



M1 Basic MAB®

MAB CORE_{SM} Principles of Instruction



Student Workbook
Version 2025





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THE 5 CATEGORIES OF WORKPLACE VIOLENCE

1. Violent acts by people who have no connection with the workplace other than to commit a crime
2. Violence directed at employees by customers/clients/patients/inmates or others for whom an organization provides services to
3. Violence against co-workers, supervisors, or managers by former employees
4. Violence committed outside by someone who has a personal relationship with an employees
5. Violence committed by individuals whose ideology propels them to commit violence such as terrorism

What can we do about workplace violence?

If you see something say something...

UNDERSTANDING WHY...



Training helps responders to see presenting factors that may lead to workplace violence.

PROACTIVE PLANNING...



Clearly thought out policies help bring resources to the most critical needs.

CRISIS RESPONSE TEAMS (CRT) PRACTICE...



Quick thinking is essential to the CRT Teams ability to adjust to the changing dynamics of unfolding crisis situations.

YES, IT CAN HAPPEN TO YOU AND YOUR WORK PLACE...



Workplace violence is a global epidemic in the workplace; no singular occupation is free from this risk. Employees must train to keep customer service high and environments safe!



SITUATIONAL AND ENVIRONMENTAL AWARENESS

Situational awareness is a concept that describes a person's ability to:

- Observe what is going on in their surroundings
- The ability to orientate themselves in situations
- Assess events in context to the given time and place

The Stages of Situational Awareness?

1

Perception of Threat:

What our senses tell us

2

Comprehension:

What our mind understands

3

Projection:

The actions we take based on the information we process

The ABC's of Situational Assessment

- **Antecedent**: What impact does the current situation have on health outcomes, quality of life, or safety?
- **Behavior**: Can you identify underlying causes or conditions driving the behaviors?
- **Consequence**: What has been tried and proven effective, or demonstrated as not very useful?



THE FOUR TYPES OF AWARENESS

Typically, people operate on FOUR distinct levels of awareness:

Level 1- Apathy Influenced

- Level one is similar to driving in a familiar environment.
- Routine access to phone calls and texting are also causing people to slip into the influence of apathy.

Level 2- Relaxed Presence

- Level two is like defensive driving. A state in which you are relaxed and watching other cars on the road while looking ahead for potential hazards.

Level 3-Task Focused

- Level three is like driving in hazardous road conditions. Being task-focused demands a high level of concentration on precise details.

Level 4- High Alert

- Level four is the level that can induce an adrenaline rush. The high alert can be scary, but at this level, you are still able to function.

Key points:

1. Take a look at your daily routines and evaluate your attentiveness. Seek to understand how you present and react to the environments you occupy and the people you share them with.
2. Being aware means understanding how each of the four levels of awareness can influence your ability to process and perceive the elements of danger.
3. Your ability to professionally respond is dependent on your ability to be self-aware on a level that meets the developing demands of conflict or crises/situations.

Note Section:



STEPS TO ENVIRONMENTAL AWARENESS

People, Process, Place:

- The people in an environment are large contributors to the acuity of the environment. Stakeholders, care professionals, family, friends, and public members contribute to an environment's negative and positive variables.
- Creating a comfortable place for patients to get well again, live, or receive services is integral in ensuring that they leave the location with a positive outlook.
- Implementing easy-to-fix policies or situational adjustments such as better room temperature controls can significantly impact patient comfort, thus raising their satisfaction and lowering acuity.

Keys to Safety:

- These factors all tie together. When an environment is too noisy, patients may have a hard time getting sleep or being comfortable, inhibiting their abilities to recover. This may also limit communication.
- Easy-to-navigate locations are crucial for keeping individuals comfortable and at ease as they seek services.
- Should it arise, are you are in a location that traps your ability to evade violence?
- The overall layout of an environment can add to, or reduce, the safety of a location.

Note Section:

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THE TEAM DYNAMIC

The nature of the team's work

- Each team member must critically understand the assigned support mission of the Crisis Support Team (CRT)

The personalities within the team

- Well-rounded CRTs capitalize on the personalities that naturally pull back and those that naturally push forward.

Working relationships with other people, and the environment in which the team works

- CRTs seek to build customer support bases in a team approach, and understand how the relationships support the environment, and how they support the mission.

Team Dynamics is Usually Good....

For example, when they improve overall team performance or get the best out of individual team members.

Team Dynamics can also be destructive....

For example, when they cause unproductive conflict, and demotivation, and prevent the team from achieving its goals.

The Struggle of Team Dynamics

- Strategies that work for a set of people may not work for others.
- Failure to recognize the importance of team dynamics while managing the facility's safety may limit your team's achievements and increase your team's liability risk.

