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Nonviolent Crisis Intervention®
Training Program

A program focusing on the safe management of disruptive and assaultive behavior.
Due Care Rules for Participants

Maintaining Safety in the Nonviolent Crisis Intervention® Training Program

• I will respect other participants as peers.
• I am responsible for the safety of others with regard to my actions.
• I am responsible for gauging myself with regard to any past/current injuries and my comfort level with regard to any given technique. If I have any concerns, I will see my Instructor at a break.
• I will not engage in horseplay.
• I will not teach other techniques.
• In all role-plays/techniques, I will act only on my Instructor’s direction.
• I will cooperate, not compete.
• I will take time to warm up and stretch before performing any physical activity, and I will drink plenty of fluids throughout the day.
Due Care Rules for Participants

Maintaining Safety in the *Nonviolent Crisis Intervention®* Training Program

- I will be conscious of the space around me and always consider safety while practicing physical techniques. I must remember that there are others who are practicing near me.
- During physical exercises, any participant can ask to stop the activity at any time, for any reason. If, while practicing physical exercises, my partner asks me to stop the activity, I will take the request seriously and immediately discontinue the exercise.
- I will inform my Instructor prior to class of any injuries or limitations.
- I will report all injuries to my Instructor immediately.
Pre-Test

The *Nonviolent Crisis Intervention®* Training Program Pre-Test

[Image of the pre-test page]
<table>
<thead>
<tr>
<th>Crisis Development/ Behavior Levels</th>
<th>Staff Attitudes/ Approaches</th>
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Integrated Experience
## Unit I: The CPI Crisis Development Model<sup>SM</sup>

### Crisis Development/ Behavior Levels

<table>
<thead>
<tr>
<th>Staff Attitudes/ Approaches</th>
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<tbody>
<tr>
<td><strong>1. Anxiety</strong></td>
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</table>

### Definitions

**1. Anxiety:** A noticeable increase or change in behavior.  
Examples: pacing, finger drumming, wringing of hands, staring. (examples from group)
Definitions

1. Anxiety: A noticeable increase or change in behavior. Examples: pacing, finger drumming, wringing of hands, staring. (examples from group)

1. Supportive: An empathic, nonjudgmental approach attempting to alleviate anxiety. (examples from group)
## Unit I: The CPI  *Crisis Development Model*™

### Crisis Development/ Behavior Levels

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<td>1. Supportive</td>
</tr>
<tr>
<td>2. Defensive</td>
<td></td>
</tr>
</tbody>
</table>

### Definitions

2. **Defensive**: The beginning stage of loss of rationality. At this stage an individual often becomes belligerent and challenges authority. *(examples from group)*
### Crisis Development/ Behavior Levels

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<td>2. Defensive</td>
<td>2. Directive</td>
</tr>
</tbody>
</table>

### Definitions

2. **Defensive**: The beginning stage of loss of rationality. At this stage an individual often becomes belligerent and challenges authority. *(examples from group)*

2. **Directive**: An approach in which a staff member takes control of a potentially escalating situation. *(examples from group)*
## Unit I: The CPI Crisis Development Model℠

### Crisis Development/ Behavior Levels

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<tr>
<td><strong>3. Acting-Out Person</strong></td>
<td></td>
</tr>
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### Definitions

**3. Acting-Out Person:** The total loss of control, which often results in a physical acting-out episode. *(examples from group)*
## Unit I: The CPI  
*Crisis Development Model*®

### Crisis Development/ Behavior Levels

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<td>3. Acting-Out Person</td>
<td><strong>3. Nonviolent Physical Crisis Intervention</strong>®</td>
</tr>
</tbody>
</table>

### Definitions

3. **Acting-Out Person:** The total loss of control, which often results in a physical acting-out episode. *(examples from group)*

3. **Nonviolent Physical Crisis Intervention**®: Safe, nonharmful control and restraint positions used to safely control an individual until he can regain control of his behavior. These techniques should be utilized as a last resort. *(examples from group)*
Unit I: The CPI  *Crisis Development Model*™

Crisis Development/ Behavior Levels  
1. Anxiety  
2. Defensive  
3. Acting-Out Person  
4. **Tension Reduction**

Staff Attitudes/ Approaches  
1. Supportive  
2. Directive  
3. *Nonviolent Physical Crisis Intervention*™

**Definitions**

**4. Tension Reduction:** A decrease in physical and emotional energy that occurs after a person has acted out, characterized by the regaining of rationality. *(examples from group)*
Unit I: The CPI  Crisis Development Model™

Crisis Development/ Behavior Levels

1. Anxiety
2. Defensive
3. Acting-Out Person
4. Tension Reduction

Staff Attitudes/ Approaches

1. Supportive
2. Directive
3. Nonviolent Physical Crisis Intervention™
4. Therapeutic Rapport

Definitions

4. Tension Reduction: A decrease in physical and emotional energy that occurs after a person has acted out, characterized by the regaining of rationality. (examples from group)

4. Therapeutic Rapport: An approach used to re-establish communication with an individual who is experiencing Tension Reduction. (examples from group)
Unit II: Nonverbal Behavior

Proxemics and Kinesics
Exercises
Unit II: Nonverbal Behavior

**Proxemics** *(Personal space- an area surrounding the body that is considered an extension of self.)*

1.

