

# Compassionate Encounters



Presented by Tim Welsh

# Overview

- ▶ Introduction
- ▶ Engaging with others
- ▶ Effective Communication
- ▶ Being Trauma Informed
- ▶ De-escalation
- ▶ Safety
  - ▶ Security Protocol
- ▶ Resources

# About Me

## **Tim Welsh LCSW**

- Social Worker
- Mental Health counselor at Phoenix Health Center



# Why we are here today

- ▶ In 2018 homeless services worked with 6,986 individuals experiencing homelessness in the Louisville area.
- ▶ Private property owners (especially Churches) are increasingly encountering individuals who are without housing.
- ▶ Most non professionals do not know and/or not comfortable interacting with those with: mental illness, substance use, those experiencing homelessness.

# Lack of Affordable housing in Louisville

- ▶ Louisville “needs 31,412 units for those in the lowest and most vulnerable income bracket (30% of the area median income or less; that’s \$22,900 for a family of four), and more than 70,000 total units needed to ensure no one in Jefferson County is cost burdened by housing.”
- ▶ “The cost just to build the 31,412 units for the most vulnerable is approximately \$3.5 billion.”

“The truth about Louisville's affordable housing problem and what's being done about it”  
Christie McCravy and Marilyn Harris, Opinion, Courier Journal  
Published 7:41 a.m. ET July 23, 2019

# **Why Are People homeless?**

# **Why Are People homeless?**

“Poverty is the primary cause of homelessness.”

*Coalition for the Homeless*

# What triggers homelessness?

- ▶ Low wages or loss of job
- ▶ Lack of affordable housing
- ▶ Housing segregation/redlining
- ▶ Eviction (Louisville's rate is twice the national average)
- ▶ Lack of shelter beds for families
- ▶ Long-term encampments broken up
- ▶ Addiction
- ▶ Untreated mental health issues
- ▶ Abuse at home

# Why we are here today

- ▶ We all want to have successful encounters with others
- ▶ With appropriate training and understanding we can increase the chances for a mutually beneficial (“win-win”) encounter.
- ▶ Every encounter has the opportunity for a positive result.

# Why we are here today

- ▶ Emergency Services can be a life line but you need to learn when and when not to call them.
- ▶ Imminent danger
- ▶ Some has urgent medical conditions
  - ▶ Trouble breathing
  - ▶ Chest pains
  - ▶ Loss of consciousness
- ▶ Be aware of cultural sensitivities
- ▶ Avoid using Police as overt threat but there are times for the person to understand what the consequences are if they remain when asked to leave.
  - ▶ “We do not want to call the police, so please go ahead and leave. “







# Compassion & Empathy

- ▶ **Compassion-** Remember that if the person is having an emotional response that it is probably not about you. It may be caused by stress in their life that is overwhelming them and it is coming out at you in this situation. Remember to be aware of how they may be struggling, and focus on the desire to help.
- ▶ **Empathy-** understand how they might be feeling



# Initial Engagement:

## Compassionate Team

- Always engage with two persons if possible (volunteers/staff)
- The members of this team can help:
  - Support
  - Advocate & Educate others
  - Debrief



# Initial Engagement:

- ▶ Greet the person (persons)
- ▶ Introduce yourself
- ▶ Allow them to introduce themselves but also allow them to not introduce themselves. Remember people's right to privacy. A lot of clients has suffered trauma, and some suffer from paranoia.



# Initial Engagement:

- ▶ Ask: “Is there something that you need?”
- ▶ Explain what you can and CANNOT help with
- ▶ Explain the rules of your organization
  - ▶ “I am sorry but we cannot allow anyone to stay here overnight.” or “I’m sorry we cannot let anyone hang out here.”
- ▶ “Is it okay for me to give you some information?”
  - ▶ Before an encounter KNOW YOUR COMMUNITY RESOURCES or how to find them
  - ▶ Street tips book (Coalition)
  - ▶ Handout with resources



# COMMUNICATION



# Steps for Effective Communication

**1 2 3**

**1**

**Stop & Focus**

**2**

**Listen, Understand, Respond**

**3**

**Resolve**

# 1 Stop & Focus Do's

Make sure **Body language & Tone of Voice** match your message

- ▶ Only 7% of your message meaning comes from the words you use
- ▶ 38% comes from your tone of voice
- ▶ A whopping 55% comes from your non-verbal cues



# 1 Stop & Focus Do's

Make sure you pay attention to their body language too!!!!



# 1 Stop & Focus Do's

Keep your awareness on listening to the other person (part of paying attention.)  
Stay present with them.

