

ATTACHMENT A DEFINITIONS

Anxiety—a change in typical behavior. A feeling of nervousness or unease. It is the first level in the *Crisis Development Model*SM.

Body Language—the postures, gestures, facial expressions, and movement used to communicate.

Classroom Model—demonstrating safety interventions in order to show the application of basic principles.

Communication Through Touch—a form of physical contact that expresses feelings or emotion.

COPING ModelSM—a debriefing tool that may be used with staff and individuals in care after a crisis event.

Crisis Development ModelSM—series of recognizable behavior levels an individual may go through in a crisis, and the related staff attitudes/approaches used to de-escalate distress behaviors.

Decision-Making MatrixSM—a tool for assessing risk behavior. The matrix helps you determine the safety intervention which meets the criteria of reasonable, proportionate to the risk, and least restrictive.

De-escalation—preventive interventions that help lessen potential conflict.

Defensive—protecting oneself from a real or perceived challenge. This is the second level in the *Crisis Development Model*SM where you may notice the person avoiding or challenging the situation.

Directive—providing clear direction or instruction. An approach to minimize escalation of a conflict by providing clear instruction. It is the recommended staff attitude/approach to an individual at the Defensive level.

Disengagement—the use of a safety intervention to gain a release from any holding situation while minimizing risk of pain or injury in situations in which the behavior has been assessed as a low, medium, or high risk to self or others.

Higher-Level Holding—restrictive intervention necessary to restrict a person's range of movement in relation to high-risk behavior as determined by a behavioral risk assessment. Higher-level holding is designed to restrict a person's ability to move away from staff and prevent the person being held from causing significant harm to self or others.

Integrated Experience—behavior influences behavior. It is the concept that illustrates how your attitudes and behaviors can impact someone in crisis and vice versa.

Likelihood—the chance that an event or behavior may occur.

Limit Setting—offering a person clear choices and clarifying boundaries of acceptable behavior.

Listening With Empathy—a way of listening and responding to another person that improves mutual understanding and trust.

Lower-Level Holding—restrictive intervention necessary to use as a guide or physical prompt or to provide minimal physical support to limit the person's range of movement in relation to low-risk behavior as determined by a behavioral risk assessment. Lower level holding does not limit a person's choice to move away from staff.

Medium-Level Holding—restrictive intervention necessary to limit the person's range of movement in relation to medium-risk behavior as determined by a behavioral risk assessment. Medium-level holding is designed to limit the person's ability to move away from staff and cause harm to self or others.

Opt-Out SequenceSM—an algorithm designed to assist staff in the assessment of risk behavior and decision making required during the use of restrictive interventions. The *Opt-Out Sequence*SM enables staff to reduce the duration of restrictive interventions, minimize the potential adverse outcomes (risk) associated with such approaches, and re-establish Therapeutic Rapport.

Paraverbal Communication—the tone, volume, and rhythm of speech that all work together to express thoughts and feelings. It relates to the way you say things and does not include the words you use.

Position—where you are in relation to others.

Posture—ensure your posture remains nonthreatening, balanced, and relaxed.

Precipitating Factors—factors influencing a person’s behavior. These are internal and/or external causes of behavior over which you have little or no control.

Personal Space—the distance people prefer to maintain between themselves and others.

Proximity—managing the distance between yourself and another person.

Rational Detachment—recognizing the need to remain professional by managing your own behavior and attitude.

Restraint—a measure or condition that keeps someone or something under control or within limits that may include environmental and/or physical ways to manage a prevailing or perceived risk. Any physical hold or restraint utilized must be used as a last resort, and only when the specific danger that behavior/condition poses to self and/or others outweighs the risks of the hold or restraint. Staff should choose the least restrictive approach appropriate for the situation and constantly assess for the earliest safe opportunity to disengage.

Restraint-Related Positional Asphyxia—a fatal condition that occurs when the position of a person’s body interferes with respiration, and results in asphyxia or suffocation.

Risk Behavior—behavior that presents an imminent or immediate risk to self or others. It is the third level in the *Crisis Development Model*SM where a person impulsively or deliberately presents a physical risk.

Safety Interventions—non-restrictive and restrictive strategies to maximize safety and minimize harm.

Severity—the level of harm if the event or behavior does occur.

Strike—a weapon (body part or object) making contact with a target.

Supportive—an empathic, nonjudgmental approach. Attempt to alleviate anxiety by helping, understanding, or encouraging. It is the recommended staff attitude/approach to an individual at the Anxiety level.

Supportive StancesSM—managing your position, posture, and proximity in relation to the person in crisis.

Tension Reduction—decrease in physical and emotional energy. This is the fourth level in the *Crisis Development Model*SM where a person begins to return to a state of calm. Tension Reduction can happen after any levels of the *Crisis Development Model*SM.

Therapeutic Rapport—re-establish the relationship. Minimize the harm that may have occurred and address any physical or emotional needs of the person resulting from the crisis.

Verbal Escalation ContinuumSM—a model demonstrating a variety of defensive behaviors that are often seen when individuals are in the Defensive level of the *Crisis Development Model*SM. This model includes