2.

3.
Unit II: Nonverbal Behavior

Proxemics (Personal space— an area surrounding the body that is considered an extension of self.)

1. Personal space varies from individual to individual. On average, an individual’s personal space is 1.5 to 3 feet.

2.

3.
Unit II: Nonverbal Behavior

**Proxemics** (Personal space— an area surrounding the body that is considered an extension of self.)

1. Personal space varies from individual to individual. On average, an individual’s personal space is 1.5 to 3 feet.

2. **Factors that may affect the amount of personal space an individual needs may include gender, size, cultural background.** *(examples from group)*

3. 
Unit II: Nonverbal Behavior

**Proxemics** (Personal space—an area surrounding the body that is considered an extension of self.)

1. Personal space varies from individual to individual. On average, an individual’s personal space is 1.5 to 3 feet.

2. Factors that may affect the amount of personal space an individual needs may include gender, size, cultural background. *(examples from group)*

3. **Invasion of an individual’s personal space will increase that person’s anxiety.**
Unit II: Nonverbal Behavior

Kinesics  (Body language—the nonverbal message transmitted by the motion and posture of the body.)

1. 

2. 

3.
Unit II: Nonverbal Behavior

**Kinesics** (Body language—the nonverbal message transmitted by the motion and posture of the body.)

1. **Includes facial expressions, gestures, posture, and movements.**

2.

3.
Unit II: Nonverbal Behavior

Kinesics (Body language—the nonverbal message transmitted by the motion and posture of the body.)

1. Includes facial expressions, gestures, posture, and movements.

2. Discuss nonverbal signs of anxiety that participants have observed in the individuals in their care.

3.
Unit II: Nonverbal Behavior

Kinesics (Body language—the nonverbal message transmitted by the motion and posture of the body.)

1. Includes facial expressions, gestures, posture, and movements.

2. Discuss nonverbal signs of anxiety that participants have observed in the individuals in their care.

3. A staff member’s kinesic behavior can serve to escalate or de-escalate a given situation.
Unit II: Nonverbal Behavior

Reasons for using the CPI  *Supportive Stance*℠

1.

2.

3.
Unit II: Nonverbal Behavior

Reasons for using the CPI  *Supportive Stance*™

1. Communicates respect by honoring personal space.

2.

3.
Unit II: Nonverbal Behavior

Reasons for using the CPI  Supportive Stance℠

1. Communicates respect by honoring personal space.

2. Is nonthreatening/ nonchallenging.

3. 
Unit II: Nonverbal Behavior

Reasons for using the CPI  Supportive Stance<sup>SM</sup>

1. Communicates respect by honoring personal space.

2. Is nonthreatening/nonchallenging.

3. Contributes to staff’s personal safety/ offers an escape route.
Unit III: Paraverbal Communication

Paraverbal Communication
Exercise
Unit III: Paraverbal Communication

Paraverbal Communication

Definition: The vocal part of speech, excluding the actual words one uses.

Components:  

Suggested Approaches:

•

•

•

•
Unit III: Paraverbal Communication

Paraverbal Communication

Definition: The vocal part of speech, excluding the actual words one uses.

Components: Suggested Approaches:

- **Tone**
  - Try to avoid inflections of impatience, condescension, inattention, etc.
Unit III: Paraverbal Communication

Paraverbal Communication

Definition: The vocal part of speech, excluding the actual words one uses.

Components:  

Suggested Approaches:

- Tone

- Try to avoid inflections of impatience, condescension, inattention, etc.

- Volume

- Keep the volume appropriate for the distance and the situation.
Unit III: Paraverbal Communication

Paraverbal Communication

Definition: The vocal part of speech, excluding the actual words one uses.

Components:                  Suggested Approaches:

• Tone                     • Try to avoid inflections of impatience, condescension, inattention, etc.

• Volume                   • Keep the volume appropriate for the distance and the situation.

• Cadence                  • Deliver your message using an even rate and rhythm.
Unit IV: Verbal Intervention

CPI Verbal Escalation Continuum℠ Exercises
Unit IV: Verbal Intervention

The CPI Verbal Escalation Continuum$^{SM}$
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*\(^{SM}\)

1. Questioning
Unit IV: Verbal Intervention

The CPI Verbal Escalation Continuum

1. Questioning

   A. Information-seeking: a rational question seeking a rational response.

   B.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*℠

1. Questioning
   
   A. Information-seeking: a rational question seeking a rational response.
   
   B. Challenging: questioning authority or being evasive; attempting to draw staff into a power struggle.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*\textsuperscript{SM}

1. Questioning

   **Interventions:**
   A. *Information-seeking:* Give a rational response.

   B.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*\textsuperscript{SM}

1. Questioning

**Interventions:**
A. Information-seeking: Give a rational response.

B. Challenging: Stick to the topic (redirect); ignore the challenge (not the person); set limits if the individual persists.
Unit IV: Verbal Intervention

The CPI *Verbal Escalation Continuum*<sup>SM</sup>

2. Refusal
Unit IV: Verbal Intervention

The CPI  Verbal Escalation Continuum\textsuperscript{SM}

2. Refusal: Noncompliance; slight loss of rationalization.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*<sup>SM</sup>

2. **Refusal**: Noncompliance; slight loss of rationalization.