Enhancing Team Commitment:

- When a team member feels valued by the Captain and other team members, their morale and confidence go up

Proactive Teams Lead to Less Conflict

- Leaders that know and enhance the strengths of team members enable the team to function cohesively.
- Establishing an environment where employees can thrive without conflict involves improving the group dynamic.

Proactive Teams Build Trust

- Responsive leaders foster a collaborative environment where the employees trust each other to get work done.

Developing Better Response Traits

1. Be technically competent in the details of your environment
2. Remember that your work ethic supports the people you serve
3. Maintain flexibility in Response
4. Supporting Conflict Management through Patience and Gentle Persistence
5. Enhance Team Dynamics, both in leading and following
6. Develop Problem- Solving Skills
7. Maintain loyalty to Patient Rights



PROXEMICS - THE FOUR CATEGORIES OF SPACE

What is Proxemics?

- Proxemics is the study of human use of space and the effects that encroachment has on behavior, communication, and social interaction.
- MAB defines four categories of safe space that we all have a tendency to respect, adjust to and confirm. While the SAFE space measurements provided define the distance in each of the categories, it is the individual that determines if they feel safe in them or not.

The Four Categories of Safe Space:

1. Intimate Space

- Intimate Space for embracing, touching, or whispering = Close phase – less than 1 to 2 inches/ Far phase – 6 to 18 inches (15 to 46 cm)

2. Personal Space

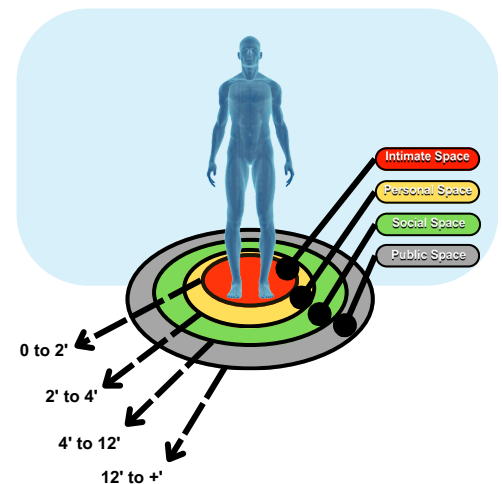
- Personal Space for interactions among good friends or family = Close phase – 1.5 to 2.5 feet (46 to 76 cm)/ Far phase – 2.5 to 4 feet (76 to 122 cm)

3. Social Space

- Social Space for interactions among acquaintances = Close phase – 4 to 7 feet (1.2 to 2.1 m)/ Far phase – 7 to 12 feet (2.1 to 3.7 m)

4. Public Space

- Public Space used for public speaking = Close phase – 12 to 25 feet (3.7 to 7.6 m)/ Far phase – 25 feet (7.6 m) or more.



The influence of SAFE SPACE on the development of SAFE BOUNDARIES...

- The representation of SAFE SPACE is a critical element in defining how we use proxemics to respond to those who enter our environments.
- A SAFE BOUNDARY can be set at any SAFE SPACE intervals or set to encompass them all.
- It is the level the patient feels most comfortable with that establishes the SAFE BOUNDARY.
- It is a SAFE SPACE that influences the patient, which creates an environment better suited to crisis negotiations.

Influencing Space...

- The basic formula for measuring Proxemics is centered around creating intuitive reactionary distance to support the level of crisis communication.
- Knowing what kind of influential footprint your presence can create will help you utilize both space and boundaries to encourage a more relaxed and open platform from which to negotiate.
- The comfort zone, or safe zone, is a learned measurement unique to an individual.



PROXEMICS - THE AVENUES OF APPROACH

Things to try and be aware of...

Pay Attention to:

- Are the responding individuals viewed as help or threat?
- How the team approaches the patient in crisis communicates certain proxemic perceptions.
- Where the response team stands in relation to the crisis.
- Crowding or surrounding an escalated individual is not always the quickest path to peace.
- How the staff members hold their postures - arms crossed, hands on hips, frustrated facial expressions, etc.
- How many staff talk at the same time - too many create a lack of order and confusion.
- Are exits to the room being impeded by body placement of the response team?

The Influence of Proxemics in Situations:

1. **Full Influence** - Divide the area in half and occupy the center
 - By aligning in the center of the room, the Responder influences the entire room. Perceptually, the patient can feel trapped, unable to leave without dealing directly with staff.
2. **Directing Influence** - Leaving intuitive distance open to encourage targeted movement in a specific direction
 - By aligning in a manner, the patient can only really see one true independent route out that has the least amount of staff direct influence.
3. **Independent Influence** - Occupying the least restrictive position in the room to convey open options
 - By aligning in a manner where the patient feels as if they have options.

