# MANAGING VIOLENCE AND AGGRESSION

## Three Day Course Outline

- 1. Theories behind violence and aggression
- 2. De-escalation skills
- 3. Personal safety issues
- 4. Reasonable force and legal context
- 5. Report writing skills
- 6. Physical intervention strategies and skills (breakaway and restraint).

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- 1. Observations of pre-training safety precautions, participation in callisthenic sessions, work safety.
- 2. Non-confrontational posturing.

#### Attacks to the Head.

- 3. Hair-pull combination
- 4. Defence against punch

#### Strangulation Holds

- 5. Frontal strangleholds Pull Away/Windmill/Wall work
- 6. Rear stranglehold Windmill/Rear choker hold

#### Clothing Grabs

- 7. Diagonal, collar and corresponding
- 8. Head butt

#### Bear Hugs

9. Frontal – Overarm/Underarm. Rear Bear Hug – Overarm/Underarm

## A Selection of handholds

- 10. Single handed grabs
- 11. Two handed grabs

#### <u>Kicks</u>

- 12. Kicks Standing
- 13. Combination assaults

#### Effective utilization of:-

- 15. Assessing dangerousness/non-confrontational posturing
- 16. Ability to monitor body language
- 17. Verbal/non-verbal cues (de-escalation skills)
- 18. Minimum and reasonable force
- 19. Continuous patient care

#### Upper limb management

- 20. Passive holds
- 21. Arm immobilization (Swan neck)
- 22. Finger/thumb hold
- 23. Interchanging wrist holds

#### Team work : Demonstrate ability to:-

- 24. Adopt roles 1, 2 and 3
- 25. Maintain airways, care and protect patient's head during restraint
- 26. Manage upsurges of violence; negotiate doorways/obstacles/corridors
- 27. Implement passive removal techniques
- 28. Instant removal techniques (face up and face down)
- 29. Implement examination holds
- 30. Apply lower limb techniques (face up and face down)
- 31. Apply staff replacement techniques
- 32. Seclusion skills (relocate a person using head to door method)

## <u>Team work</u>

- 33. De-escalate situations and utilize passive control techniques
- 34. Form a restraint team, enter re-enter rooms
- 35. Manoeuvre controlled limb(s) into natural position
- 36. Place an unconscious casualty into the recovery position

#### Incident management

- 37. Take control of untoward incidents and maintain standards of professionalism
- 38, Communicate effectively
- 39. Prevent an untoward situation escalating
- 40. Plan strategy and make decisions
- 41. Manage and organize resources
- 42. Use minimum force in stressful situations
- 43. Preserve and maintain the dignity and safety of patients throughout restraint
- 44. Participate in post incident discussions
- 45. Recognize the importance of report writing skills.

#### A CERTIFICATE OF ACHIEVEMENT WILL BE ISSUED TO SUCCESSFUL CANDIDATES