   **Interventions**: Set limits.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*™

3. Release
Unit IV: Verbal Intervention

The CPI *Verbal Escalation Continuum*\textsuperscript{SM}

3. Release: Verbal acting out; emotional outburst; loss of rationalization; blowing off steam; screaming; swearing; high-energy output.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*™

3. **Release**: Verbal acting out; emotional outburst; loss of rationalization; blowing off steam; screaming; swearing; high-energy output.

   **Interventions**: Allow the individual to let off steam, if possible. Remove audience or acting-out individual from the area.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*<sup>SM</sup>

4. Intimidation
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*℠

4. **Intimidation:** Individual is verbally and/or nonverbally threatening staff in some manner.
The CPI  *Verbal Escalation Continuum*<sup>SM</sup>

4. **Intimidation**: Individual is verbally and/or nonverbally threatening staff in some manner.

**Interventions**: Take all threats seriously. Seek assistance and wait for team to intervene, if possible. Avoid a hands-on approach.
Unit IV: Verbal Intervention

The CPI  *Verbal Escalation Continuum*\textsuperscript{SM}

5. Tension Reduction
The CPI  *Verbal Escalation Continuum*<sup>SM</sup>

5. **Tension Reduction:** A drop in energy, which occurs after every crisis situation, whether it is after low-level defensive behaviors or after intimidation.
Unit IV: Verbal Intervention

The CPI *Verbal Escalation Continuum*SM

5. **Tension Reduction**: A drop in energy, which occurs after every crisis situation, whether it is after low-level defensive behaviors or after intimidation.

**Interventions**: Establish Therapeutic Rapport—re-establish communication with the individual. This stage will be discussed in greater detail later in this course.
Unit IV: Verbal Intervention

Setting limits is the result of recognizing that you cannot force individuals to act appropriately. **When you set limits, offer a person choices and state the consequences of those choices, starting with the positive choice first.**
Unit IV: Verbal Intervention

Setting limits is the result of recognizing that you cannot force individuals to act appropriately. When you set limits, offer a person choices and state the consequences of those choices, starting with the positive choice first.

Keys to Setting Limits
Setting limits is the result of recognizing that you cannot force individuals to act appropriately. When you set limits, offer a person choices and state the consequences of those choices, starting with the positive choice first.

**Keys to Settings Limits**

- **Simple/Clear**
Setting limits is the result of recognizing that you cannot force individuals to act appropriately. When you set limits, offer a person choices and state the consequences of those choices, starting with the positive choice first.

**Keys to Settings Limits**

- Simple/Clear
- Reasonable
Unit IV: Verbal Intervention

Setting limits is the result of recognizing that you cannot force individuals to act appropriately. When you set limits, offer a person choices and state the consequences of those choices, starting with the positive choice first.

Keys to Setting Limits

• Simple/Clear

• Reasonable

• Enforceable
Unit IV: Verbal Intervention

Verbal Intervention Tips and Techniques

**DO**

1. Remain calm
2. Isolate the situation
3. Enforce limits
4. Listen
5. Be aware of nonverbals
6. Be consistent
7. *(examples from group)*

**DON'T**
Unit IV: Verbal Intervention

Verbal Intervention Tips and Techniques

**DO**
1. Remain calm
2. Isolate the situation
3. Enforce limits
4. Listen
5. Be aware of nonverbals
6. Be consistent
7. *(examples from group)*

**DON’T**
1. Overreact
2. Get in a power struggle
3. Make false promises
4. Fake attention
5. Be threatening
6. Use jargon *(it tends to confuse and frustrate)*
7. *(examples from group)*
Empathic Listening

Definition: **Empathic Listening is an active process to discern what a person is saying.**

1.

2.

3.

4.

5.
Empathic Listening

Definition: Empathic Listening is an active process to discern what a person is saying.

1. Be nonjudgmental.

2.

3.

4.

5.
Empathic Listening

Definition: Empathic Listening is an active process to discern what a person is saying.

1. Be nonjudgmental.

2. **Give undivided attention.**

3.

4.

5.
Empathic Listening

Definition: Empathic Listening is an active process to discern what a person is saying.

1. Be nonjudgmental.

2. Give undivided attention.

3. **Listen carefully to what the person is really saying (focus on feelings, not just facts).**

4.

5.
Unit IV: Verbal Intervention

Empathic Listening

Definition: Empathic Listening is an active process to discern what a person is saying.

1. Be nonjudgmental.

2. Give undivided attention.

3. Listen carefully to what the person is really saying (focus on feelings, not just facts).

4. **Allow silence for reflection.**

5.
Empathic Listening

Definition: Empathic Listening is an active process to discern what a person is saying.