- ▶ Make eye contact
- ▶ Stay focused on them and what they are saying
- ▶ Respond with empathy (ability to understand and share the feelings of another) and compassion

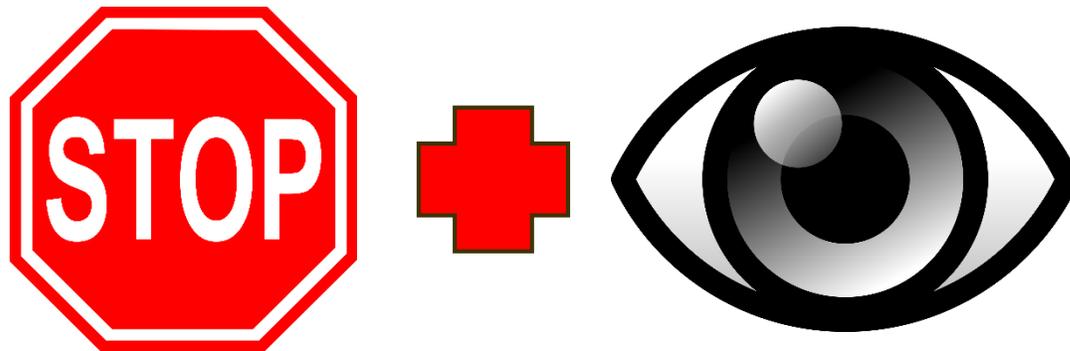


# 1 Stop & Focus Do's

- ▶ Be kind, patient and engaged with person
- ▶ Be calm.
- ▶ By the way, remember to breathe... we tend to forget

# 1 Stop & Focus Do's

- ▶ Give your undivided attention in order to prevent them from getting escalated
- ▶ Be non-judgmental, do not jump to conclusions
- ▶ Easy does it, take your time



# 1

## Stop & Focus Do's

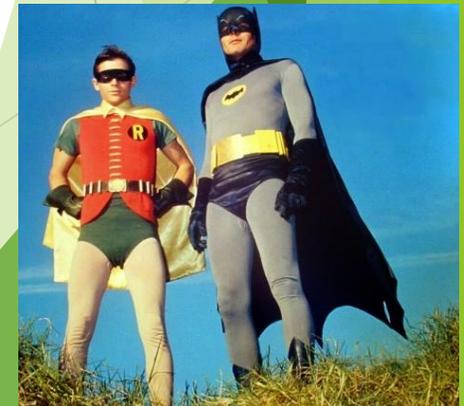
### Facial Features

- ▶ Relaxed
- ▶ Serious (not stern) looks
- ▶ Good eye contact (not staring)
- ▶ Attentive, focused on the person



# 1 Stop & Focus Do's

- ▶ If unsure about safety meet in an open space.
  - ▶ Escort someone to a more open space so you and they have an exit. Avoid enclosed spaces
- ▶ Have colleagues nearby (Batman & Robin)
- ▶ Have code word/sign
- ▶ Remember you can always end any conversation





## Build Rapport: **LISTEN, LISTEN, LISTEN**

- Many of the individuals we work with suffer from many things which prevent them from trusting others
  - Paranoia
  - Trauma
  - Mistreatment by others (at shelters, government agencies, in public, etc.)
- Ask open ended questions/Active listening/Columbo aka play clueless, “Is there something that you need?” or “Is there something we can do to help you?”
- Everyone desires to be heard. In order for them to feel valued and respected we must listen to their story and thereby discover their needs & wants...





# Wants versus Needs

## ▶ What the someone

- ▶ Housing - referrals
- ▶ Clothing
- ▶ Bus Fare
- ▶ Hygiene items (eg. Hair dye)
- ▶ Etc.
- ▶ Be clear what you can offer & what you cannot offer



# Wants **versus** Needs

- ▶ What You/Court/Family Members think the person needs-May or may not be the same thing as the person's "want" list. You may see needs that the person has which they may not prioritize highly or even see as a need at all.
  - ▶ Psychiatric Medication
  - ▶ Stop Drinking Alcohol/Using Illicit Drugs
  - ▶ Get into Housing



# Wants versus Needs

## *Remember:*

- Self Determination
- Your Role: What it is & what it isn't
- Normalizing Items
  - » Ex. Hair Dye
  - » Hygiene Items



# Resources Handouts

**First Unitarian Church**  
809 South Fourth Street  
Louisville, Kentucky 40203

## Welcome to First Unitarian Church

Our sacred Churchyard, including porches, steps, and grounds are for the use of Church members and invited guests. We want to keep our Churchyard clean and sanitary, and to respect our Church members whose remains are buried on our grounds. We ask that you do not hang out or sleep in our churchyard, especially the porch and steps.

