## CRISIS INTERVENTION

**OUD ECHO Clinic** 



### **OBJECTIVES**

- Review essential values for responding to a crisis
- Discuss principles for enacting the essential values
- Engaging in appropriate additional training





SOURCE: SAMHSA PRACTICE GUIDELINES: CORE ELEMENTS IN

RESPONDING TO MENTAL HEALTH CRISES

- 1. Avoiding harm
  - Physical safety
  - Psychological safety
  - Watchful waiting
  - Minimize the duration and negative impacts of interventions used

- 2. Intervening in person-centered ways
  - Understand the individual
  - Avoid labeling
  - Identifying individual's personal preferences and goals
  - Understanding the individual's unique circumstances



#### 3. Shared responsibility

 Assist the individual in regaining control by considering the individual an active partner in, rather than a passive recipient of the crisis service

#### 4. Addressing trauma

- Crises are intrinsically traumatic
- Some interventions can impose future physical and emotional trauma
- Individuals have a high probability of being victims of abuse and neglect
- Use trauma informed practices



- 5. Establishing feelings of personal safety
  - Acting out behavior may be in response to a need for self-protection
  - Find out what the individual needs to feel safe
  - Find out what increases feelings of vulnerability
  - Address these needs creatively

#### 6. Based on strengths

 Identify and reinforce resources on which an individual can draw on to recover from the crisis and prevent future occurrences



#### 7. The whole person

- Individuals in crisis often have multiple needs
- Consider other health factors, real world concerns about family, jobs, housing, legal issues, significant others, finances

#### 8. Person as a credible source

- Legitimate complaints regarding medical illness, pain, abuse, victimization can go unheeded if individual is seen as "irrational"
- Even if the individual's assertions are not grounded in reality, the "telling of one's story" may represent an important step towards crisis resolution
- Validate and Listen!



- 9. Recovery, resilience and natural supports
  - Response should contribute to the individuals larger journey toward recovery and resilience
  - Interventions should preserve the dignity, foster a sense of hope, and promote engagement with both formal systems and natural supports

#### 10. Prevention

 Response should address the individuals unmet needs to reduce the risk of future crisis





- Access to supports and services are timely
- Services are provided in the least restrictive setting
- Peer support is available
  - Conveys a sense of hopefulness first-hand
  - Provides connection of supportive people with shared experiences
  - Reduces feelings of isolation and fear that can occur during a crisis
- Adequate time is spent with the individual



- Plans are strengths-based
  - Routine practice is to focus on problems and deficits
  - Need to have equal attention to individual's immediately available and potentially available assets
  - Increases resilience and capability and empowerment
- Emergency interventions consider the context of the individual's overall plan of services
  - WRAP Plans, Advance Directives, History



- Crisis services are provided by individuals with appropriate training and demonstrable competence to evaluate and effectively intervene with the problems being presented
- Individuals in a self-defined crisis are not turned away
  - Not meeting admission criteria can actually escalate a crisis
  - Have alternative resources available



- Interveners have a comprehensive understanding of the crisis
  - Not only an understanding for what is happening in the moment, but why it is happening and how the individual fares when not in crisis
  - Mobile teams have advantages to meeting the individual where he or she is
- Helping the individual regain a sense of control is a priority
  - Offer choices: treatments, medications, who to involve, informed decision making
  - Have flexibility to allow the exercise of options (otherwise it will make it worse!)



- Services are congruent with the culture, gender, race, age, sexual orientation, health literacy, and communication needs of the individual being served
- Rights are respected
  - Crisis responses must not convey the impression that an individual's exercise of rights is a hostile and defiant act
- Services are trauma-informed
- Meaningful measures are taken to reduce the likelihood of future emergencies





Remember, in a Crisis, who/what can you control?

If you are not taking care of yourself, it is hard to care for others.

# ADDITIONAL TRAINING — JUST A FEW IDEAS!

- CPI
- WRAP
- Psychiatric Advance Directives
- QPR
- Trauma Informed Care
- Emotional CPR
- Mental Health First Aid



- Having the staff listen to me, my story and my version of events
- Being asked about what treatment I want
- Trying to help me calm down before resorting to forced treatment
- Being asked about what treatments were helpful and not helpful

Allen, M., Carpenter, D., Sheets, J, Miccio, S., & Ross, R. (2003) What do consumers say they want and need during a psychiatric emergency? Journal of Psychiatric Practice (9) 1, 39-5

## FROM THE PERSON'S SERVED PERSPECTIVE

Staff behaviors that consumers feel are most important to individuals in a mental health crisis



### Questions? Concerns?

#### CONTACT INFORWATION

**Ruth Case** 

ruthcaseconsulting@gmail.com

260-414-3692