1. Be nonjudgmental.
2. Give undivided attention.
3. Listen carefully to what the person is really saying (focus on feelings, not just facts).
4. Allow silence for reflection.
5. Use restatement to clarify messages.
Unit V: Precipitating Factors

Precipitating Factors,
Rational Detachment,
Integrated Experience

nonviolent crisis intervention
a CPI specialized offering
Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples
1.  2.  3.  4.  5.  6.  7.  8.

C. Understanding Precipitating Factors can help staff to:
1.  2.  3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. **Loss of personal power**
   5.
2. 
3. 
4. 
5. 
6. 
7. 
8.

C. Understanding Precipitating Factors can help staff to:

1.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. Loss of personal power
2. **Need to maintain self-esteem**
3. 
4. 
5. 
6. 
7. 
8. 

C. Understanding Precipitating Factors can help staff to:

1. 
2. 
3. 
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4.
5.
6.
7.
8.

C. Understanding Precipitating Factors can help staff to:

1.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4. Failure

C. Understanding Precipitating Factors can help staff to:

1.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4. Failure
5. Attention seeking
6.
7.
8.

C. Understanding Precipitating Factors can help staff to:

1.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples
1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4. Failure
5. Attention seeking
6. Displaced anger

C. Understanding Precipitating Factors can help staff to:
1.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4. Failure
5. Attention seeking
6. Displaced anger
7. Psychological/physiological causes

C. Understanding Precipitating Factors can help staff to:

1.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4. Failure
5. Attention seeking
6. Displaced anger
7. Psychological/physiological causes
8. (Examples from group)

C. Understanding Precipitating Factors can help staff to:
1.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples

1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4. Failure
5. Attention seeking
6. Displaced anger
7. Psychological/physiological causes
8. (Examples from group)

C. Understanding Precipitating Factors can help staff to:

1. Prevent acting-out behavior by being proactive.
2.
3.
Unit V: Precipitating Factors

Precipitating Factors
A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples
1. Loss of personal power
2. Need to maintain self-esteem
3. Fear
4. Failure
5. Attention seeking
6. Displaced anger
7. Psychological/physiological causes
8. (Examples from group)

C. Understanding Precipitating Factors can help staff to:
1. Prevent acting-out behavior by being proactive.
2. Recognize that we are seldom the cause of acting-out behavior.
3.
Unit V: Precipitating Factors

Precipitating Factors

A. Definition: Internal or external causes of an acting-out behavior over which a staff member has little or no control.

B. Examples
   1. Loss of personal power
   2. Need to maintain self-esteem
   3. Fear
   4. Failure
   5. Attention seeking
   6. Displaced anger
   7. Psychological/physiological causes
   8. (Examples from group)

C. Understanding Precipitating Factors can help staff to:
   1. Prevent acting-out behavior by being proactive.
   2. Recognize that we are seldom the cause of acting-out behavior.
   3. Avoid becoming a Precipitating Factor ourselves.
Rational Detachment

A. Definition: The ability to stay in control of one’s own behavior and not take acting-out behavior personally.

B. Key Points:

1.

2.

3.

4.
Unit V: Rational Detachment

Rational Detachment

A. Definition: The ability to stay in control of one’s own behavior and not take acting-out behavior personally.

B. Key Points:

1. Staff may not be able to control Precipitating Factors, but they can control their own responses to the acting-out behaviors that result.

2.

3.

4.
Unit V: Rational Detachment

Rational Detachment

A. Definition: The ability to stay in control of one’s own behavior and not take acting-out behavior personally.

B. Key Points:

1. Staff may not be able to control Precipitating Factors, but they can control their own responses to the acting-out behaviors that result.

2. **Maintain a professional attitude.**

3.

4.
Rational Detachment

A. Definition: The ability to stay in control of one’s own behavior and not take acting-out behavior personally.

B. Key Points:

1. Staff may not be able to control Precipitating Factors, but they can control their own responses to the acting-out behaviors that result.

2. Maintain a professional attitude.

3. Find positive outlets for the negative energy absorbed during a crisis.

4. 
Unit V: Rational Detachment

Rational Detachment

A. Definition: The ability to stay in control of one’s own behavior and not take acting-out behavior personally.

B. Key Points:

1. Staff may not be able to control Precipitating Factors, but they can control their own responses to the acting-out behaviors that result.

2. Maintain a professional attitude.

3. Find positive outlets for the negative energy absorbed during a crisis.

4. Examples from group on ways in which they rationally detach.
Unit V: Integrated Experience

Integrated Experience

A. Definition: The concept that behaviors and attitudes of staff impact the behaviors and attitudes of those in their care and vice versa.

B. Key Points:

1.

2.
Unit V: Integrated Experience

Integrated Experience

A. Definition: The concept that behaviors and attitudes of staff impact the behaviors and attitudes of those in their care and vice versa.

B. Key Points:

1. Individuals do not act out in a vacuum. Their behavior affects staff and vice versa.

2.
Unit V: Integrated Experience

Integrated Experience

A. Definition: The concept that behaviors and attitudes of staff impact the behaviors and attitudes of those in their care and vice versa.

