



Dealing with Crisis Situations Involving Clients

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with the UMOS Client Assistance Program Staff --

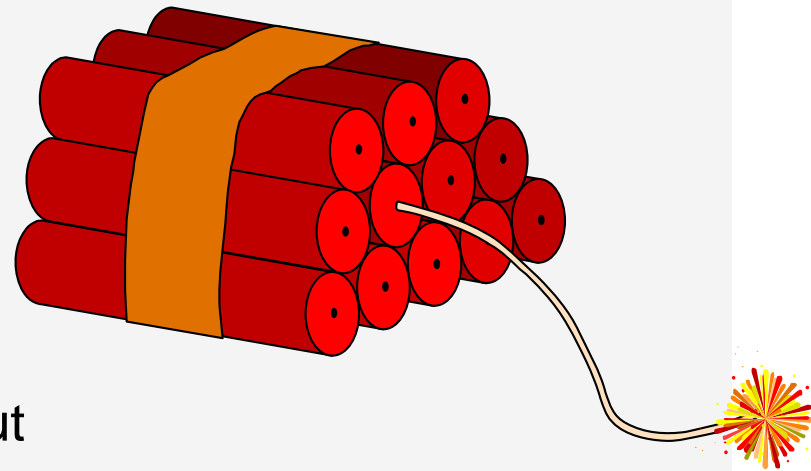
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C.A.P. Specialists

Crisis Equals Emergency!

- **Crisis:** A crucial or decisive point or situation; an unstable condition; an emotionally stressful event or a traumatic change in a person's life; a point when conflict reaches its highest tension and must be resolved...

Situations: People who are very upset and “going off”; acting out aggressively in a verbal or physical manner; those who pose a threat to self or others; a suicidal person; domestic violence circumstances.



Crisis Development Behavior Levels

(Source: The Crisis Prevention Institute Inc. Crisis Development Model)

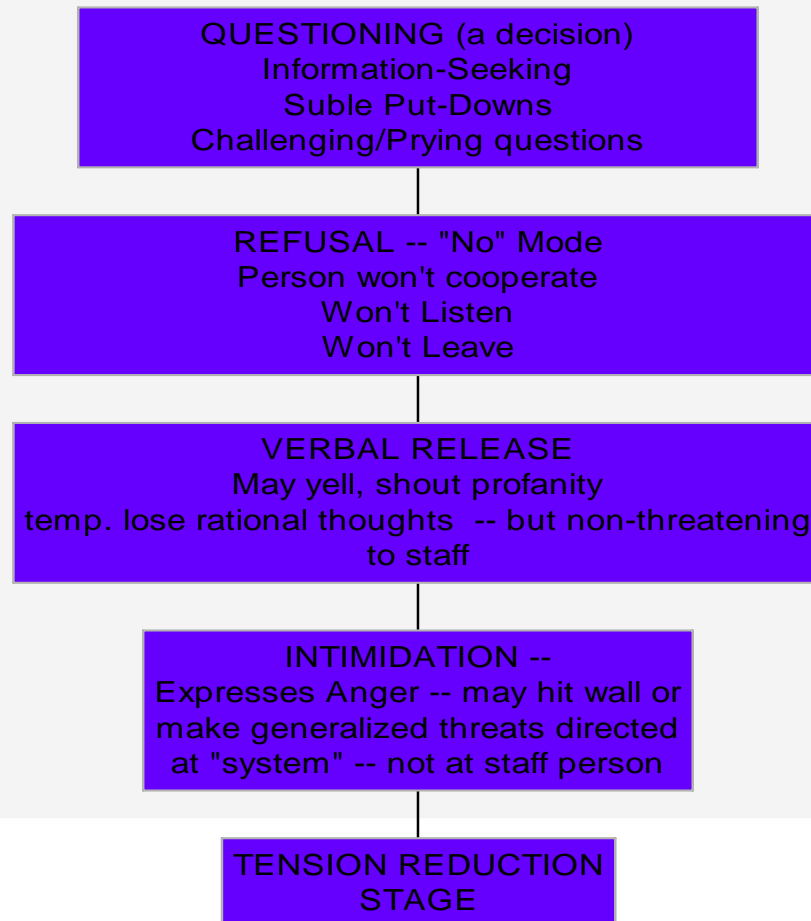
- **Anxiety:** a noticeable change or increase in behavior -- hyper, increased volume in speech, pacing, restless, frustrated
- **Defensiveness:** people become verbally belligerent -- cursing, verbally irrational, may make threats as way to get attention/ use negative attempts to get their needs met.
(All threats should be taken seriously, even though people often spout words as a protective/defensive strategy)
- **Acting Out (Person):** When person becomes potential danger to self and others
- **Tension Reduction:** Where there is a clear dip in energy; the negativity has been released, breathing slows down, fists become unclenched, stress diminishes.



