What do you do when an individual is in crisis and their regular coping mechanisms are no longer effective?
Training Overview:

This training will help you learn how to get the individual through their state of crisis safely until they are de-escalated enough to return to their pre-crisis level of functionality.

• What is a Crisis
• Crisis Prevention
• Crisis Intervention

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What is a Crisis?

• HARM TO SELF
• HARM TO OTHERS
• AWOL
• DESTROY PROPERTY

A person is in crisis when their regular coping mechanisms are no longer effective.

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PREVENT A NEW CRISIS

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Prevention Strategies

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Prevent A New Crisis

Prevention Strategies

1. Be Empathetic - Try not to be judgmental of your client’s feelings. They are real, even if not based on reality
2. Clarify Messages - Listen to what is really being said, ask reflective questions and use both silence and restatements
3. Non-Threatening - Use the least restrictive method of intervention possible.

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Prevention Strategies

4. Ignore Challenging- When a client challenges your position, training, or policy, redirect the client’s attention to what is really at hand. Answering these questions often fuels a power struggle.

5. Non-Verbal Cues- Be aware of your body language, movement and tone of voice.
Who do you take care of first in a crisis situation, the individual in crisis or yourself?
CRISIS INTERVENTION

It is everyone’s responsibility to know what to do in an emergency. You must...

1. Act to secure the safety of yourself and others
2. Employ crisis intervention techniques

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It is everyone’s responsibility to know what to do in an emergency. You must...

3. Utilize positive communication techniques to diffuse the situation and build rapport

4. Avoid negative communication
1. Act to secure the safety of yourself and others

- Take action immediately to ensure safety for everyone
- Above all, keep yourself safe. If you are not safe, you can’t help others.
- If there is imminent danger, follow the agencies procedure and policies relative to calling 911
- Use your intuition (not intellect) to recognize when an individual is truly in crisis.
2. Employ crisis intervention techniques
   - Drop all demands and requests
   - Eliminate a power struggle: focus on what the individual is trying to accomplish. Remember that when a person is in crisis, they are trying to regain some control of their environment.
   - Rule out basic needs:

   - Hungry
   - Thirsty
   - Pain
   - Sick
   - Mental

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What types of positive communication techniques can you use when working with an individual in crisis?
3. Utilize positive communication techniques to diffuse the situation and build rapport

- Active Listening
- Quiet Attentiveness
- Open-ended Questions
- Acknowledgement
- Content Paraphrase
- Reflection of Thoughts and Feelings
- Body Language
4. Avoid negative communication

- Authoritative position style places you in a commanding position that interferes with the person’s ability to solve their own problems. Examples:

  Ordering    Threatening
  Preaching   Lecturing
Barbara refuses to go to bed because she thinks there is a black cat under her bed. Staff have looked under her bed with her and have taken the bed apart completely to show her there is nothing under the bed. After the bed is put together Barbara still insists that there is a black cat under her bed.
Is this situation related to a mental health issue or a developmental disability?

Group Activity

Break up in to groups and discuss the situation staff are in with Barbara. What actions can be made by staff and what type of referral should be suggested?
Delusions: Beliefs a person has with no real evidence

Persecutory: Being tormented, followed, tricked, spied upon, or feeling ridiculed (teased, etc.).

Referential: Gestures, comments, lyrics, articles aimed towards them.

Bizarre: Organs removed and replaced without scars, believing that one is the President, one can “fly”, etc.

Hallucinations: Distortion of the Senses (Hearing, Vision, Smell, Taste, Feel)
Is this situation related to a mental health issue or a developmental disability?

**Mental Health Services**
- Depressive Disorder
- Bipolar Disorder
- Schizophrenia
- Schizoaffective Disorder
- Psychosis

**Regional Center Services**
- Mental Retardation
- Autism
- Down Syndrome
- Cerebral Palsy
- Epilepsy

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REFERRALS

Community Resources

1. 911
2. Officers in the Field
3. Crisis Support Services
4. Psychiatrist
5. PRN authorization from Psychiatrist
6. Hospital - Intake Coordinator
7. Mental Health Services
8. PET Team – Psychiatric Emergency Team
THANK YOU

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