You are invited to be our guest at our church for:

- First Unitarian Regular Services, Sundays at 11:00am
- Wednesdays, Free Lunch, served at 11:00am by God's Girls
- Saturdays, Travelers AA Meeting, 2:00 pm
- The Spiritual Israel Church & It's Army Services, Sundays at 11:00am

Places you might go during the day:

**Louisville Free Public Library (502) 574-1781**

301 York St., across York St.

Mon.–Thurs. 9:00am–9:00pm; Fri. & Sat. 9:00am–5:00pm; Sun. 1:00pm–5:00pm

Books & magazines to read, Computer access, Wi-Fi, Charging stations

**DAY SHELTER AND SERVICES:**

**UP for Women and Children (502) 384-0001**

425 S 2nd Street, Mon., Wed. and Fri., 10:00am-1:00pm

**St. John Day Center for Homeless Men (502) 568-6758**

700 East Muhammad Ali Blvd.,

Mon, Tue 7:00am–3:00pm; Wed 7:00am–2:00pm; Thurs-Sun 7:00am–3:00pm

**Wayside Men's Adult Day Shelter**

432 E. Jefferson St., every day 7:30am–6:00pm

**If you need a place to sleep: call (502) 637-BEDS (502-637-2337)**  
10:00am - 4:00pm that day  
**Or Drop In: 1300 S. 4<sup>th</sup> St. 2<sup>nd</sup> Floor, Mon. - Friday**  
10:00 am to 3:00 pm

(Over)

**To be assessed for housing opportunities**

Go to 1300 S. 4<sup>th</sup> St., 2<sup>nd</sup> Floor Mon.–Fri. 10:00am–3:00pm, or  
Call 637-2080 to arrange for a common assessment screening 10:00am–4:00pm

Need a **photo ID**? Pick one up at: 1300 S. 4<sup>th</sup> St., 2<sup>nd</sup> Fl., Mon.–Fri. 10:00am–3:30pm

**FREE STORAGE**, if you need to store your stuff:

**The Salvation Army, (502) 671-4904**

911 S. Brook St., Enter through back, Breckinridge St. Entrance

Monday – Sunday 8:00am – 3:30pm

Monday – Friday 6:00pm – 8:30pm

**If you need health care:**

**Phoenix Health Care for the Homeless (502) 568-6972**

712 E. Muhammad Ali Blvd., Mon.–Fri. 7:00am–4:00pm, Sat. & Sun. closed

**Clothes Closet & Food Pantry**, Central Louisville Community Ministries

Calvary Episcopal Church, across parking lot from First Unitarian

Enter from 4<sup>th</sup> St. through courtyard, Mon.–Thurs. 9:30am–11:30pm

**Free Laundry** once a month, first come first served:

Laundry Love at Aunt Bee's Laundromat, 1254 S. 2<sup>nd</sup> St.

2<sup>nd</sup> Thurs. every month, 5:30pm–8:00pm

Additional Information:

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# Resources for those Experiencing Homelessness the Louisville Area