Unspoken Communication Through Team Alignment:

1. **Team Crowding** - The CRT Team instinctively closes space in front of the patient
 - Be mindful to not crowd the patient if the variables do not require it.
2. **Team Intent** - The CRT Team approaches leading the patient to question the intent of the team
 - Try to not let the team frustration enter into team alignment.
3. **Team Stacking** - The CRT Team approach closes in on the patient from 2-3 sides
 - Sometimes when team members arrive at the crisis situation from different locations team stacking occurs.
4. **Team Trapping** - The CRT Team approach surrounds the patient from all sides
 - Threat levels climb when a patient feels trapped or surrounded.
5. **Full Team View** - The CRT Team approaches from the front with each team member in full view of the patient
 - It may not always be possible, but where safety allows try to be least restrictive in approach.



ASSESSING RISK

Risk assessment helps us to prioritize response options...

- The responder must assess harm and risk of harm to the patient, themselves, and any collateral individuals.

The Types of Risk:

Situational Risk

- An uncertain event or condition, that if it occurs, affects the safety of the surrounding area and those that occupy it.

Inherent Risk

- An assessed level of raw or untreated risk.
- In conflict management, inherent risk is most likely to occur when complex emotions are involved, or in situations that require a high degree of judgment in regard to environmental influence

Unnecessary Risk

- Any risk that can be proactively mitigated or reduced by planning, training, or an increase in the level of awareness.

Unacceptable Risk

- Any risk where immediate action must be taken to prevent harm and injury to self, patients, and collateral individuals within the milieu.

Risk Management vs Crisis Management...

Risk Management:

- There are no risk-free situations where conflict and crisis exist because there are always several unknown variables that can influence the safety of events.
- Risk management is not about eliminating risk but identifying, assessing, and managing risk so that harm is prevented or reduced.

Crisis Management:

- How an organization deals with disruptive and unexpected events that threaten to harm the organization, patients, or the general public.
- Crisis management is considered to be the most crucial process in public relations.

Three Elements That are Common in a Crisis...

1. A threat, or the action of harm to the organization, patients, or collateral occupants.
2. The Element of Surprise
3. A Short Decision Time



IMMINENT DANGER TO SELF OR OTHERS

Defining Imminent Danger to Self or Others:

- Perceived threat determines whether either criterion is met and whether to take an individual down
- Everyone has a different Perception of Threat, leaving everything up for interpretation

Risk Factors: Indications of Danger to Self

- Current or constant knowledge of others who have attempted or committed suicide
- Recent breakup with a loved one
- The recent loss of a loved one due to death
- The recent loss of job or school
- Debilitating physical illness

Risk Factors: Indication of Danger to Others

- Intoxication or ongoing substance use
- No current support structure at home or community
- Current or history of high anxiety episodes
- Previous violent behavior (hurting animals, hurting others)
- Paranoia
- Fascination with and playing with fire or dangerous objects
- Anti-social behaviors (very few friends)
- Victims of abuse at home or school
- Not taking responsibility for oneself

Civil Commitment Laws...

Every state has civil commitment laws that establish criteria for determining when involuntary treatment is appropriate for individuals with severe mental illness who cannot seek care voluntarily.

Criteria for Inpatient Treatment:

- Be a danger to self or others
- Be unable to attend to basic physical needs such as food, clothing, or shelter necessary to avoid serious harm in the near future
- Be unable to understand the need for treatment and continued behavior reasonably expected to result in significant physical harm to self/others.
- Show an impaired understanding of the need for treatment makes voluntary participation in treatment unlikely.
- Non-compliant with the recommended treatment necessary to prevent a relapse of harmful deterioration of the condition
- Demonstrate a history of noncompliance that includes two hospitalizations in the past 36 months.
- Acts/threat/attempts of violence to self/others in the past 48 months.



THE PERCEPTION OF THREAT

MABPRO Recognizes FOUR reasons why some risks are perceived to be more or less serious than they actually are:

- 1** The propensity of some to over-react to intentional actions, and under-react to accidents, abstract events, and natural phenomena.
- 2** Overreacting to things that offend our morals. When people feel insulted or disgusted, they generally do something about it.
- 3** The tendency to base the perception of threat, without the need to verify, on the prediction of the timing and location of dangers before they actually happen.
- 4** Responders that under-react to changes that occur slowly and over time.

What is Perception of Threat?

- Perceived Threat is what activates our psychological responses which determine our decisions of whether to Escape, defend Ourselves, or Subdue and individual when faced with a Crisis, or responding to a potentially dangerous situation within our environment.