VERBAL ESCALATION CONTINUUM

(Based on the CPI Model expansion of the Defensive Stage of Crisis)

Example: When a W-2 Client Becomes Verbally Aggressive
due to Anger, Frustration about a Staff Decision
or Consequences related to Non-compliance



HELPFUL STAFF ATTITUDES

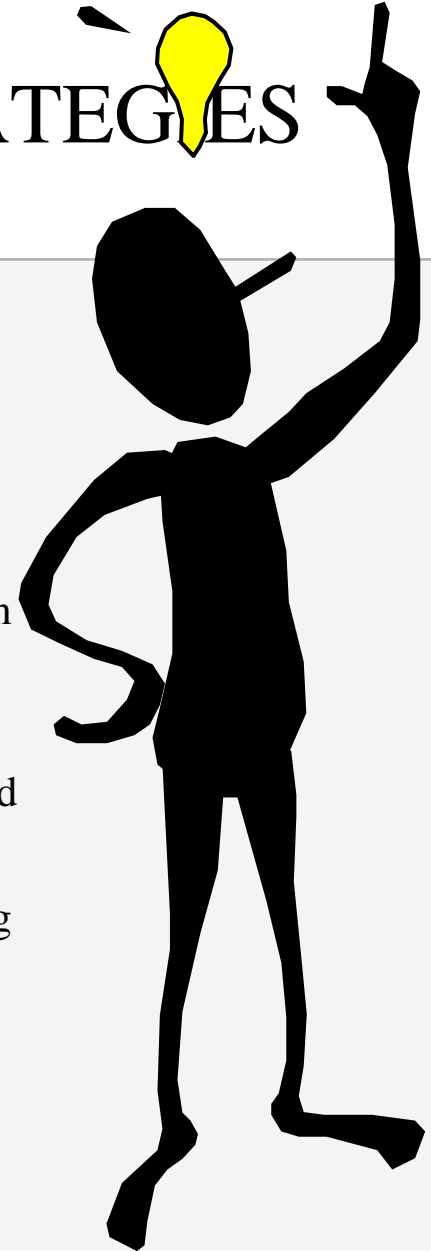
POINTS TO PONDER

- **PRECIPITATING FACTORS** are defined as “**THE REAL CAUSE OF A CRISIS.**”
- If Possible, **Explore Possible Concerns** with Client: Did she have a previous conflict? Disappointment? Feeling ashamed due to a relapse? Embarrassment? Experienced a loss of family? Difficulty Adjusting to Change of a Routine? Miscommunication?
- **Common Problems to Avoid: UNDERREACTING OR OVERREACTING**
- **Guiding Your Interventions: SAFETY AND CARE**
- *Your Assistance is intended for Temporary Relief / Stability/ Restoring Balance in a Crisis Situation -- You're not expected to become a professional therapist on the spot. Make a referral to the UMOS Client Assistance Program (C.A.P.) if needed*

EFFECTIVE STAFF RESPONSES

- ***Client Showing Anxiety*** - Active listening; supportive by opening way for person to talk and to be heard. Give a legitimate and direct answer to client's questions
- ***Client Being Defensive*** -- Ask Questions about ct's feelings. Give directives -- "Let's take a time out until you cool down"; be clear, simple, respectful. Set limits; state positive options before stating negative options
- ***Client Acting Out (w/o Threats)*** -- Remind person of consequences of actions.
 - With Physical Threats*** -- leave immediate environment; inform other staff of situation call for help from security (or police if warranted) (Note: in residential facilities, staff are trained to use non-violent restraints)
- ***Tension Reduction*** -- Reopen lines of communication; establish therapeutic rapport; bring closure to situation.

CRISIS INTERVENTION STRATEGIES



- Remain Professional -- be a calming influence
- Use the client's name when talking to him/ her
- Repeat what client said --Clarify for understanding
- Don't use any threats -- they're empty promises
- Be conscious of non-verbal communication
- Use a team approach if needed -- ask a colleague to sit in or be available to help if you need support
- Don't take client's behavior personally (many clients are angry at system; they may feel they have legitimate anger and complaints)
- Set limits/ boundaries for yourself(including maintaining comfortable personal space during a confrontation; insisting that you will not tolerate abuse directed at you; promoting mutual respect)
- **AVOID A POWER STRUGGLE** -- Prevent burnout; decide not to engage in unproductive debates

DEALING WITH A SUICIDAL PERSON

(Call C.A.P. or Other Sources Listed in “Guide To Mental Health Resources in Milwaukee County” published by Mental Health Association in M C -- see handout with phone numbers)

It should never be taken lightly when a person tells you he wants to kill himself.....