Revised 2/26/20

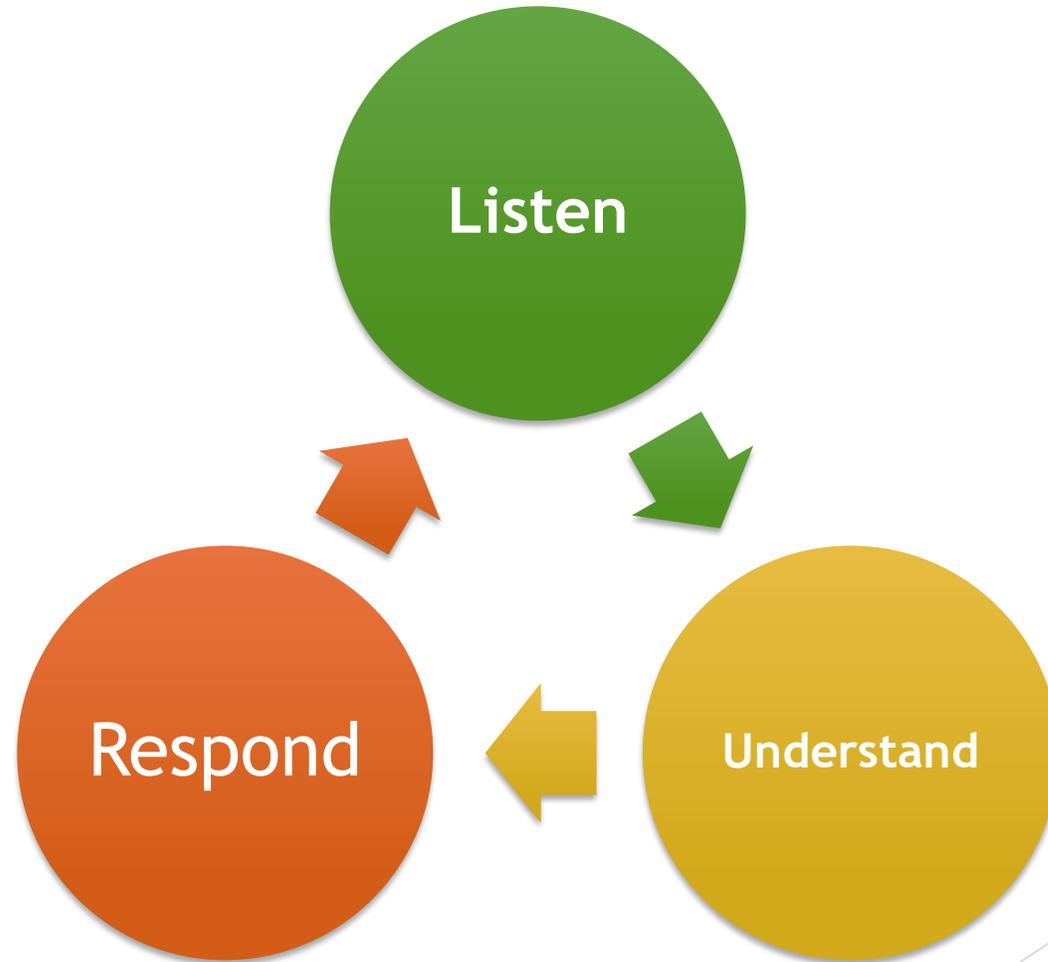
## Louisville Street Tips



**COALITION  
FOR THE  
HOMELESS**

Families • Singles • Young Adults • Teens • Children

# 2 Listen, Understand, Respond



# 2 Listen, Understand, Respond

- ▶ **Convey Respect**

- ▶ Avoid opinions, judgements and disrespect

- ▶ **Use “I” statements**

- ▶ “I am sorry this happened to you... “
- ▶ “I want to understand what services you need help with”

- ▶ **Instead of YOU statements**

- ▶ “YOU need to leave!”
- ▶ “If YOU would just listen”
- ▶ “If you would just do what you’ve been told to do”



**LISTEN**

# 2 Listen, Understand, Respond

## Communicate Caring & Interest

- ▶ Using appropriate language
- ▶ Make sure you can hear/ understand each other
- ▶ Checking to make sure that the words you are using are communicating the message you mean to send

**LISTEN**

# 2 Listen, Understand, Respond

- ▶ Respect physical space by honoring people's need for personal space. Try not to crowd. Be physically relaxed.
- ▶ Emotional and mental space - allow them to feel and think as they need to at that moment.
- ▶ Appear interested. Show you are listening by reflecting what you hear, and summarizing.

LISTEN

# 2 Listen, Understand, Respond

- ▶ **Attending:** Giving your physical (and mental) attention to another person
- ▶ **Following:** Making sure you are engaged by using eye contact. Use un-intrusive gestures (such as nodding your head, saying “okay: or asking an infrequent question.
- ▶ **Reflecting:** Paraphrasing and reflecting, using the feelings of the other person. (Empathy) This shows you are listening to them.
- ▶ Listen to the story without changing the subject / interrupting



**LISTEN**

# 2 Listen, Understand, Respond

Clarify things you don't understand:

- ▶ *“Help me understand what you need.”*
- ▶ Ask open ended questions



# Understand

# 2 Listen, Understand, Respond

- ▶ Restate Message “Tell me if I have this right, it sounds like....”
- ▶ *“Let’s see if any of these resources may be useful to you.”*
- ▶ Allow for silence on their part to figure things out

Understand

# 2 Listen, Understand, Respond

- ▶ Describe an overview of the situation and person's response to it as you understand it, briefly describing the important points as you hear them.
- ▶ Ask if your understanding is accurate.
- ▶ Ask if there is more to add, or if there are any changes to your summary.

Summarize



RESPOND

# 2 Listen, Understand, Respond

## Avoid getting into a power struggle

- ▶ Avoid: “Sir, I am not going to ask you again...”
- ▶ Avoid: “If you would just listen!”
- ▶ Avoid: “\_\_\_\_\_” Fill in the blank with common overheard statements which inflame people and situations

**Don't take  
the bait,  
Don't  
escalate**



# RESPOND

# Keep in mind...

Do You Want to Be Right or  
Do You Want to Be Happy????



# 2 Listen, Understand, Respond

## Body Language

- ▶ Hands down to the sides, palms facing person
- ▶ Weight equally balanced on both feet
- ▶ Minimize gesturing, pacing, fidgeting - these are signs of nervousness can increase agitation in others

Your body language conveys a message.

What message are you sending?