Why is it Important?

- The perception of threat is crucial in the Responder's ability to navigate conflict toward a more desired outcome.
- Unlike facts, perception is subjective to the individual. Risk does not always equate to a threat, but individual perception can elevate the response to risk as if it were a threat... and, as such, increase the negative impact of risk.

Note Section:



THE 10 MABPRO CRISIS RESPONSE PRINCIPLES

1. See things as they are

- Strong crisis leaders live on the front end of reality. They recognize events and their significance and do not shy away from the consequences of what they see.

2. Be able to see the big picture

- Observe all of the moving parts and understand what is the cause and what is the effect.

3. Develop Multiple Options

- As you identify the problems, be willing to consider multiple approaches to how you might address them.

4. Be Decisive

- Taking ownership of the solution means being decisive.

5. Use Team Collaboration

- Identify the talents on your team and work with those individuals towards a solution that **most** support and **most** can live with.

6. Dissenting Opinions are not Always Wrong

- Unsuccessful leaders listen only to those who agree with them and often encourage one-dimensional thinking.

7. Be Calm, Courageous, and Positive

- Recognize when you are consumed with a sense of urgency and remain even-tempered.
- Recognize that violent behavioral events cause the whole world to observe.
- Be courageous enough to make decisions you and your training have determined to be the right ones.

8. Take Risk, But Take No Unnecessary Risk

- Crises often bring the leader face-to-face with a set of situations they have not previously seen.
- They have questions to which they do not know the answers. Gathering contrarian viewpoints from individuals with whom they might disagree, but respect likely means they may create solutions not previously tried, the outcomes of which may be unknown.

9. The Elusive 100% Rule

- Even if the decision needs to be “fine-tuned” for implementation, leaders are comfortable making it. We do our best to chase and capture 100% of our efforts toward perfection, but we know how Elusive 100% really is.

10. Prepare to Admit Mistakes

- The volume of decisions required in multi-faceted crises can almost guarantee that not every decision will be 100% correct.

Note Section:

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DEFINING & RESPONDING TO STRESS

Defining & Responding to Stress

The Effects of Chronic Stress

- Depression and anxiety
- The pain of any kind
- Sleep problems
- Autoimmune diseases
- Digestive problems
- Skin conditions, such as eczema
- Heart disease
- Weight problems
- Reproductive issue
- Thinking and memory problems

Signs and Symptoms of Stress Overload

Cognitive Symptoms:

- Memory Problems
- Inability to concentrate
- Poor judgment
- Seeing only the negative

Emotional Symptoms:

- Depression or general unhappiness
- Anxiety and agitation
- Moodiness, irritability, or anger
- Feeling overwhelmed

External Causes of Stress:

- Major life changes
- Work or school
- Relationship difficulties
- Financial problems
- Being too busy
- Children and family

Improving your ability to handle stress:

- Get Moving
- Connect to Others
- Engage Your Senses
- Learn to Relax
- Eat a Healthy Diet
- Get Your Rest

Physical Symptoms:

- Aches and pains
- Diarrhea or constipation
- Nausea, dizziness
- Chest pain, rapid heart rate

Behavioral Symptoms:

- Eating more or less
- Sleeping too much or too little
- Withdrawing from others
- Nervous habits (e.g. nail biting)

Internal Causes of Stress:

- Pessimism
- Inability to accept uncertainty
- Rigid thinking, lack of flexibility
- Negative self-talk
- Unrealistic expectations/ perfectionism
- All-or-nothing attitude



FUNDAMENTAL REASONS WHY PEOPLE LOSE CONTROL

Professional responders should maintain a clear ability to read the fundamental reasons why people lose control.

Losing Control- When Anger becomes Rage:

- Anger stops being positive when it becomes toxic due to a lack of control to exercise over. When you stop having control and give this over to anger, the problems start: this feeling invades us and clouds our reasoning.

Two Fundamental Reasons Why People Lose Control:

1. Communication- They have no ability to communicate or don't have the coping skills to develop the communication process. They have learned badly and behave the only way they know how to get attention or what they want.

2. Symptoms of Their Illness- Drunk, on drugs, psychotic, low functioning, autistic, reaction to medications, dementia. Something having to do with the illness would promote them to become aggressive or strike out because of it.

How Some People Communicate:

- Some view the emotion of communication as the most important element of the message.
- Some confuse the volume of communication with reception clarity.
- Some over-communicate negativity with an expectation of a positive result.

