**** Fidgeting **** (all kinds)</td>
</tr>
</tbody>
</table>
STAY SAFE METHODS

- Manage Personal Space
- Break Eye Contact
- Watch Hands
- Exit Strategy
- Use Bladed Stance & Fence
BASIC NON/DE-ESCALATION METHODS

Listen, Paraphrase, & Clarify

Avoid False Promises; Be non-judgmental

Display Sincerity & Empathy

Ignore Challenging Questions

Avoid Undesirable Phrases
BASIC NON/DE-ESCALATION METHODS

“One Voice,”
“Reverse Yelling,”
Validate Feelings

Position Yourself for Safety

Operate as a Team

Show that you are listening and that you want to help

Maintain Rational Detachment
EMPATHY
A respectful understanding of the feelings, thoughts, and attitudes of another.

***

Seek the real reason for the gateway behavior. Respond to real need.

TRAC in Room 315
“The solution to violence in America is the acceptance of reality.”

~ Gavin de Becker
REVIEW

Great Ways to Manage Escalated Persons
PERSONAL SPACE

Arms-Length Distance
3 feet-ish
Whatever you want it to be.

Distance is often your best friend.
BLADED STANCE WITH FENCE
Don’t Push a River
Improvise and Adapt
One Voice
GATEWAY BEHAVIORS

Low-level, volatile behaviors that let you know someone is getting bothered, anxious, upset, or angry, etc.

TTD

1. INTERVENE EARLY
2. Persuasion Sequence
3. Peace Phrases
VERBAL VENTING

1. Allow verbal venting if possible.
2. Remove the person from the audience, or remove the audience from him/her.
STAY RATIONALLY DETACHED & COMPOSED
WATCH YOUR PARA-VERBALS

The energy we bring to an encounter with another person invites similar energy in return.
PHYSICAL TECHNIQUES

Physical techniques should be used only as a last resort.

They should be used when it is too dangerous NOT to use them.
MANAGER INTERVENTION

Someone who is perceived as the person with control and power may need to intervene.
AFTER-CARE/DEBRIEFING

Check for:
Physical Wellness
Emotional wellness
What did everyone do well
What could be improved in future interventions.
If it’s not written, it didn’t happen.
1. Body Items (dangerous “weapons”)
2. Checking limbs (Visual always, physically as needed, Sliding Checks, Securing Checks)
3. Punches (Covers & Flinch)
TAKE-AWAY 1

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TAKE-AWAY 2

Intervene early

Create constantly a Non-Escalating Environment
TAKE-AWAY 3

Maintain Personal Space

Break Eye Contact

Watch Hands

Exit Strategy

Use Bladed Stance & Fence
WE ARE AMERICANS