# RESPOND

# 2 Listen, Understand, Respond

## Tone of Voice

- ▶ Use the Concept of Mirroring: if you project a calm, cooperative, normal tone, the other person will mirror
- ▶ Calm, quiet, remember to breathe
- ▶ Slow paced
- ▶ Sound confident that you can help them

## Attitude

- ▶ I have time for you / I care about you
- ▶ You're not a bad person
- ▶ You are an important person
- ▶ Together we can make things better
- ▶ Let's talk about it

**RESPOND**

# 2 Listen, Understand, Respond

## AVOID:

- ▶ Pre-Judging
- ▶ Talking about a person within earshot of other staff/volunteers
- ▶ Shoulder shrugging
- ▶ Eye Rolling
- ▶ Huff
- ▶ Criticize
- ▶ Order
- ▶ Threaten
- ▶ Minimize
- ▶ Argue
- ▶ Yell



# RESPOND

# 3 Resolve

## Problem Solving

- ▶ “Thank you for sharing that with me...”
- ▶ “Do you mind if I provide you with some information about where you can go if you need help with that?”
- ▶ **Ask yourself what does the person want?**
  - ▶ Can we offer that?
  - ▶ To what extent can we give them what they are asking for?
  - ▶ Is there a middle ground?
- ▶ **Offer choices when possible**



# 3 Resolve

- ▶ Making realistic and clearly explained resolutions is a great way to avoid escalation.
- ▶ Break it down in smaller, more manageable steps. Remember: under stress people have a more difficult time understanding, remembering and processing. There are a lot of people who have learning disabilities and who are illiterate
- ▶ Watch word choice!!!



# 3 Resolve

- ▶ Review recommendations
- ▶ **Do not** promise anything from other agencies
- ▶ **DO NOT SAY:**
  - ▶ “Go to so-&-so, they will get you housing”
  - ▶ “I’m sure the shelter will give you a bed tonight”
  - ▶ **ETC**



# Debriefing vs Gossiping

- ▶ Any time an interaction with someone else makes you feel stressed or overwhelmed talk with someone about it, discuss how you feel and ways to manage stress.
- ▶ Keep conversations about others discreet by talking with others privately and **ONLY WHEN NECESSARY**
- ▶ Avoid gossip in your day to day interactions

**RESPECT.**



**What if the person  
gets angry despite  
your use of effective  
communication  
skills???**



**De-escalation**



# Primary Questions

- ▶ Why do people get upset?
- ▶ What is de-escalation?
- ▶ Why de-escalate?
- ▶ When to de-escalate versus other interventions?
- ▶ Who should de-escalate?
- ▶ What de-escalation isn't?
- ▶ What if de-escalation doesn't work?



# Primary Questions

**WHY DO PEOPLE GET UPSET?????**



# WHY DO PEOPLE GET UPSET?

- ▶ Waiting
- ▶ Misunderstanding and/or inability to hear/grasp what they are being told
- ▶ Being talked to in a way they interpret as rude
- ▶ Intoxicated
- ▶ Experiencing hallucinations /pain
- ▶ Being told bad news:
  - ▶ There are no shelter beds tonight
  - ▶ There is a waiting list for family beds
  - ▶ We cannot house you because...
  - ▶ Others?



# WHY DO PEOPLE GET UPSET?

**Trauma**

# Trauma

## Trauma is:

- ▶ A deeply distressing or disturbing experience.
- ▶ Abuse (Past or Present)
- ▶ Neglect
- ▶ Imprisonment
- ▶ War
- ▶ Accident

# Trauma

## Can lead to:

- ▶ Constant hyper-arousal
  - ▶ Flight/ Fight / Freeze
- ▶ Memory problems
- ▶ Trouble focusing
- ▶ Irritability
- ▶ Distrust
- ▶ Anger problems
- ▶ Outbursts

# Trauma Triggers

- ▶ Situations
  - ▶ Loud or Sudden Noises
  - ▶ Crowds
  - ▶ Being told “NO”
- ▶ People
  - ▶ Separate and remove person from trigger/Get person to a safe place



# Being Trauma Informed

# Being Trauma Informed

It is easy to get frustrated with people over their poor choices, and their erratic, impulsive behavior, but that frustration will not help you to have a successful interaction.

A Trauma Informed Perspective:

“What happened to you?”

Instead of

“What is wrong with you?”

# **The Impact of Trauma**

# The Impact of Trauma

- **Body & Brain:** Neurobiology- fight/flight/freeze response. Survivors often feel the biological responses of fight/flight/freeze all the time and can't act on it, leaving them in constant state of hyperarousal, fear and anxiety
- **Memory & Perception:** Often fragmented and difficulty concentrating
- **Judgement:** Insight, perspective, ability to see and weigh consequences, ability to set boundaries. Imagine the effects on one's judgment if their caregivers had also their abusers. They could have an inability to recognize "red flags".

