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Nonviolent crisis intervention training manual

Target group: Staff working in child welfare and other human services institutions The non-violent crisis intervention® training programme is a behavioural management system for organisations committed to care and services in a respectful, safe environment. The training provides a basis for structuring prevention and intervention approaches based on a philosophy of providing the best possible care, well-being, safety and security for staff and those for whom they are responsible, even in crisis situations. Strategies taught in the program provide employees and/or staff teams with a decision-making and troubleshooting framework to prevent, de-escalate, and respond safely to disruptive or offensive behavior. The program philosophy to promote the best care, well-being, safety and securitySme extends throughout the continuum of interventions needed in working to reduce or eliminate restraint use. The programme focuses on the serious issue of physical intervention by carefully assessing the risks and evaluating what may constitute a last resort. The objectives of the nonviolent crisis intervention® Training Program are: Teach employees how to defuse potentially risky behavior before an incident escalates into a crisis situation Reduce the risk of injury to staff and those served by reducing the number of physical interventionsContenture among staff by establishing a common languageInvent confidence of staff to intervene both verbal and physicalAlviate the stress and anxiety of staff related to confusion or uncertainty in crisis momentsHelp employees feel safer at workMinimizing the risk of possible liabilityImprove retention of staff by providing the skills necessary to manage difficult situationsHelp an organization comply with legal mandates and regulations/accreditation guidelinesCreate and maintain a safe , caring, and respectful environment for the staff and the servant help an organization demonstrate its commitment and contribution to a safer community The essential components of non-violent crisis intervention® Training Program include : The verbal and physical interventions described in the training program are intended for use with persons experiencing a moment of crisis. The techniques are not intended to be used as therapy. The curriculum as mentioned below: Introductions/ Pretest Sets the scope of the program while organizing the experiences of staff during moments of crisis. Professional and personal values of the staff are linked the purpose of the programme, the concepts and approaches that will be taught. Unit 1: CPI Crisis Development ModelSM Provides a fundamental model of nonviolent crisis intervention® training to organize employees who think about how crisis situations develop. Introduces the concept of an integrated experience to illustrate the importance of staff different behaviours. Unit 2: Non-verbal behavior raises awareness of non-verbal communication and how it can positively or negatively affect an individual's behavior. Unit 3: Paraverbal Communication Explores the meaning of how messages are transmitted by taking into account the vocal part of speech. Showing how you say what you say can affect the recipient's perception of the message. Unit 4: Verbal Intervention Investigates common verbal behavior within the second level of the CPI Crisis Development ModelSM. Highlights verbal intervention and empathetic listening approaches that can help de-escalate a situation and slow down an individual's behavior. Unit 5: Precipitating factors, rational detachment, integrated experience examines backgrounds that can influence behavior while examining how the attitudes and actions of the staff can affect the person in crisis. Unit 6: Staff Anxiety and Anxiety Explores the reality of staff anxiety and anxiety and what contributes to productive responses of staff during crisis situations. Unit 7: Decision-making Organizes thinking about the risks associated with different behaviors, encouraging critical analysis and rational reasoning in response decisions. Unit 8: Physical interventions — Decoupling skills introduces principle-based skills to respond to different levels of physical risk behavior. Unit 9: Physical Interventions — Holding Skills Examines the Risks of Restraint Use. Expands after learning from Unit 8 and explores progressive team responses to physical risk behavior when a restrictive intervention is necessary for safety. Explores decision-making to stop the use of restraint. Unit 10: Postvention Provides a framework for a debriefing process aimed at establishing therapeutic report once an individual reaches Stress Reduction. Focuses on emotions, backgrounds, patterns and behaviors associated with the crisis to avoid inflaming another crisis. Posttest/Evaluation Assesses learning results and collects feedback through course evaluations. This program is not a customer-specific intervention, but a full-system approach that focuses on the entire staff. Recommended duration: The program includes strategies for staff to use on a permanent basis to prevent or intervene in response to challenging behaviors. Delivery Settings This program is usually run in a (n): Community Daily Living SettingFoster/Kinship CareHospitalOutpatient ClinicCommunity-based Agency/Organization/ProviderGroup of Residential CareJustice Setting (Juvenile Detention, Prison, Prison, Courtroom, etc.) School setting day care, day treatment programmes, etc.) Homework This program does not include a homework component. Languages Nonviolent Crisis Intervention® Training Program has materials available in languages other than English: Arabic, Braille, French, German, Inuktitut, Italian, Japanese, Spanish, Turkish For about what material is available in these languages, check the program's website or contact the program representative (contact details are at the bottom of this page). Resources needed to implement program The typical resources for the implementation of the program are: Staff should be trained in techniques (see training section for more details). Techniques can be run anywhere, no additional space requirements or resources are required. The program is open to all employees, regardless of their degree, who work within a Certified Instructor's Base of Employment. Education and Training Resources There is a manual that describes how to deliver this program, and there is training available for this program. Training Contact: Bob Cozad, Director of Onsite Trainingbozad@crisisprevention.comphone: (877) 877-5389 Training is obtained: The program is taught using a train-the-trainer model. Individuals from organizations interested in using the program send potential instructors to be certified during a four-day Instructor Certification Program. CPI offers more than 300 regularly scheduled