B. Key Points:

1. Individuals do not act out in a vacuum. Their behavior affects staff and vice versa.

2. If we stay in control, we can display a positive action that will not escalate the person’s behavior:

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<td>c) Nonviolent Physical Crisis InterventionSM (+)</td>
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<td>d) Tension Reduction (-)</td>
<td>d) Therapeutic Rapport (+)</td>
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Unit VI: Staff Fear and Anxiety

Fear and Anxiety Exercise

nonviolent crisis intervention
a CPI specialized offering
Fear and anxiety are universal human emotions. Our response to them is both psychological and physiological.

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Unit VI: Staff Fear and Anxiety

Ways to control fear and anxiety:

1.

2.

3.

4.
Unit VI: Staff Fear and Anxiety

Ways to control fear and anxiety:

1. Understand what makes us afraid.

2.

3.

4.
Ways to control fear and anxiety:

1. Understand what makes us afraid.

2. Learn techniques to protect both ourselves and acting-out individuals in a crisis.

3.

4.
Unit VI: Staff Fear and Anxiety

Ways to control fear and anxiety:

1. Understand what makes us afraid.

2. Learn techniques to protect both ourselves and acting-out individuals in a crisis.

3. **Use a team approach- don’t respond alone.**

4.
Unit VI: Staff Fear and Anxiety

Ways to control fear and anxiety:

1. Understand what makes us afraid.

2. Learn techniques to protect both ourselves and acting-out individuals in a crisis.

3. Use a team approach—don’t respond alone.

4. Learn physical intervention techniques to manage acting-out individuals, if necessary.
Unit VII: CPI’s *Personal Safety Techniques*™
### Unit VII: CPI’s Personal Safety Techniques

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**Definitions**

**Strike:**

**Grab:**
### Definitions

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**Strike:** A weapon coming in contact with a target.
### Strike vs. Grab

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### Definitions

**Strike:** A weapon coming in contact with a target.

**Grab:**
Unit VII: CPI’s Personal Safety Techniques℠

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Definitions

**Strike:** A weapon coming in contact with a target.

**Grab:** The control or destruction of a part of one’s anatomy.
## Unit VII: CPI’s *Personal Safety Techniques*\textsuperscript{SM}

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### Definitions

**Strike:** A weapon coming in contact with a target.

**Grab:** The control or destruction of a part of one’s anatomy.
Unit VII: CPI’s *Personal Safety Techniques*™

**Principles of Personal Safety**

- **Strike**
  1. 
  2.

- **Grab**
  1. 
  2.
Unit VII: CPI’s *Personal Safety Techniques*\textsuperscript{SM}

**Principles of Personal Safety**

- **Strike**
  - *Block*

- **Grab**
  - 1.

2.

2.
Principles of Personal Safety

**Strike**
1. Block

**Grab**
1.

**2. Move**
2.
Unit VII: CPI’s *Personal Safety Techniques*™

Principles of Personal Safety

**Strike**
1. Block
2. Move

**Grab**
1.
2.
Principles of Personal Safety

Strike
1. Block
2. Move

Grab
1. Gain a physiological advantage by using:
   a. The weak point of the grab
   b. Leverage
   c. Momentum

2.
Principles of Personal Safety

Strike
1. Block
2. Move

Grab
1. Gain a physiological advantage by using:
   a. The weak point of the grab
   b. Leverage
   c. Momentum
2. Gain a psychological advantage by remaining in control of your behavior. Do this by:
   a. Staying calm
   b. Having a plan
   c. Using an element of surprise or distraction
Unit VII: CPI’s *Personal Safety Techniques*™

**Teaching Sequence:**

1. **Block**

2. **Kick**

3. **Grab Releases**
   - CPI One-Hand Wrist Grab Release
   - CPI Two-Hand Wrist Grab Release
   - CPI One-Hand Hair Pull Release
   - CPI Two-Hand Hair Pull Release
   - CPI Front Choke Release
   - CPI Back Choke Release
   - CPI Bite Release
Attention:

You are about to begin Unit VIII.
If you are teaching Units I - X, continue on.
If you are teaching Units I - VII and X, skip ahead to Unit X.
Unit VIII: Nonviolent Physical Crisis Intervention℠ and Team Intervention
Unit VIII: Nonviolent Physical Crisis Intervention™

Team Approach and Nonviolent Physical Crisis Intervention™

The Nonviolent Crisis Intervention® program is a safe, nonharmful behavior management system designed to help human service professionals provide for the best possible care and welfare of disruptive, assaltive, and out-of-control persons, even during their most violent moments.

In Nonviolent Crisis Intervention® training, the emphasis is always on your primary responsibility: the Care, Welfare, Safety, and Security™ of both those in your care and yourself. Physical restraint is recommended only when all less-restrictive methods of intervening have been exhausted, and when the individual presents a danger to self or others. Even when physical restraint is employed, it is used in such a way as to allow the person an opportunity to calm down at his own pace and to assist in the process of re-establishing Therapeutic Rapport.
Team Approach and *Nonviolent Physical Crisis Intervention* SM

Any physical intervention is potentially dangerous and should be looked at as an emergency response procedure. Risks involved with physical intervention can be minimized when staff members regularly practice and rehearse procedures for team intervention.