*(Saakvitne, et al., 2000)*

# The Impact of Trauma

- ▶ **Beliefs:** What it means to feel safe, trust, have self-esteem, feel connected, and to feel in control in our lives.
- ▶ **Frame of Reference:** Identity (Who am I?);  
World view (What is the world really like?);  
Spirituality (What do I believe?)
- ▶ **Feelings:** Ability to identify and manage feelings.  
Ability to connect to others

*(Saakvitne, et al., 2000)*

# ACE: Adverse Child Experiences Study

<http://www.cestudy.org>

## Dr. Vincent Felitti: 1980's Weight Loss Study

- ▶ Recurrent physical abuse
- ▶ Recurrent emotional abuse
- ▶ Contact sexual abuse
- ▶ An alcohol and/or drug abuse in the home
- ▶ An incarcerated household member
- ▶ Someone who is chronically depressed, mentally ill, institutionalized, or suicidal
- ▶ Mother is treated violently
- ▶ One or no parents
- ▶ Emotional or physical neglect

*(Anda & Felitti, 1998)*

# ACE Study Findings

- ▶ ACEs have a significant impact on later adult health and well-being
- ▶ ACEs have a strong influence on the development of high risk behaviors (i.e. smoking, illicit drug use, sexual behavior)
- ▶ ACEs increase the risk of physical health issues (heart disease, lung disease, HIV and STDs, obesity)

*(Anda & Felitti, 1998)*

# ACE SCORES & Behaviors

- ▶ ACE Score  $\geq 4$ 
  - ▶ Twice as likely to smoke
  - ▶ Seven times as likely to have alcohol abuse/dependence
  - ▶ Twice as likely to have cancer or heart disease
  - ▶ Four times as likely to have emphysema or COPD
  - ▶ Twelve times as likely to have attempted suicide

*(Anda & Felitti, 1998)*

# ACE SCORES & Behaviors

- ▶ Men with an ACE score of  $\geq 6$  were 46 times more likely to use IV drugs
- ▶ People with ACE score of  $\geq 7$  Who did NOT smoke, drink to excess or weigh more than healthy weight range had a 360% higher risk of ischemic heart disease



*(Anda & Felitti, 1998)*

# Trauma Prevalence

- ▶ **Over 92%** of mothers who are homeless have experienced severe physical and/or sexual abuse during their lifetime
- ▶ **About two-thirds** of homeless mothers have histories of domestic violence.
- ▶ Compared to low-income housed women, mothers who are homeless have
  - ▶ **»» Three times the rate** of posttraumatic stress disorder (36%)
  - ▶ **»» Twice the rate** of drug and alcohol dependence (41%)

*Current Statistics on the Prevalence & Characteristics of People Experiencing Homelessness in the United States  
(Updated July 2011) SAMHSA*

# Trauma Statistics: Adults

## Women:

- 97% of homeless women with SMI have experienced severe physical & sexual abuse- 87% experience this abuse both in childhood and adulthood.
- 92% of homeless mothers have experienced severe physical or sexual assaults over their lifespan.

**Men:** A 2010 study looked at the prevalence of trauma for 239 homeless men and found:

- 68% reported childhood physical abuse
- 71% reported adulthood physical abuse
- 56% reported childhood sexual abuse
- 53% reported adulthood sexual abuse



*(Bassuk et al., 1996; Kim et al., 2010)*

# Using a Trauma Lens

Attitudes and behaviors are  
the individual's **best attempt** to cope.



# Trauma-Informed

We need to presume everyone we encounter have a history of traumatic stress and exercise “**universal precautions**”. *(Hodas, 2005)*



# Viewing Symptoms as Adaptations

- ▶ Not trusting anyone
- ▶ Hypervigilance
- ▶ Not asking for help
- ▶ Fear of shelters
- ▶ Fear of crowds
- ▶ Not bathing (Shelters with open shower stalls)
- ▶ Not willing to use medical or dental services
- ▶ Not taking medications

*(Schilling, 2010)*

# Viewing Symptoms as Adaptations

- ▶ Aggression
- ▶ Not waiting for appointments; staying “on the move”
- ▶ Finding a protector
- ▶ Self-destructive behavior
- ▶ Self-harm
- ▶ Suicidality
- ▶ Exchanging sex for money or necessities
- ▶ Use of drugs and/or alcohol

*(Schilling, 2010)*

# Trauma & Relationships

- ▶ Trauma most often occurs in relationships, therefore healing happens in relationships.
- ▶ *As build trust and relationships with people our interactions with those individuals goes much more smoothly and productively*



# What does all this mean for us?

- ▶ We work to establish relationships with people who may have been humiliated, hurt or betrayed by those who are supposed to be counted on for safety and protection. By acknowledging this and approaching people with care and concern the chance for our interaction to be a positive one increases dramatically.
- ▶ By understanding trauma and its impact on behavior we can be more compassionate.

# De-escalation

The background features abstract, overlapping geometric shapes in various shades of green, ranging from light lime to dark forest green. These shapes are primarily located on the right side of the frame, creating a dynamic, layered effect. The overall aesthetic is clean and modern.

