

Talk Down

Instructions to staff

<u>Background</u>

When patients become agitated, angry and upset, and a crisis arises where it seems likely they might become more violent or harm themselves, it is often possible to talk them to help them calm down. That process is usually called de-escalation or defusion/diffusion. Most staff get some instruction in these skills as part of prevention and management of violence courses, but the coverage is not always thorough or at an advanced level. This is because no one has previously pulled all the different techniques together, or assembled them into a meaningful picture.

Research on aggression shows that the people on wards who are most vulnerable to being assaulted by patients are unqualified nurses and student nurses. We suggest, therefore, that they are the ones who most need these skills so that they can avert such incidents. However it is likely that all staff would benefit from a perusal of the poster and adoption of those techniques which are not yet fully part of their interpersonal skill repertoire.

In this initiative, we provide you with an organised catalogue of Talk Down Tips, showing how they fit together into a three stage process of deescalation. This has been derived from all the research and professional literature from many countries on the topic of violence prevention, and is brought together in this format for the first time. We also describe how this information can best be conveyed to those who most need it.

Description of *Talk Down*:

A poster summarising basic to advanced de-escalation techniques will be placed in an area frequented by staff, preferably the nursing office, for the duration of the intervention. The ward will decide who is the best at deescalation among the staff, and this person will be the Talk Down Champion. They will spend about 10-15 minutes with each other member of the team, explaining the poster and what it means, giving examples from their own experience. They will provide each member of staff with a copy of the

document on 'Staying open, friendly and positive' for them to read. He or she will then invite them to peruse the poster at times over the coming weeks, and invite them to approach her or him at any time if they have any questions.

Role of the intervention champion

For this intervention, the champion should be a person on the ward who is considered to be good at this.

The poster is a guide only. All de-escalation situations vary. The poster summarises how the process would work ideally. The reality is usually more messy, nevertheless these principles can be applied to most situations to some degree.

Prepare yourself. Take a good look at the poster yourself first. The three boxes across the middle describe the process of de-escalation in the order in which they occur. Delimiting is about establishing safety and getting started. Clarifying is about eliciting and hearing what the patient has to say, and establishing the nature of the problem. Resolving is about addressing the issue you have just clarified, via appeal, negotiation, compromise or giving choices. The top and bottom boxes describe the staff qualities and responses that have to be displayed throughout the process for a resolution to be achieved: self-control, respect and empathy. Read the contents of all the boxes, and think about the times you have used these techniques or followed this advice.

Explain the poster to others: Take ten minutes with all other members of staff (one by one) and explain the poster and its meaning to them. Answer questions from all staff about the poster contents. Include examples from their own experience. Give a copy of 'Staying open friendly and positive' to each person you lead through the poster.

Identify and note openly when these skills are used: Point out to other members of the team when these skills are used effectively by them. Mention

it in handovers or other team meetings. Express respect for their use, acknowledge the growing skill of the team you are a member of. Some wards actually used the poster when debriefing following an incident- not only recognising the skills that were used, but also the ones that were not, and so it helped them to identify ways in which de-escalation could be improved in the future.