

# De-Escalation Workshop

## The Three Ss of Awareness

We all manage stress differently. The escalation cycle has many similarities to the stress response. When a stress response is heightened for a longer period of time, it can lead to a higher baseline level of stress and potential health and well-being issues. When we encounter stressful situations, we can utilize different types of awareness to help identify and manage our own responses to that situation.

- **Self-awareness** - your understanding of your own behaviors, traits, biases, and feelings
- **Social awareness** - your understanding of how you interact with others and are perceived through verbal and nonverbal communication and behaviors
- **Situational awareness** - your understanding of where you are within a space, the space around you, and potential future actions you may need to take.

## Strategies to Build Awareness

1. Journal or write down your feelings and things that you experienced at the end of the day. You can also find journals with prompts to help you to process and reflect.
2. Practice listening and responding to difficult conversations.
3. Seek feedback from trusted colleagues.

## Spotting Escalating Behaviors

In your work, you encounter many individuals who are under stress. Remember that every individual is different. Escalated behaviors can appear slowly, appear rapidly, or there may be no advanced warning signs.

Behavior	1	2	3	Behavior	1	2	3
Fidgeting or pacing back and forth				Kicking or punching			
Breathing heavily or quickly				Talking rapidly or loudly			
Staring into space, directly, or down				Repetitive or rapid actions			
Change in tone of voice				Pointing or using threatening nonverbals			
Throwing items				Crying or talking to themselves			

**STAMP:** A majority of individuals experiencing acute agitation will demonstrate one or more observable behaviors. STAMP is an easy to remember acronym that you can use to spot someone who may need additional assistance.

- S is for Staring and Eye Contact
- T is for Tone and Volume of Voice
- A is for Anxiety. This can look like pacing, fidgeting, or making repetitive actions
- M is for Mumbling. Slurred speech, talking to themselves,
- P is for Pacing, Rapid Movements or sporadic movements

## Non-Verbal De-Escalation Strategies

- Make smooth movements and avoid making sudden or jerky movements
- Provide and respect personal space. Allow at least 3 feet of space between you and the person
- Create a path to safety for you if you need to quickly leave the situation to safety.
- Make eye contact, but do not maintain eye contact for long periods of time
- Acknowledge information being given to you by nodding or providing affirmative gestures.
- If you are having a hard time hearing the individual, see if it's possible to move them to a quieter but not isolated space.
- Allow time for silence after the de-escalation.
- Unless your job responsibilities require you to, avoid touching the escalated person.

## Verbal Reasoning and Questioning De-Escalation Techniques

- Speak calmly and clearly.
- If the escalated person is speaking loudly, try to use a lower non-judgmental tone.
- Use your observations to ask open ended questions. "The clinic can be a new experience. How are you doing?"
- Ask questions that address feelings and facts. "I notice that this is your first time here. How are you feeling?" If they say: "I'm really scared of getting my blood drawn." You can say, "I can understand that. Getting your blood drawn is not a pleasant experience, but you are in good hands here."
- Try to use statements with 5 words. Using fewer words makes you easier to understand for someone who may be having problems comprehending.

## Additional De-Escalation Strategies and Tips

Several organizations have established tips or strategies for de-escalating stressful situations. We would like to highlight a few of those Tips and Strategies that we found helpful.

### 10 Top Strategies from the Crisis Prevention Institute

1. Be empathetic and non-judgmental
2. Respect personal space
3. Use non-threatening nonverbals
4. Keep your emotional brain in check
5. Focus on feelings
6. Ignore challenging questions
7. Set limits
8. Choose wisely on what you insist upon
9. Allow silence for reflection
10. Allow time for decisions

### CAF Model

1. Calm - Seek to defuse stress by responding calmly to the escalated community member
2. Assist - Listen to the request of the community member
3. Facilitate - Determine the best actions to assist them and communicate the next steps

## Additional Resources

VDH Workforce Development Team: [vdh.virginia.gov/workforce-development-team](https://vdh.virginia.gov/workforce-development-team)

VDH Workforce Wellness: [vdh.virginia.gov/workforce-wellness](https://vdh.virginia.gov/workforce-wellness)

DHRM State Employee Resources: [dhrm.virginia.gov/stateemployeeresources](https://dhrm.virginia.gov/stateemployeeresources)

DHRM Conflict Resolution Resources: [dhrm.virginia.gov/employment-dispute-resolution](https://dhrm.virginia.gov/employment-dispute-resolution)

# De-Escalation Scenarios

## Scenario 1: Phone Call

The Federal government has an extra cache of supplies that they want to provide to each state and local entity to assist in another COVID surge. As a local health district, you are tasked by the state to contact and distribute these surge supplies to your vulnerable adult and aging populations such as those living in care homes, skilled nursing facilities, and assisted living facilities. As you call one of your stakeholders who manages a senior care home, you notice that the administrator sounds agitated, curt, and short-tempered. As you explain why you are calling, expressing your intent to provide them assistance and distribute to them surge supplies, the administrator suddenly starts yelling at you. He raises his voice expressing frustration that the health district has never done anything to assist his care home, all they do is issue regulations and restrictions they need to follow. In an angry voice he asks you “what could you do to help us?! You haven’t helped us thus far. We don’t need your help?”

1. What are your initial steps as you try to de-escalate this situation?
2. Which de-escalation strategies would you be likely to use in your conversation with the administrator?
3. What are some things you could say based on our training to de-escalate the situation with the administrator?

## Scenario 2: Crowded Lobby

Your local health district just opened up its clinic and front doors to in-person clients again. As you walk in to work this morning, you notice a particularly crowded reception area. The security guard has not arrived yet. Your receptionist looks particularly on edge as you notice her gaze is directed at one client in the reception area that is pacing back and forth. You ask your receptionist when this individual arrived, and she says he’s been there since the doors opened this morning. You notice that it’s been at least one and half hours since he has been at the building.

1. What are your initial steps as you try to de-escalate this situation?
2. Which verbal and non-verbal de-escalation strategies would you be likely to use in this situation?
3. What are some things you could do or say based on our training to de-escalate the situation based on your office’s protocols and the training today?