**Participant Reminder:**
Please review *Understanding the Risks of Restraints* information that begins on page 11s in the back of your Participant Workbook.
**Unit VIII: Nonviolent Physical Crisis Intervention**

*Nonviolent Physical Crisis Intervention* Teaching Sequence:

1. Block
2. Pull Through
3. CPI *Children’s Control Position* (basic position)
4. Half-Team Control (this is a practice step)
5. CPI *Team Control Position* (basic position)
6. CPI *Team Control Position* (Control Dynamics)
   a. Reduce upper body strength.
   b. Reduce lower body strength.
   c. Reduce mobility.
7. Team Intervention Lecture
8. CPI *Transport Position* (basic position)
9. CPI *Interim Control Position* (basic position)
Control Dynamics

1. Reduce upper body strength to control the arms and weapons by:
   a. 
   b. 
   c. 

2. Reduce lower body strength to control the back incline by:
   a. 

3. Reduce mobility by:
   a. 
   b.
Unit VIII: Nonviolent Physical Crisis Intervention℠

Control Dynamics

1. Reduce upper body strength to control the arms and weapons by:
   a. Turning palms up
   b. 
   c. 

2. Reduce lower body strength to control the back incline by:
   a. 

3. Reduce mobility by:
   a. 
   b. 
Unit VIII: Nonviolent Physical Crisis Intervention®

Control Dynamics

1. Reduce upper body strength to control the arms and weapons by:
   a. Turning palms up
   b. Raising arms above shoulders
   c.

2. Reduce lower body strength to control the back incline by:
   a.

3. Reduce mobility by:
   a.
   b.
Unit VIII: Nonviolent Physical Crisis Intervention®

Control Dynamics

1. Reduce upper body strength to control the arms and weapons by:
   a. Turning palms up
   b. Raising arms above shoulders
   c. Anchoring arm to your body (hip area)

2. Reduce lower body strength to control the back incline by:
   a.

3. Reduce mobility by:
   a.
   b.
Unit VIII: Nonviolent Physical Crisis Intervention℠

Control Dynamics

1. Reduce upper body strength to control the arms and weapons by:
   a. Turning palms up
   b. Raising arms above shoulders
   c. Anchoring arm to your body (hip area)

2. **Reduce lower body strength to control the back incline by:**
   a. Lowering shoulders below hips

3. Reduce mobility by:
   a.
   b.
Unit VIII: Nonviolent Physical Crisis Intervention™

Control Dynamics

1. Reduce upper body strength to control the arms and weapons by:
   a. Turning palms up
   b. Raising arms above shoulders
   c. Anchoring arm to your body (hip area)

2. Reduce lower body strength to control the back incline by:
   a. Lowering shoulders below hips

3. Reduce mobility by:
   a. Close body contact, moving hips close to individual’s body ("hugging in")
   b.
Unit VIII: Nonviolent Physical Crisis Intervention™

Control Dynamics

1. Reduce upper-body strength to control the arms and weapons by:
   a. Turning palms up
   b. Raising arms above shoulders
   c. Anchoring arm to your body (hip area)

2. Reduce lower-body strength to control the back incline by:
   a. Lowering shoulders below hips

3. Reduce mobility by:
   a. Close body contact, moving hips close to individual’s body (“hugging in”)
   b. Moving the individual’s center of gravity forward, bring him onto his toes (balls of his feet)
      This increases safety for staff and helps the acting-out person to feel more secure.
UNIT VIII: Team Intervention

Crisis Response Team
Topics for discussion:

• Who is your crisis response team?
UNIT VIII: Team Intervention

Crisis Response Team
Topics for discussion:

• Who is your crisis response team?

• How is your team summoned?
UNIT VIII: Team Intervention

Crisis Response Team

Topics for discussion:

• Who is your crisis response team?

• How is your team summoned?

• Other facility-specific crisis response team information.
Unit VIII: Team Intervention

Team Versus Solo Intervention

1. Safety—there is safety in numbers.

2.

3.
Unit VIII: Team Intervention

Team Versus Solo Intervention

1. Safety—there is safety in numbers.

2. Professionalism—team members can lend support to one another during a crisis situation.

3.
Unit VIII: Team Intervention

Team Versus Solo Intervention

1. Safety—there is safety in numbers.

2. Professionalism—team members can lend support to one another during a crisis situation.

3. Litigation—having another person on the scene provides a witness to the intervention.
Unit VIII: Team Intervention

Team Versus Solo Intervention

1. Safety–there is safety in numbers.

2. Professionalism–team members can lend support to one another during a crisis situation.

3. Litigation–having another person on the scene provides a witness to the intervention.

Team Leader

1. The first person on the scene.
# Unit VIII: Team Intervention

## Team Versus Solo Intervention

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Unit VIII: Team Intervention

Team Versus Solo Intervention

1. Safety—there is safety in numbers.
2. Professionalism—team members can lend support to one another during a crisis situation.
3. Litigation—having another person on the scene provides a witness to the intervention.

