Supporting Youth while providing strength-based, traumainformed supervision for crisis workers

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"When written in Chinese, the word 'crisis' is composed of two characters. One represents danger and the other represents opportunity."

What is a crisis?

A couple of definitions

- "an obstacle that is, for a time, insurmountable by the use of customary methods of problem solving. A
 period of disorganization ensues, a period of upset, during which many abortive attempts at a solution
 are made.
- "an upset in the steady state of the individual"
- A crisis is a situation that is caused by the individual's mental health disorder which results in a high level of stress or anxiety for the individual, persons providing care for the individual or public, that cannot be resolved by the available coping methods of the individual or by the efforts of those providing ordinary care or support to the individual.

Using Trauma-Informed Care

Sense of time	Extended Future	Days Hours	Hours Minutes	Minutes Seconds	Loss of Sense of Time
Primary Secondary Brain Areas	Neocortex Subcortex	Subcortex Limbic	Limbic Midbrain	Midbrain Brainstem	Brainstem Autonomic
Cognition	Abstract	Concrete	Emotional	Reactive	Reflexive
Mental State	CALM	ALERT	ALARM	FEAR	TERROR

Prevention

PREVENTION IS FOLLOWING THE CRISIS PLAN DEVELOPED BY THE TEAM TO HELP AVOID CRISIS SITUATIONS AND ALLOW YOUTH TO HAVE THE TOOLS NEEDED TO REACH THEIR GOALS.

To Prevent... Be Prepared! Ask yourself...

What situations have led to a crisis in the past?

What has worked to help reduce client's stress or to avoid a conflict in the first place?

What steps can I take to keep everyone calm and safe?

Whom can I call for support in crisis or help calm the situation?

What skills could I learn, practice and teach my client to reduce the impact of future crisis.

Do I have the crisis plan?

What can I do to reduce MY stress?

Have I used all available resources?

Warning Signs of a Crisis

Inability to cope with daily tasks

Rapid mood swings

Increased agitation

Displays abusive behavior

Experiencing psychosis

Isolation from school, family, friends, unexplained physical symptoms

Intervention

INTERVENTION: ASSISTING DURING A CRISIS SITUATION AND FOLLOWING THE CRISIS PLAN

Ask yourself...

Are you trying to control the individual?

OR

Are you working toward controlling the situation?

What is a crisis?

Trigger

Trigger

Individuals Perception

Emotional Distress

Lowered functioning when coping fails

Crisis Phase Crisis Cycle Protect, Listen, Engage Caregiver Response: Protect using the least amount of interaction necessary for safety Escalation Higher Phase Engage, Protect, Listen Engage to cue a replacement behavior Caregiver Response: De-escalation phase Engage, Listen, Protect **Escalation Lower Phase** Engage to structure the cooling off period Engage, Listen, Protect Caregiver Response: Engage to offer options from baseline Stabilization Phase Stimulus or Listen, Engage, Protect Caregiver Response: Trigger Phase Listen, Engage, Protect Listen to actively listen

Caregiver Response: Listen to identify and remove the stimulus

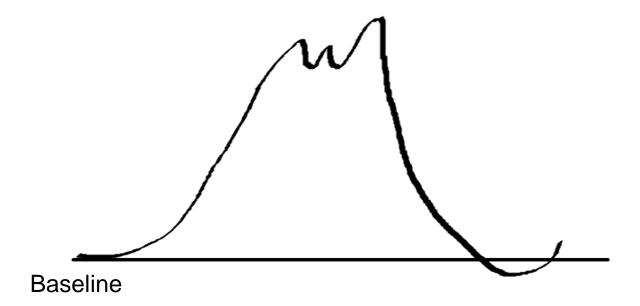
Baseline Phase

Engage, Listen, Protect Caregiver Response: Engage to support them in what they are doing