- **Show concern, empathic listening and ask a loaded question: HOW? -- to find out if the person has a plan in place.**
- ***If YES* -- Make arrangements for the person to see or talk to a Crisis Counselor immediately; take him/her to the appointment if you have to.**
- ***IF NO* -- and if you have good reason to believe the person does not plan to act right away, ASK him/her to sign an AGREEMENT with you that they will not take their lives. Write up the “Contract” on the spot -- even ask him/her to help you choose the wording. Have client sign it and give him original/ make copy for you AND PLAN a follow-up Appointment ASAP with a counselor.**

Protocol: Domestic Violence Situations

(For on the spot information and guidance, staff can call the Wisconsin Coalition Against Domestic Violence at (608) 255-0539 or the Local Hotline: 933-2722)

IF A CLIENT IS IN YOUR OFFICE AND SAYS SHE CAN'T GO HOME:

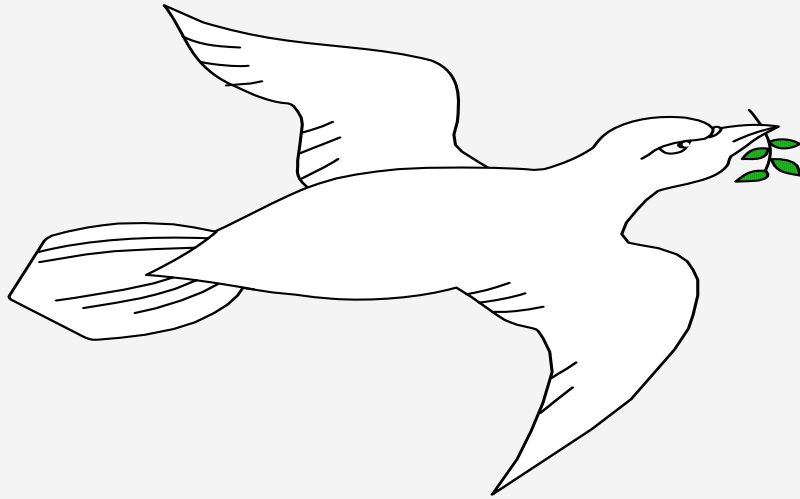
- Call C.A.P. or Special Projects staff to consult in emergency situations.
- If UMOS staff not available to help, provide client opportunity to call the local Domestic Violence Hotline for safety planning.
- Respect the fact that client may want a private place to talk.
- Let him/her know you're concerned about her safety.

Helpful Attitudes from Staff:

- Be available if the hotline worker needs assistance or information from you.
- If client will go to a shelter, help with some arrangements (such as making calls to get her children to the homes of relatives)
- Do not pressure client. (She may need more time to absorb information and options).
- Treat the client with respect. Be non-judgmental. Do not blame her for the abuse itself.

EMPATHIC LISTENING

for all types of Crisis Situations



C = Concentrate

A = Acknowledge

R = Reflect/ Respond

E = Empathize

Empathizing doesn't mean feeling sorry for someone or even agreeing -- it's simply an effort to show respect for the person and his/her situation

- Don't fake attention (Give your undivided attention to client for a reasonable amount of time)
- Be non-judgmental
- Use silence effectively
- Listen to both what is said and how it's said (paraverbal communication refers to tone, volume, cadence -- or rate -- at which someone speaks)
- Reflect and Clarify ("Let me make sure I understand what you're saying")
- C.A.R.E.

GUIDELINES: COPING and LEARNING

(based loosely on CPI approach)

CHALLENGES = LEARNING=PROFESSIONAL GROWTH

C = You get to practice Self-CONTROL

O = You can improve your ability to ORIENT yourself to assessing the facts of a situation or event -- the Who, What, When Where, Why it happened --rather than allow biases/ emotions to color all perceptions

P = You can notice PATTERNS to your own reactions -- and whether certain clients or client behaviors push buttons

I = You can learn how to INVESTIGATE alternatives for problem solving and how to work with people effectively in an emergency

N = You can learn to NEGOTIATE options for dealing with stress and help client see better choices other than acting out

G = You can GAIN integrity from learning to GIVE clients consequences based on logical and natural outcomes rather than based on your position of authority to exert control over client

For Your Own Mental Health...

**WHEN YOU MANAGE A
CRISIS WITH CLIENTS
WELL, DON'T FORGET
TO CONGRATULATE
YOURSELF FOR DOING
A GOOD JOB -- even if
no one else notices!**