Team Leader

1. The first person on the scene.
2. A team member with confidence and competence in handling crisis situations.
3. A team member who has a rapport with the acting-out individual.
Unit VIII: Team Intervention

Team Leader Duties

1.

2.

3.

4.
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.

2.

3.

4.
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.

2. Plan the intervention.

3.

4.
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.

2. Plan the intervention.

3. Direct or cue the other team members.

4.
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.

2. Plan the intervention.

3. Direct or cue the other team members.

4. **Communicate with the acting-out individual.**
# Unit VIII: Team Intervention

## Team Leader Duties

1. Assess the situation.
2. Plan the intervention.
3. Direct or cue the other team members.
4. Communicate with the acting-out individual.

## Auxiliary Team Duties

1. 
2. 
3. 
4. 

---

Workbook page 20
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.
2. Plan the intervention.
3. Direct or cue the other team members.
4. Communicate with the acting-out individual.

Auxiliary Team Duties

1. Check:
   - Physical; psychological status of individual.
   - Safety of the environment.
2.
3.
4.
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.
2. Plan the intervention.
3. Direct or cue the other team members.
4. Communicate with the acting-out individual.

Auxiliary Team Duties

1. Check:
   - Physical; psychological status of individual.
   - Safety of the environment.
2. Address:
   - What needs to happen to de-escalate the situation?
   - Safety concerns?
   - Are Control Dynamics being utilized safely?
3. 
4.
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.
2. Plan the intervention.
3. Direct or cue the other team members.
4. Communicate with the acting-out individual.

Auxiliary Team Duties

1. Check:
   - Physical; psychological status of individual.
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2. Address:
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   - Safety concerns?
   - Are Control Dynamics being utilized safely?
3. Recognize:
   - Need for additional assistance.
   - Need to change intervention strategies.
4. 
Unit VIII: Team Intervention

Team Leader Duties

1. Assess the situation.
2. Plan the intervention.
3. Direct or cue the other team members.
4. Communicate with the acting-out individual.

Auxiliary Team Duties

1. Check:
   - Physical, psychological status of individual.
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2. Address:
   - What needs to happen to de-escalate the situation?
   - Safety concerns?
   - Are Control Dynamics being utilized safely?
3. Recognize:
   - Need for additional assistance.
   - Need to change intervention strategies.
4. Engage in:
   - Verbal de-escalation with acting-out individual.
   - Support to other team members.
Unit IX: Situational Role-Plays

Situational Role-Plays
Set-Up
Questions to think about while you are observing situational role-plays:

1. What levels of behavior did you observe? How did staff respond to those behaviors?
2. How was nonverbal communication used by the role-play participants? How was paraverbal communication used?
3. Did you see any signs of staff anxiety? If yes, what were they?
4. Did staff use a team approach? If so, how was the team summoned?
5. Was there a team leader? If so, who was it? How did you know who the team leader was?
6. Which levels of the CPI Verbal Escalation Continuum℠ did you observe? How did staff respond to each level?
7. Was the least restrictive form of intervention used?
8. Did the role-play reach the level of Tension Reduction? If so, how did you know it had reached that point?
Unit IX: Situational Role-Plays

Questions to think about while you are observing situational role-plays:

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4. Did staff use a team approach? If so, how was the team summoned?

5. Was there a team leader? If so, who was it? How did you know who the team leader was?

6. Which levels of the CPI Verbal Escalation ContinuumSM did you observe? How did staff respond to each level?

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**Unit IX: Situational Role-Plays**

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6. Which levels of the CPI Verbal Escalation ContinuumSM did you observe? How did staff respond to each level?
7. Was the least restrictive form of intervention used?
8. Did the role-play reach the level of Tension Reduction? If so, how did you know it had reached that point?
Unit X: Postvention

Postvention
Introduction to Postvention

Postvention provides an opportunity to work towards change and growth for individuals who have acted out, as well as for staff members. In order to provide the best possible Care, Welfare, Safety, and Security® for such a person, you must take a Staff Attitude/Approach of Therapeutic Rapport. This is a process of establishing communication with the individual. Listening is an important part of this process. Without a Postvention process such as the one described next, crises are likely to occur over and over again.
Unit X: Postvention

The CPI COPI NG Model℠

Individual

C O P I N G
The CPI *COPING Model*\textsuperscript{SM}

**Control:** Make sure that the person who acted out is back under emotional and physical control.
The CPI *COPING Model*™

**Individual**

**Control:** Make sure that the person who acted out is back under emotional and physical control.

**Orient:** Orient yourself to the basic facts.
Unit X: Postvention

The CPI  COPING Model™

Individual

Control: Make sure that the person who acted out is back under emotional and physical control.

Orient: Orient yourself to the basic facts.