Symptoms of Illness:

Over/Under Medicated:

- Incorrect medication regimen
- Self-medicating
- Wrong-Med - Wrong person
- Inadequate medication supervision

Mental Illness / Dual Diagnosis

- Schizophrenia
- Depression
- Bi-polar
- PTSD
- ADHD
- OCD

Developmental Disabilities

- Autism
- Downs Syndrome
- Learning Disorders
- Intellectual Disabilities

Substance Abuse

- Drugs (illegal)
- OTC Medications
- Prescribed medications
- Alcohol





M-TAC DEFINED

What is Communication?

- Communication is a **TWO-WAY** process.
- Communication is both the **SENDING** and **RECEIVING** of messages

Understanding Types of Communication:

- **Auditory** - Hearing, Speaking, or Auditory Language. Auditory communicators learn by listening and by what they hear.
- **Visual** - Seeing, visualizing, visual messages, or body language. Visual communicators learn by seeing and memorizing by looking at pictures.
- **Kinesthetic** - We use physical actions, either positive or negative, that we use to communicate. Kinesthetic communicators learn by doing, moving, acting out, and hands- on experience.

The Goal of the M-TAC Response:

- The Goal of the Professional Responder is to encourage the development of Voluntary Cooperation, Collaboration, or Compliance
- This is done to avoid the use of force and in the least restrictive manner available to the Responder

Try to Follow the M-TAC Response Pattern:

- 1.ASK: How can I help you?
- 2.Set the Context of the Communication
- 3.Give Options
- 4.Confirm Non-Compliance/ or Compliance
- 5.ACT: Disengage and/ or Escalate Response

M-TAC Levels of Force - starting with the least restrictive

- Professional Demeanor
- Words Chosen
- Protective Safe Evasion Options
- Controlling Clinical Containment Options

M-TAC response Principles:

- **Respond Don't React:** Responders and the teams they lead need to seek alternatives to reacting to threats and start responding to the developing situation.
- **Keep Communication Moving:** The decision to use force is based on the verbal interactions we maintain with the person in crisis.
- **Recognize the benefit of differences.**
- **Acknowledge the effort** and the intent of messages being sent.
- **Don't be afraid** to explore different approaches.



M-TAC DEFINED

Sending Messages Appropriately

Strategies to ensure a clear message:

- **ACKNOWLEDGE** That you heard the message
- **BE AWARE** and cautious against the tendency to judge, sometimes the patient is right
- **ALLOW** for appropriate differences in communication styles
- **MEET** on common ground

Try to Enhance Communication Effectiveness:

- Do not hurry the patient - give them five seconds to respond
- Break a task into small pieces - One instruction given at a time
- Use visual cues to communicate
- Provide slow, brief, clear instructions
- Use direct, consistent communication
- Where possible, use a team approach

Note Section:



WHAT IS CRITICAL THINKING?

What is Critical Thinking?

- Critical thinking is that mode of thinking – about any subject, content, or problem – in which the thinker improves the quality of his or her thinking by skillfully taking charge of the structures inherent in thinking and imposing intellectual standards upon them.

A Well-Cultivated Critical Thinker...

- Raises vital questions and problems
- Gathers and assesses Relevant Information
- Thinks open-mindedly within alternative systems of thought
- Communicates effectively with others

Enhance Communication Through Critical Thinking:

- Use role modeling to demonstrate correct behavioral response
- Develop well-received “Why” questions.
- Set narrative for cause and effect
- Thinking out loud
- Compare similar situations
- Verbalize Examples
- Listen and expect an answer to your message

Obstacles to Critical Thinking:

- Reliance on authority or someone else
- Rigid thinking
- Cultural conditioning
- Frame of reference
- Hasty Moral Judgment
- Resistance to change
- Emotional Related Dysfunction

Note Section:



CRITICAL THINKING

What is Emotional Related Dysfunction?

- Thinking that is driven by emotion and not reason can sometimes take on emotionally related dysfunction.
- All-or-nothing thinking
- Overgeneralization
- Excessive worrying
- Automatically disqualifying an opinion or position
- Criticism; contempt

Understanding Reactionary Thinking:

- Reactive thinking is crisis-based thinking, coming up with solutions after problems develop.
- A reactive thinker often spends too much of his time-fighting fires.
- Crisis-driven reactive thinking may be more prone to feeling stress
- Circumstances easily blindsides a reactive thinker

Note Section:



TRIGGER WORDS & PHRASES

Trigger Words/ Phrases = A topic, word, or phrase that emotionally sets someone off. Could refer to anger, or reliving a traumatic experience.

- Usually negative by connotation, the intent is dismissive and offers minimal resolution.

Examples of Trigger Words/Phrases:

- No
- Later
- Seriously
- OMG
- Stop it!
- Why?
- Easy!
- Relax!
- What's your problem?
- Not Now!
- You need to..
- What is it now?
- That's not my job
- Because i said so!
- Don't make me!

