

Title	Describe communication and correct use of de-escalation approaches in mental health and addiction services		
Level	4	Credits	6

Purpose	People credited with this unit standard are able to describe: the role of communication in de-escalation when working in mental health and addiction services, the triggers that can lead to aggressive behaviour, and the correct use of de-escalation when working in mental health and addiction services.
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Classification	Health, Disability, and Aged Support > Mental Health and Addiction Support
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Available grade	Achieved
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Guidance Information

- 1 Legislation and codes relevant to this unit standard include but are not limited to:
 - Criminal Procedure Act 2011;
 - Criminal Procedure (Mentally Impaired Persons) Act 2003;
 - Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulations 1996;
 - Health Practitioners Competence Assurance Act 2003;
 - Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003;
 - Mental Health (Compulsory Assessment and Treatment) Act 1992;
 - Misuse of Drugs Act 1975;
 - Oranga Tamariki Act 1989 (Children's and Young People's Well-being Act 1989);
 - Privacy Act 1993;
 - Protection of Personal and Property Rights Act 1988;
 - Substance Addiction (Compulsory Assessment and Treatment) Act 2017.

- 2 New Zealand Standards relevant to this unit standard include:
 - NZS 8134.0:2008 *Health and disability services (general) Standard*;
 - NZS 8134.1:2008 *Health and disability services (core) Standards*;
 - NZS 8134.2:2008 *Health and disability services (restraint minimisation and safe practice) Standards*;
 - NZS 8134.3:2008 *Health and disability services (infection prevention and control) Standards*.
 New Zealand Standards are available from <https://www.standards.co.nz>.

- 3 References:
 - American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington DC: American Psychiatric Association. Available at: <https://www.psychiatry.org/psychiatrists/practice/dsm>.

- Ball, T., Bush, A., & Emerson, E. (2004). *Psychological interventions for severely challenging behaviours shown by people with learning disabilities: Clinical practice guidelines*. Leicester: The British Psychological Society. Available at: <http://www.westerncare.com/uploads/2008/Challenging.pdf>.
- Le Va, Pasifika within Te Pou, The National Centre of Mental Health Research, Information and Workplace Development. (2009). *Real Skills plus Seitapu – Working with Pacific Peoples*. Auckland: Le Va. Available at: <https://www.leva.co.nz/resources/lets-get-real---real-skills-plus-seitapu---working-with-pacific-peoples-le-va>.
- Mental Health Commission – Te Kaitātaki Oranga; Ministry of Health. (1998). *Guidelines for Clinical Risk Assessment and Management in Mental Health Services*. Wellington: Ministry of Health in partnership with the Health Funding Authority. Available at: [https://www.moh.govt.nz/notebook/nbbooks.nsf/0/2FE380C25ED2F1B34C25668600741EBA/\\$file/mentalra.pdf](https://www.moh.govt.nz/notebook/nbbooks.nsf/0/2FE380C25ED2F1B34C25668600741EBA/$file/mentalra.pdf).
- Te Pou o te Whakaaro Nui. (2012). *De-escalation and restraint training for clinicians: a brief literature review*. Auckland: Te Pou o te Whakaaro Nui. Available at: <https://www.tepou.co.nz/uploads/files/resource-assets/deescalation-and-restraint-training-for-clinicians-a-literature-review.pdf>.
- Te Pou o te Whakaaro Nui & Ministry of Health. (2018). *Let's get real: Real Skills for people and whānau with mental health and addiction needs*. Auckland: Te Pou o te Whakaaro Nui. Available at: <https://www.tepou.co.nz/initiatives/lets-get-real/107>.

4 Websites with additional useful information:

- <https://www.challengingbehaviour.org.uk/> (information and support to parents and professionals caring for people with severe learning disabilities and challenging behaviour);
- <https://www.mencap.org.uk> (advice and information about tackling challenging behaviour).

5 Definitions:

- *Correct use of de-escalation* is used in accordance with NZS 8134.2:2008 Health and disability services (restraint minimisation and safe practice) Standards (refer to Guidance Information 2).
- *De-escalation* refers to understanding triggers for behaviour, early recognition of problems, assessment of the situation, timely interventions, self-awareness, staying calm or appearing to be calm, effective communication strategies, rapport building, empathetic and active listening, and negotiation strategies.
- *People accessing mental health or addiction services* may also be known as consumers, clients, patients, tūrora, or tangata whai ora in particular contexts and settings.
- *Problematic behaviour* refers to behaviour, on the part of a person with addiction issues, that has the capacity to interfere with the person's and carer's daily life, and to cause physical or emotional harm to self and to others (peers, staff, whānau and family). Problematic behaviour may be challenging and/or threatening attitudes, words, or actions including but not limited to: aggression; self-harm; destructive behaviour; inappropriate and withdrawn behaviour.
- *Triggers* include biological, cultural, environmental, psychological, and social elements.

- 6 Evidence is required to be in accordance with an appropriate source, including but not limited to the references and websites listed above.
- 7 Support should aim to: maintain, improve, or restore a person's independence and/or interdependence; utilise the person's existing strengths; and, where possible, utilise the resources of the local community.
- 8 Support provided for people accessing mental health and addiction services may include natural supports.
- 9 The candidate's practice must reflect appropriate values, processes, and protocols in relation to working with Māori and Pasifika peoples and/or people from other cultures, in a range of settings and environments.

Outcomes and performance criteria

Outcome 1

Describe the role of communication in de-escalation when working in mental health and addiction services.

Performance criteria

- 1.1 The candidate's own verbal and non-verbal communication is described in terms of its potential impact on people accessing mental health and addiction services.
- 1.2 The role of effective verbal communication in de-escalating problematic behaviour is described in accordance with an appropriate source.

Range evidence is required for two examples of the use of effective verbal communication in de-escalation.
- 1.3 The role of non-verbal communication in de-escalating problematic behaviour is described in accordance with an appropriate source.

Range evidence is required for two examples of the use of non-verbal communication in de-escalation.

Outcome 2

Describe the triggers that can lead to aggressive behaviour, and the correct use of de-escalation when working in mental health and addiction services.

Performance criteria

- 2.1 Types of triggers that can lead to aggressive behaviour by people accessing mental health and addiction services are described in accordance with an appropriate source.

Range evidence is required for four possible triggers.

- 2.2 The correct use of de-escalation approaches with people accessing mental health and addiction services displaying aggressive behaviour is described in accordance with an appropriate source.

Range evidence is required for four approaches, one of which uses a team approach.

Planned review date	31 December 2024
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Status information and last date for assessment for superseded versions

Process	Version	Date	Last Date for Assessment
Registration	1	21 July 2011	31 December 2014
Revision	2	17 May 2012	31 December 2014
Revision	3	14 December 2012	31 December 2021
Review	4	28 May 2020	N/A

Consent and Moderation Requirements (CMR) reference	0024
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This CMR can be accessed at <https://www.nzqa.govt.nz/framework/search/index.do>.

Comments on this unit standard

Please contact Careerforce info@careerforce.org.nz if you wish to suggest changes to the content of this unit standard.