# Primary Questions

## What is De-escalation?

- ▶ A way of interacting with others who are upset, that helps them calm down, in order to resolve problems.



# Primary Questions

## Why de-escalate????

- ▶ Prevention
  - ▶ Physical altercation
  - ▶ Damage to Property
  - ▶ Security Incident
  - ▶ People being barred from property
  - ▶ Easier to calm someone down who is just starting to get upset, rather than wait until they become violent
- ▶ To make YOUR job easier



# Primary Questions

When to de-escalate versus other interventions?

- ▶ Is the person acting in a violent manner?
- ▶ Is the person making threats?
- ▶ Is the person able to engage in conversation?
- ▶ Is the person impaired? (Substance use? Cognitively?)
- ▶ Are they acting in a way that doesn't support resolution?



# When someone is agitated **BUT** not currently an active threat:

- ▶ Elevated voices
- ▶ Swear words
- ▶ Expression of displeasure

Use de-escalation to prevent the situation from turning into a security incident



# Primary Questions

## Who should de-escalate?

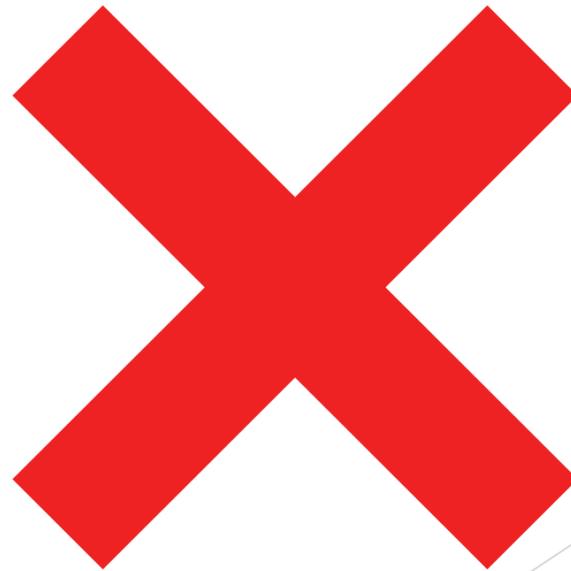
### Have a leader

- ▶ If possible, choose someone who knows the person and who the person responds well to. If no one knows the person then the first person on the scene.
- ▶ Designate someone to hang back, ready to call 911
- ▶ Designate someone to clear the area
- ▶ Have someone go get additional expert help if needed
- ▶ To call 911 if needed



# What De-escalation isn't

- ▶ **“Giving-in”**
- ▶ **Allowing for unsafe/dangerous behavior**
- ▶ **Allowing for threats**



# First off...

- ▶ Before you begin, ask yourself:

**“Am I breathing?”**

*During times of crisis we can find ourselves holding our breath. Remember to breathe. It will help you to remain calm and help you focus on your intention.*



# Safety First!

## Observe the situation & Read the Clues

- ▶ Determine whether you can be with this person or group and be reasonably safe
- ▶ Inform others of potential danger
- ▶ Have space cleared
- ▶ Do NOT meet in enclosed/inaccessible space
- ▶ Plan interruption safety check

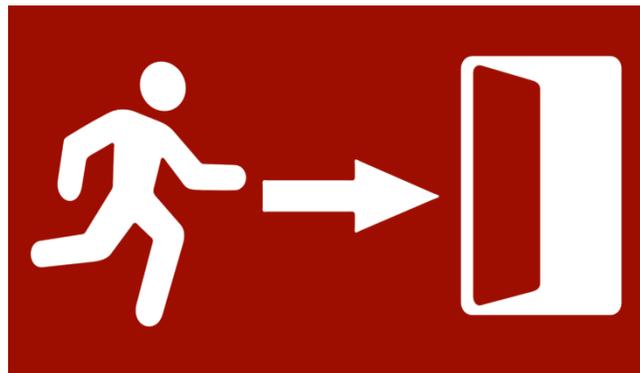


# Safety Do's & Don'ts

- ▶ Be firm, but no yelling or demeaning language
- ▶ Set Boundaries when appropriate
  - ▶ *“I could understand you better if you lower your voice.”*
- ▶ Respect personal space-Do NOT touch people
  - ▶ Personal space is usually 1.5 to 3 feet
    - ▶ Far enough away so you cannot be hit or kicked
  - ▶ Stand slightly more than a leg's length away, on an angle and off to the side of the other person.