Persuasive Words/ Phrases: Usually positive by connotation, the intent is encouraging, and offers options towards resolution.

Traits of a Persuasive Person:

- They know their audience
- They connect
- They are not pushy
- They use positive body language
- They are not mousy
- They are clear and concise
- They are genuine
- They acknowledge your point of view
- They ask good questions
- They paint a picture
- They leave a strong first impression
- They know when to step back
- They greet people by name
- They are pleasers

Note Section:



USING NONVERBAL COMMUNICATION

Nonverbal communication refers to gestures, facial expressions, tone of voice, eye contact (or lack thereof), body language, posture, and other ways people can communicate without using language.

Types of nonverbal communication- MAB recognizes there are seven basic types of nonverbal cues and behaviors.

1. Facial Expressions

- Facial expressions are responsible for a huge proportion of nonverbal communication.

2. Gestures

- Deliberate movements and signals are an important way to communicate meaning without words.

3. Paralinguistics

- Paralinguistics refers to vocal communication that is separate from actual language.

4. Body Language and Posture

- Body language is the unspoken element of communication that we use to reveal our true feelings and emotions.

5. Eye Gaze

- People utilize eye gaze as a means to determine if someone is being honest.

6. Haptics (touch)

- Haptic communication is a branch of nonverbal communication that refers to the ways in which people and animals communicate and interact via the sense of touch.

7. Appearance

- Physical or personal appearance is one of the most important kinesics that plays a vital role in communicating messages to others.

Nonverbal communication skills examples:

- Avoid slouching
- Steer clear of smiles or laughter when messages are serious
- Display some animation with your hands and facial expressions to project a dynamic presence
- Don't bring your phone, a drink, or anything else that could distract you during an interview or meeting
- A nod to demonstrate understanding
- Rotate eye contact with various speakers in group settings or networking situations
- Stay calm even when you're nervous
- Steer clear of monotone delivery
- Wait until the person is done talk to respond

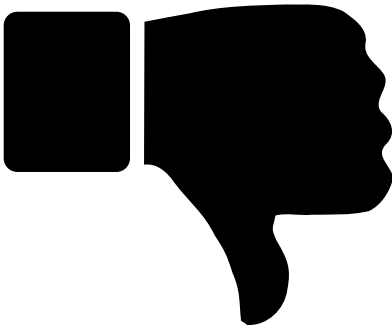


WHAT IS ACTIVE LISTENING?

“Active listening is Fully concentrating on what is being said rather than just passively ‘hearing’ the speaker’s message.

Keys to Good Listening Habits

- Pay Attention
- Show you are listening
- Provide Feedback
- Defer Judgment
- Respond Appropriately
- Reflecting back on what you heard
- Exhibiting positive body language



Try to Avoid These Bad Listening Habits

- Lack of interest in the subject
- Focus on the person, not on the content
- Interrupting
- Focus on the detail, missing the big picture
- Force-fitting their ideas into your mental models
- Daydreaming
- Letting emotions block the subject

When someone is listening, they define the percentage of the intent of the message as follows:

- Delivery of Content = 0 -10%
- Voice/Tone Used in Message Delivery = 11 - 40%
- Visual Messages Delivered = 41 - 60%
- Kinesthetic Messages Delivered = 61- 90%

Note Section:



INWARD PLANNING

Why you need to think before you speak...

1. Being careful with your words allows you to grab opportunities and get ahead in life.
 - Your speech really can have a dramatic impact on your life and your success.
2. Human beings are social beings - it's important to know how to communicate effectively.
 - Not only is what you say important but how you say it.
3. When we speak before we think, we say things we regret and then people get hurt.
 - If you've ever sent an angry email or text to "tell someone off" and regretted it, then you know how important your words really are in life.
4. The words you use shape your mind.
 - Many of us naturally use negative language in life, even when we talk to ourselves. But this could be having a more dramatic impact on your life than you think.

Before you speak, THINK

T - Is it True?

H- Is it Helpful?

I - Is it Inspiring?

N- Is it Kind?

The Power of Words

1. **Words have powers.**
 - Articulation and inflection can create a sense of confidence and trust if used correctly or create confusion and fear if used poorly.
2. **Your words will define who you are and who you are not.**
 - Customer service starts with the delivery of our intent to help and is done in a manner that patients can trust.
3. **Your words can help and they can hurt. Sometimes simultaneously.**
 - Crisis response is often full of triggering opportunities to land on the negative—mindful thinking and planning to avoid those accidental verbal landmines that cause unintentional harm.
4. **Your choice of words is a sign of your intelligence or your ignorance.**
 - The Responder should be proactively orientated, measured in response, and reasonable to communicate the understanding of the patient's needs.
5. **You can not hide from your words or the truth of what they convey.**
 - We are here to help solve problems; we are here to help identify options; we sometimes listen. Speaking with thoughtful delivery helps us exercise the power of our words to clarify. We understand the truth behind our messages, and we foster trust in how they are delivered.



