

Addiction and Mental Health

10 Domains of De-escalation

10 Domains of De-escalation to Prevent Behavioural Emergencies

1. Respect personal space	Respect the patient's and your own personal space.
2. Do not be provocative	Avoid escalation by making sure your body language is congruent with what you are saying.
3. Establish verbal contact	Only one person should verbally interact with the patient. Introduce yourself, provide orientation and reassurance.
4. Be concise	Use simple vocabulary and repeat your message to the patient until it is heard.
5. Identify wants and feelings	Pay attention to both what the patient is saying and their body language.
6. Listen closely to what the patient is saying	Use active listening
7. Agree or agree to disagree	Find something about the patient's position that you can agree with.
8. Set clear limits	Establish limits in a reasonable and respectful manner.
9. Offer choices and optimism	Choice is a source of empowerment for a patient who feels physical violence is a necessary response.
10. Debrief the patient and staff	Helps to restore the therapeutic relationship and alleviate the traumatic nature of the intervention.

This information comes from the Depression and Bipolar Support Alliance at: [https://www.researchgate.net/publication/294892249 Assessment and management of agitation in psychiatry Expert consensus](https://www.researchgate.net/publication/294892249_Assessment_and_management_of_agitation_in_psychiatry_Expert_consensus)

Promoting Safety: Least Restraint Use

Comprehensive Assessment	<ul style="list-style-type: none"> • What is the reason for the restraint? • Initiate the assessment by the interdisciplinary team.
Analyze the Assessment	<ul style="list-style-type: none"> • Review the case with the interdisciplinary team.
Reason for the Restraint	Alternative Options
➤ Medical problems	<ul style="list-style-type: none"> • Regularly attend to needs: <ul style="list-style-type: none"> ○ Pain ○ Toileting ○ Nutrition ○ Hydration ○ Comfort ○ Sleep
➤ Unmet care needs	<ul style="list-style-type: none"> • Frequent assessment of need for therapy/treatment
➤ Agitated patient	<ul style="list-style-type: none"> • Reassurance and calm approach • Consider unmet needs • Have family/friends visit
➤ Falls	<ul style="list-style-type: none"> • Determine the cause(s) of the fall and initiate management plan
Planning	<ul style="list-style-type: none"> • Develop individualized plan of care
Documentation/Evaluation	<ul style="list-style-type: none"> • Document: <ul style="list-style-type: none"> ○ Team assessment and care plan ○ Implementation of care plan ○ Alternative interventions attempted ○ Adherence to restraint use protocol/policy
Debriefing	<ul style="list-style-type: none"> • Patient • Staff