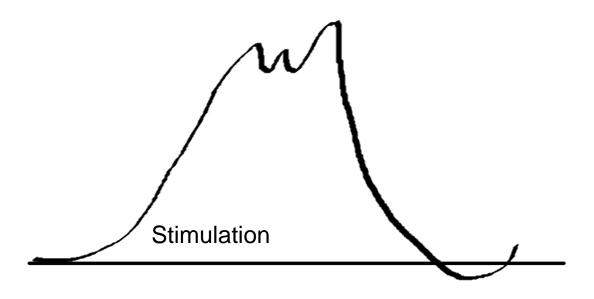
Post-Crisis Drain Phase

Listen, Protect, Engage Caregiver Response: Listen to observe and support

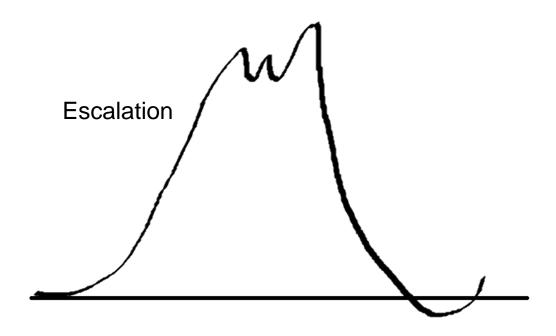
Normal/Baseline State



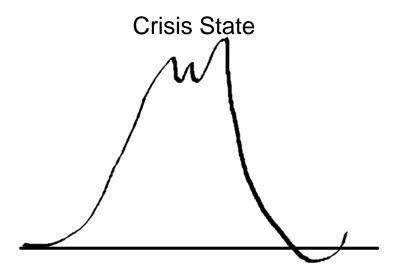
Stimulation



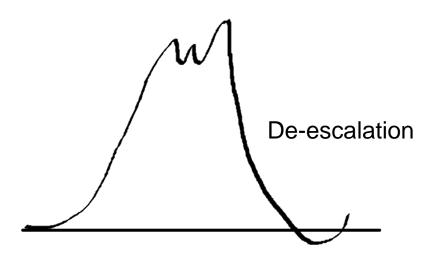
Escalation



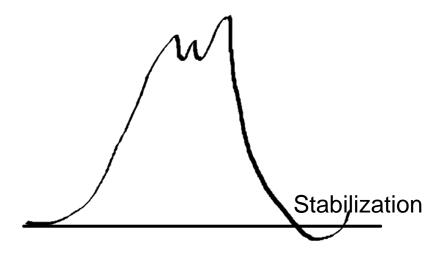
Crisis State



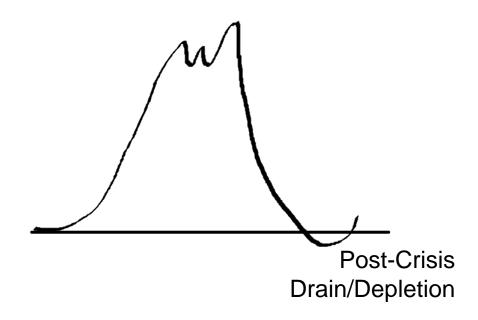
De-escalation



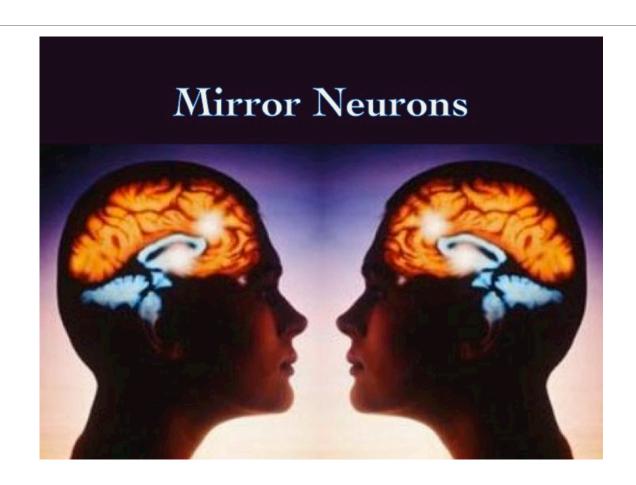
Stabilization



Post-Crisis Drain or Depletion



Why is our response so important?



De-escalation Tips & Techniques

Tips:

Avoid reacting to the youth

Don't argue or try to reason

Express support and concern

Gently announce actions before initiating them

Use the persons name

Walk with me

Keep stimulation level low

Move slowly

Avoid touching anyone, especially without permission

Ask how you can help

Techniques:

Limit options to two – automatic response is to

choose

Crisis Kit

Deep breathing

Personal Space

Communication Techniques

ABC Model

Three Step Assertive Intervention

Crisis Kit

What can help you in a crisis?

- Keeping contact information for team members easily accessible.
- Having the crisis plan with you for each client.
- Snacks, bottles of water, and towel.
- Games, Music, Books
- Markers or crayons and paper

Depending on the outcome of a crisis, sometimes a client needs to be removed from the situation and can take time. Discuss what could help your client in a crisis or after, to stay calm.

Autogenic/Deep Breathing

Take slow, deep breaths

- 1) Breathe in for a four-count through your nose,
- Pause for a four-count.
- 3) Exhale for a four-count through your mouth,
- 4) Pause for a four-count.

Repeat this several times. Doing this exercise will help supply oxygen to your system, which will help you calm down.

Personal Space

People with mental health diagnoses often develop and altered sense of personal space. They require more space than usual to feel comfortable and feel intensely threatened when other people close in on them with no warning.

Invasion or encroachment of personal space tends to heighten or escalate anxiety

Personal space in American culture is about 3 feet

Do not touch a hostile person – they might interpret this as an aggressive action

Announce intention: "I need some space, so I am going to back up."

Verbal Techniques

Paraphrasing: put into your own words what the other person has said. Do this by using fewer words and providing facts.

Reflective Listening: focus on the feeling or emotion of what has been said. State back what you hear and see, taking note of nonverbal communication as well and the words that are spoken.

Summarizing: Sum up what the other person has said, Do this after a person has spoken for a long period of time.

Questioning: ask open-ended questions to clarify what has been said.

I-Statements: Start sentences with "I." Take ownership of what has been said and state back what you heard.

• Ex. "I heard you say... is that correct?"

ABC Model

A: Developing and Maintaining Rapport: Follow the Client

 Use of basic attending skills (open-ended questioning, paraphrasing, reflecting and summarizing)

B: Identify the Nature of the Crisis and Therapeutic Intervention

Identify trigger, explore thoughts, emotional distress and impairments in functioning

C: Coping Strategies

Explore what they want to do now to cope, past coping and options

Three Step Assertive Intervention

- Empathy statement: A statement that lets the youth know that you understand where he or she is coming from and how he or she likely feels.
- 2. <u>Conflict statement</u>: A statement that describes to the youth that you have a conflict that needs to be addressed.
- 3. <u>Action statement</u>: A statement that lets the youth know what you want them to do. This statement can be in the form of a request.

Practice

Supervision of Crisis Workers

Interviewing and hiring process

Training

Direct Supervision

- Crisis Planning
- Clinical Supervision (with staff therapist)

On call supervisors

County Resources as support (MUTT, Adult Crisis Mobile)

Know mandated reporting requirements

Resources

Crisis Prevention Institute (CPI) www.crisisprevention.com

Prevent Suicide Wisconsin www.preventsuicidewi.org

Mental Health of America www.mhawisconsin.org

National Alliance on Mental Illness (NAMI) www.nami.org

Local County Programs (Behavioral Health Division)

Questions or Comments

Contact Me!

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