USE APPROPRIATE PITCH AND VOLUME:

Speaking **TONE** and **VOLUME** can help create a positive first impression:

- Maintain a medium volume, not loud enough to be perceived as irritating or arrogant and not soft enough to be viewed as timid. A pleasantly pitched voice of medium volume can show an understanding of the situation and etiquette. It will demonstrate that you are comfortable in your surroundings while respecting the gravity of the situation.

To **SPEAK** well, it is first important to **LISTEN** well.

- Make sure you pay close attention to the words of the interviewer and stay focused on their words rather than on the room or noises coming from outside. You can show you are listening by nodding, smiling or by the use of words and phrases such as, “I see,” or “That’s interesting,” or “I’ll definitely note that point.” You can also write down any interesting points that you may want to refer to later.

A good conversation will occur between the responder when the responder makes a **SUGGESTION**

- That shows that they may want you to interject and do so even if the sentence wasn’t phrased as a question. If the interview pauses, take your cue and pick up the conversation thread.

Keep your answers to the **POINT**

- Be clear and direct with your questions and answers, even if asked a question that encourages an in-depth response. Aim to express yourself with the fewest words you can.

Be **HONEST** about your strengths and weaknesses

- Be honest and discuss how you’re trying to improve. This strategy can provide a clear understanding of what you’re capable of and what you may need additional training on when you are hired.

HUMOR serves many purposes

- Such as putting people at ease, reducing tension, allowing people to make connections, and cheering people up. It also acts as a bridge, allowing someone to bypass formalities to get to know you better. Using light humor during an interview can be helpful for verbal communication, but it should be done sparingly.

GOOD MANNERS are always a wise policy

- Use greetings when you arrive and leave, and introduce yourself to everyone in the room if there is more than one responder. Accept water or coffee if it is being served to everyone, but decline if you are offered but no one else is drinking anything. Apologize if you accidentally interrupt someone while speaking and acknowledge others’ statements. When you leave, thank everyone in the room for their time.



NEGOTIATION FOR SUCCESS

What is the Process of Negotiation?

- Negotiation is a method by which people settle differences. It is a process by which compromise or agreement is reached while avoiding arguments and disputes.

What are the Three Dynamics of Beginning a Negotiation?

1. Try to understand as much about the individual or situation you are faced with.
2. Try to understand your reaction to the individual or situation you are faced with.
3. Try to understand how to attempt to solve the issue you are faced with.

The Starting steps toward negotiation...

- **Step One-** Get some kind of dialogue moving two ways, either positive or negative, as long as vital information is being exchanged.
- **Step Two-** Find out what that individual needs.

The Five Stages of a Principled Negotiation:

1. Separate people from the problem
2. Focus on interests, not positions
3. Invent options for mutual gain
4. Use objective criteria
5. Know your BACA (Best Alternative Course of Action)

What is a WIN/WIN Situation?

- A WIN / WIN Situation is creating a mutual compromise between two adversaries, resulting in a beneficial outcome for both parties.

Note Section:

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IDENTIFYING & PRESENTING OPTIONS

Definition of a Crisis: A disruption or breakdown in a person's family's routine or usual pattern of functioning. A crisis cannot be resolved by a person's customary problem-solving resources/skills.

A crisis may be different from a problem or an emergency...

- While a problem may create stress and be difficult to solve, the family or individual is capable of finding a solution.
- An emergency is a sudden, pressing necessity, such as when a life is in danger because of an accident, a suicide attempt, or family violence.
- If a situation can wait 24 to 72 hours for a response, without placing an individual or a family in jeopardy, it is a crisis and not an emergency.

Three Basic elements of a crisis are:

A stressful situation, difficulty in coping, and timing of intervention.

Situations Which Can Lead to a Crisis:

- **Family Situations** - child abuse investigation, spouse abuse, an unplanned pregnancy, a parents desertion, a chronically ill family member, and lack of social supports
- **Economic Situations** - sudden chronic financial strain is responsible for many family crises, such as loss of employment, eviction, no food, theft of household cash or belongings, high medical expenses, missed child support payments, etc.
- **Community Situations**- neighborhood violence, inadequate housing, a lack of community resources, and inadequate educational programs illustrate some ways the community may contribute to a family crisis.
- **Significant Life Events**- events that most view as happy, such as marriage, the birth of a child, a job promotion, or retirement, can trigger a crisis in a family; a child enrolling in school, the behaviors of an adolescent, a grown child leaving the home, the onset of menopause, or the death of a loved one.
- **Natural Elements**- crises are created by disasters such as floods, hurricanes, fires, and earthquakes, or even extended periods of high heat and humidity, or gloomy or excessively cold weather.