# Safety Do's & Don'ts

- ▶ Have clear exit strategy
- ▶ Consider the safety of others in your plan
- ▶ Give people a clear exit, too
- ▶ Do not let person get between you and the exit
- ▶ Remove any heavy/sharp objects that can be thrown
- ▶ Do NOT wear dangling ear rings, lanyards or necklaces that persons could grab



# Recognize when STAFF needs de-escalation

- ▶ Signs that you or other staff needs to exit situation
  - ▶ Raised voice
  - ▶ Irritable
  - ▶ Appears overwhelmed
  - ▶ Getting into a tug-of-war with person
- ▶ Tap Out

# Tap-Out



# LEAVE YOUR **EGO** AT THE DOOR



# Resolution

## Setting Limits / Boundaries

- ▶ Once the person is calmed down, (perhaps during their next visit) someone can explain what behaviors can lead them to being barred.

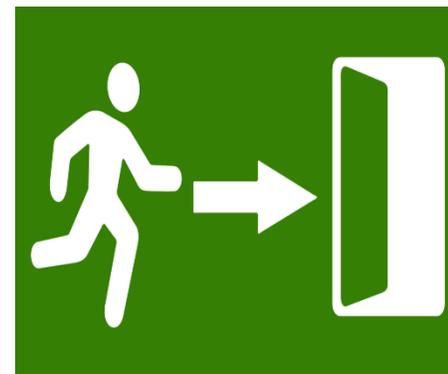




# Next Steps...

## Know what to do if de-escalation fails

- ▶ What do you do next?
- ▶ Should 911 be called?
- ▶ Should you flee the situation?



# Security Issues

“Code Green”



# Security Issue

- ▶ What defines a security issue
- ▶ What to do during a security issue
- ▶ How to alert others
- ▶ Defining who participates during a security issue



# What defines a security issue?

- ▶ Situation in which a person is at imminent risk of danger to staff, other people, themselves, or property.

# How to alert others to the security risk?

- ▶ What is your organizations procedure(s)?



# Security Team

## Team Leader:

- ▶ One person must assume team leader role.
  - ▶ Preferably the person with the best rapport with person
- ▶ Direct other team members as to what is needed
  - ▶ Move other people out of area
  - ▶ Call 911
  - ▶ Stand back and monitor (So leader can indicate additional commands as needed).
  - ▶ Ask anyone who is a trigger to the person to leave the area



Who are your  
Security  
Leaders?



# Security Team



- ▶ When a security code is issued the individual who called for the code will **remain in the vicinity** in order to inform responders about events that led to the code being called.



# Security Team



## Number of responders:

- ▶ **4** or **5** responders should be sufficient.
- ▶ Staff not directly involved in the event should not respond



# Security



## When to call the police:

- ▶ When individuals are physically fighting, anyone may call 911.
- ▶ When Individuals are disruptive and show no signs of calming down even after de-escalation techniques have been applied.
- ▶ As determined by a supervisor or a code response leader.

Alert Code Green Team if 911 has already been called.



# Compassionate Team

## After a Security Incident Debriefing

- ▶ Should be conducted following an incident
- ▶ Include people who were directly/indirectly involved.
- ▶ This will be beneficial for managing stress and may serve as a learning opportunity for insights about how to respond to future Codes.



# Remember



- ▶ **Use of physical force** is to be avoided whenever possible. Staff will perform due diligence to protect everyone given the circumstances. Physical interventions should be used only in the event of imminent danger to self and others while awaiting arrival of the police.

# Remember

**“Every interaction has a chance for success.”**

**But you have to:**

- ▶ Do your part
- ▶ Maintain safety



# Remember

## Model respect for others

- ▶ Keep conversations about others discreet by talking with others privately and ONLY WHEN NECESSARY
- ▶ Avoid gossip in your day to day interactions

**RESPECT.**

**Remember!!!**

# Engagement Handout

## Engagement Handout

### Introduce

"Hello, my name is \_\_\_\_\_. (Give them choice to introduce themselves or not.) I am a church member/Volunteer here."

### Ask

"Are you in need of any help?"

"Are you experiencing homelessness? (or Are you without housing right now?) How long have you been homeless? Have you been assessed by the Common Assessment Team?"

### Provide & Educate

Be clear with what you can and cannot help with

"Would it be alright if I gave you some resource information?" (Provide them with resource information. Preferably tailored to their needs)

Or if the person appears to not be able to manage to follow directions, is not familiar with downtown or the shelters you could see if they would be open to talking with an outreach worker:

"Are you familiar with Saint John's outreach team (Tiny?) I can see if they could come and meet with you."

"I am sorry but we cannot let anyone stay here on Church property. You are welcome to come to our church services on X Y Z."

### Finals Steps

- If the person leaves but returns at another time in the future, remind them again of policies and ask if they need any other additional help.
- If the person is resistant to going, "We do not want to call the police, so please go ahead and leave."
- 911 if person is unsafe, or having medical emergency.

**Remember: Consistency and follow through are essential**

# Final Thoughts

- ▶ Be upfront with staff about concerns/worries
- ▶ If unsure how to handle situations, simply ask
- ▶ Remember we are all in this together!
- ▶ What you do makes a difference

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