Patterns: Look for a pattern of past behavior. What triggers the behavior?
The CPI **COPING Model**<sup>SM</sup>

**Individual**

**Control:** Make sure that the person who acted out is back under emotional and physical control.

**Orient:** Orient yourself to the basic facts.

**Patterns:** Look for a pattern of past behavior. What triggers the behavior?

**Investigate:** Investigate available resources and alternatives to the inappropriate behavior.
Unit X: Postvention

The CPI **COPING Model**

**Individual**

**Control:** Make sure that the person who acted out is back under emotional and physical control.

**Orient:** Orient yourself to the basic facts.

**Patterns:** Look for a pattern of past behavior. What triggers the behavior?

**Investigate:** Investigate available resources and alternatives to the inappropriate behavior.

**Negotiate:** Negotiate a contract with the acting-out individual.
## Unit X: Postvention

### The CPI *COPING Model*<sup>SM</sup>

<table>
<thead>
<tr>
<th>Individual</th>
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<tbody>
<tr>
<td><strong>Control:</strong></td>
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<tr>
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<td><strong>Negotiate:</strong></td>
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<td><strong>Give:</strong></td>
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</table>
Unit X: Postvention

The CPI COPING Model℠

Staff

C
O
P
I
N
G
The CPI COPING ModelSM

Staff

Control: Be sure that all staff members are back in physical and emotional control.
Unit X: Postvention

The CPI COPI NG Model™

Staff

Control: Be sure that all staff members are back in physical and emotional control.

Orient: Establish the basic facts of the incident.
Unit X: Postvention

The CPI  *COPING Model*™

**Staff**

**Control:** Be sure that all staff members are back in physical and emotional control.

**Orient:** Establish the basic facts of the incident.

**Patterns:** Review staff responses to crisis situations. Are there patterns in the way the team responds?
Unit X: Postvention

The CPI  **COPING Model**

**Staff**

**Control:** Be sure that all staff members are back in physical and emotional control.

**Orient:** Establish the basic facts of the incident.

**Patterns:** Review staff responses to crisis situations. Are there patterns in the way the team responds?

**Investigate:** Look for ways to strengthen individual and team responses to crises.

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The CPI **COPING Model**

**Staff**

**Control:** Be sure that all staff members are back in physical and emotional control.

**Orient:** Establish the basic facts of the incident.

**Patterns:** Review staff responses to crisis situations. Are there patterns in the way the team responds?

**Investigate:** Look for ways to strengthen individual and team responses to crises.

**Negotiate:** Agree to changes that will improve future interventions.

**G**
Unit X: Postvention

The CPI COPING Model®

Staff

Control: Be sure that all staff members are back in physical and emotional control.

Orient: Establish the basic facts of the incident.

Patterns: Review staff responses to crisis situations. Are there patterns in the way the team responds?

Investigate: Look for ways to strengthen individual and team responses to crises.

Negotiate: Agree to changes that will improve future interventions.

Give: Provide support and encouragement. Express trust and confidence in fellow team members.
Post-Test

The *Nonviolent Crisis Intervention®* Training Program Post-Test

1. Name the two ways that an individual can act out.
   a. 
   b. 

2. Complete the CPI Crisis Development Model™

   **Crisis Development/Behavior levels**
   
   - 1.
   - 2.
   - 3.
   - 4.

   **Staff Attitudes/Approaches**
   
   - 1.
   - 2.
   - 3.
   - 4.

3. What is the value of learning the four levels and corresponding staff attitudes?

4. Complete the CPI Verbal Escalation Continuum™

5. Circle the best example of the CPI Supportive Stance™ and list three reasons why you should use it.

   - a.
   - b.
   - c.
   - d.

   **Reasons:**
   
   - 1.
   - 2.
   - 3.

6. What is the value of using a least versus intervening above?

7. When should you use Nonviolent Physical Crisis Intervention™?

8. What is the purpose of this course?
Participant Evaluation

Nonviolent Crisis Intervention® Training Program
Participant Evaluation

Please indicate your response to each of the following items by circling the number that most appropriately expresses your opinion, using a scale of 5 (strongly agree) through 1 (strongly disagree). If none of the numbers appropriately express your opinion, circle 3 (neither agree nor disagree). 1 = strongly disagree; 2 = disagree; 3 = neither agree nor disagree; 4 = agree; 5 = strongly agree.

Program Objectives:
As a result of completing this program, I believe that I have learned to:

- Use nonverbal techniques to prevent acting-out behavior.
- Implement verbal de-escalation strategies, such as limit setting.
- Make use of CPI’s Principles of Personal Safety to avoid injury to all involved in a crisis situation.
- Use safe physical intervention procedures as a last resort when a person is a danger to self or others.
- Build Therapeutic Rapport with acting-out individuals after a crisis is over.

Instructor:
During the program the Instructor:

- Applied the course content to a variety of examples.
- Stimulated interest in the subject matter.
- Created an enjoyable learning atmosphere.

Content: (5 = highest; 1 = lowest)

- The program content was relevant to my needs.
- How would you rate the program overall?

As a result of this program, I

Additional comments on the program, teaching methods, course materials, and/or the Instructor:

From time to time, we use comments from program participants in our promotional materials. If you’d agree to allow us to share your comments, please give us permission by signing here:

Thank you for your input. It is both valuable and necessary in maintaining the quality of the program.
Nonviolent Crisis Intervention®
Training Program

Please see your Certified Instructor if you have any questions about the training program.