Note Section:

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IDENTIFYING & PRESENTING OPTIONS

Responding to crisis:

Create a crisis management plan that includes:

- When to disengage from an escalating situation
- Making sure your exits are always unobstructed
- Prior removal of any items that could be used as a weapon

The most important things one must do in any “crisis” situation are:

- Disseminate accurate information as quickly as possible
- Respond to incorrect information that may be circulating
- Activate appropriate mechanisms to keep the public, media and stakeholders informed on an ongoing basis.

Note Section:



CONFLICT RESOLUTION MISTAKES TO AVOID

Quickly defining what not to do:

1. **Avoiding Conflict Altogether**

- Rather than discussing building frustrations in a calm, respectful manner, some people just don't say anything until they're ready to explode.
- This may seem to be the less stressful route - but this usually causes more stress to both parties. It's much healthier to address and resolve conflict.

2. **Avoid Being Defensive**

- Defensive people steadfastly deny any wrongdoing and work hard to avoid looking at the possibility that they could be contributing to a problem.
- This creates long-term problems for people who don't feel listened to and unresolved conflicts continue to grow.

3. **Avoid Overgeneralizing**

- Overgeneralizations can increase the drama when you're resolving an argument.
- Avoid starting sentences with "you always" and "you never" as in, "You always come home late!" or "You never do what I want to do!"
- This stands in the way of true conflict resolution and increases the level of conflict.

4. **Avoid the NEED to be Right**

- The need to be "right" can prolong and intensify conflicts.
- It's damaging to decide that there's a "right" and a "wrong" way to look at things.
- Look for a compromise or agree to disagree, and remember that there's not always a "right" or a "wrong," and that two points of view can both be valid.

5. **Avoid "Psychoanalyzing" / Mind-Reading**

- "Psychoanalyzing" the other person is something to avoid in a conflict.
- This creates hostility and misunderstandings.

6. **Avoid Forgetting to Listen**

- This keeps you from seeing their point of view and keeps your partner from wanting to see yours.

7. **Avoid Playing the "Blame Game"**

- Some people handle conflict by criticizing and blaming the other person for the situation.
- They see admitting any weakness on their own part as a weakening of their credibility, avoid it at all costs, and even try to shame them for being "at fault."

8. **Avoid Stonewalling**

- Stonewalling shows disrespect and in certain situations, even contempt while at the same time letting the underlying conflict grow.



- The assault cycle identifies a pattern of observable behavior in many individuals before an act of violence.

- In the Assault Cycle, the baseline represents behavior that can be normal for an individual when consistent with the most common expression for that person.
- “Normal” is often used to describe an individual's behavior that conforms to the most common practice in society.

- **Fear-Inducing Events** - Give the person the perception he/she is in danger or about to lose something of value.
- **Frustrating Circumstances** - Give the person the idea that his/ her efforts or demands have been useless.

- Face turns ashen, white pallid
- Cold Sweats
- Clammy Hands
- Beads of sweat on the lip or forehead
- Eyes appear damp

- An inability to speak
- Shakiness in the limbs
- Chest Pain
- Adrenaline Spike

[illegible]



UNDERSTANDING THE ASSAULT CYCLE

1. The Triggering Event

- The Trigger Event is signified by the movement away from how the patient usually behaves.

2. The Escalation Phase

- Behavior deviates more and more from baseline behavior. Patients can become focused on a particular issue or person.
- The person's muscles become increasingly tense and active; his/her ritual behaviors of combat occupy more and more space in the overall behavioral pattern.

3. The Redirection/Distraction Phase

- At this point, the patient is most likely to be distracted and/or redirected away from the crisis point.

4. The Crisis Apex Phase

- People in the crisis phase are highly volatile and need to be addressed in simple, direct, and non-provoking statements.

5. The Recovery Phase

- The Patient slowly returns to their baseline behavior. The service user's heightened state of physical and psychological arousal can remain a threat for up to ninety minutes due to the bloodstream's adrenaline level.

6. The Post-Crisis Depression Phase

- The Patient dips below the baseline.
- After reaching normal physiological levels, the body enters a short period in which the heart rate slips below average to regain balance (homeostasis).

Note Section