courses per year in cities around the world. Training is also carried out on site and adapted for specific target groups. The program's availability is constantly updated on www.crisisprevention.com. Number of days/hours: One-day introductory seminar:Learn to organize your thinking on how behavior escalates and how to respond appropriately during moments of chaos. Two-day comprehensive workshop: Build on the content of the introductory seminar by strengthening preventive techniques and practicing the principles of unsuccessful physical intervention. Four-day instructor certification program: Gain the skills and confidence to teach the program to your facility's staff. Instructor Certification is the most important choice of most organizations. The certified instructor would then in turn be able to deliver the program to others within the organization in a format that is usually between 8-12 hours over one or two days. They would follow these guidelines when training staff at their organization: Only active certified instructors certified by CPI learn the program. Only authorized participants from the Certified Instructor's Base of Employment attend the program. No more than three Certified Instructors team learn the same program. Only original CPI training materials are used. Units I – VII are adequately covered prior to teaching physical interventions. Only CPI's Classroom Models are used without replacements for external physical techniques. All units of the program taught in order. Due Care is provided to the participants by following the Procedural Safety Overview on page 1 – 2 of the Instructor Manual.Adequate space is used for training. (A minimum of 1500 square metres is recommended for 15 – 25 participants.) Each participant uses a program training workbook. Class Class may not exceed 40 participants. An electronic presentation and other training tools that instructors can choose to use with the program are available at crisisprevention.com.The program is best performed using an ongoing training process, and as such, outside of initial training and formal refresher, it is recommended that certified instructors implement a training cycle that includes situational applications, policy discussions, assessments, practices, and rehearsals.Organizations that use the training program have the ability to implement the course in a mixed learning version (partially through the computer, in part through classroom) version. The blended learning version allows staff to learn many of the basic elements of the program from the comfort of their computers outside a classroom over the Internet, and then learn how to apply the information in a classroom environment. Additional resources: There are currently additional qualified resources for training: All training must be carried out through the basics of the certified instructor of employment; therefore, the only source of training for organizations without a currently active Certified Instructor is via CPI. Jonikas, J., Cook, J., Rosen, C., Laris, A., & Kim, J. (2004). A program to reduce the use of physical restraint in psychiatric inpatient facilities. *Psychiatric services*, 55, 818-820. Type of study: A group pretest/posttest design Number of participants: 227 Population: Age - 12-17 years Race/Ethnicity - 62% African American (as yet unspecified) Sex - 66% Female and 44% male status - Participants were adolescents in an adolescent psychiatric ward with a diagnosis of severe depression or other depressive disorders, adjustment disorders, behavioral disorders, schizophrenia or psychotic disorders. Location/Institution: Adolescent Psychiatric Unit in a University Hospital Summary: (To include comparison groups, results, measures, notable limitations) The study evaluated whether training staff in crisis decalation and nonviolent intervention (Nonviolent Crisis Intervention® Training Program) would reduce the self-reported stress triggers and personal crisis management strategies of adolescent patients. Staff studied an extensive training manual, watched a 90-minute training video of a seclusion and reduction program, and participated in a one-day training session. Employees conducted brief interviews at intake or within the first 24 hours of admission to provoke patient crisis triggers and to determine de-escalation strategies. Patients' restraint histories along with their medication preferences. Each plan was revised weekly. The adolescent unit experienced a 48 percent drop in restraint a quarter after training occurred and a 98 percent drop two quarters after training and remained low throughout last two quarters of the year. The primary limitation is the lack of a control group. Length of follow-up after intake: 1 year. Ryan, J.B., Peterson, R.L., Tetreault, G., & Van der Hagen, E. (2007). Reducing seclusion time out and restraint procedures with at-risk youth. *Journal of At-Risk Issues*, 13, 7-12. Type of study: A group pretest/posttest design Number of participants: 42 Population: Age - 7-15 years Race/Ethnicity - 37 Caucasian, 3 American Indian, and 2 African American Gender - 40 Male and 2 Female Status - Participants were students from surrounding public school districts and a local residential facility on both a short- and long-term basis due to inappropriate behavior. Location/Institution: Minnesota Public Day School Summary: (To compare groups, results, measures, notable limitations) The purpose of this pilot study was to review the effects of professional staff training in crisis management (Nonviolent Crisis Intervention® Training Program) and de-technique escalations on the use of seclusion time-out and restraint procedures with at-risk students in a K-12 special day school. The measures used include a teacher's self-questionnaire, incident reports and staff surveys. The results showed that vocational training was effective in reducing (a) seclusion time-out procedures by more than a third (39.4%) (b) physical limitations (17.6%). This study also found employees were not initiating seclusion timeout procedures primarily for the reasons they were trained (for example, physical aggression), but for nonviolent behavior, such as leaving an assigned area and disrupting the classroom environment. Restrictions include the use of a convenience sample, lack of control group, and concerns about generalizability to other ethnic populations. Length of post-intervention follow-up: Unclear - training took place throughout the school year. Cpi. (2005). Instructor manual for the Nonviolent Crisis Intervention training program. Milwaukee, WI: Author. Robert D. Rettmann, MS EdWebsite: www.crisisprevention.com Email: rrettmann@crisisprevention.com Phone: (800) 558-8976 Date Research Evidence Last reviewed by CEBC: February 2015 Date Program Content Last reviewed by program staff: April 2016 Date Program Originally loaded at CEBC: January 2011 2011