



CENTER OF EXCELLENCE
FOR BEHAVIORAL HEALTH IN NURSING FACILITIES

De–Escalation Strategies In–Service Toolkit

Welcome to the Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF) De-Escalation Strategies In-Service Toolkit for staff development.

This training toolkit is designed to provide nursing facilities with guidance on how to deliver high-quality behavioral health training for staff at all levels, whether they work directly or indirectly with residents. Helping nursing facility staff to increase their behavioral health knowledge is essential for improving resident care. Behavioral health training equips staff with the skills to manage complex behavioral needs effectively and safely; boosts staff confidence in working with residents with behavioral health disorders; and may also assist with meeting training requirements. According to §483.40, a facility must provide behavioral health training consistent with the facility assessment at §483.71. (Participation in this training does not guarantee compliance with this requirement.)

The de-escalation toolkit aims to equip staff with the knowledge and techniques necessary to prevent escalating behaviors and enhance safety within a nursing facility. The de-escalation toolkit offers clear guidance on understanding behavioral patterns, using empathy, and directing efforts toward constructive solutions.

This training strengthens the team's ability to provide compassionate care and fosters a culture of empathy and understanding within the facility.

The training will take approximately **60 minutes** to complete when done in a group setting and **30 minutes** when completed independently. It includes the following three segments:

1. FACT SHEET

The fact sheet is a one-page information sheet that attracts attention and persuades action based on the content.

2. BITE-SIZED LEARNING

The bite-sized learning is a 5 to 10-minute narrated PowerPoint presentation for a deeper dive into the topic.

3. MODULE

The module is a 15 to 20-minute structured learning course. The module begins with a mandatory pre-test and concludes with a mandatory post-test, that is required to receive a certificate of completion.

Training Delivery Options

Learners can take this training in two ways, based on their availability - by completing the online independent training or by attending an in-person group training event.

To access the fact sheets, bite-sized learning videos, and modules referenced in this toolkit, please visit the Centers for Medicare & Medicaid Services' Nursing Home Training and Resources page: <https://www.cms.gov/about-cms/what-we-do/nursing-homes/providers-cms-partners/training-resources>.

1. Online Independent Training

Learners can work at their own pace.

A. Review the fact sheet to learn about the importance of nonverbal communication: **The Do's and Don'ts of Nonverbal Communication**.

B. Watch the bite-sized learning to better understand how to use de-escalation strategies to assist residents experiencing distress: **De-escalation Strategies- BSL**.

C. Complete the learning module as follows:

- i. Select **De-escalation Strategies - Module**.
- ii. Watch the video.
- iii. Pause the video when prompted to answer the knowledge checks.

2. In-person Group Training

For in-person group training, the nursing facility designates a facilitator to lead the session. Learners attend the training at a specified time. Use this group format as part of onboarding, annual training, agency staff training, community and family education, or just-in-time training.



In-person Group Training

These instructions will help facilitators with planning and time management so they can adapt to the dynamics of the learners. It also supports facilitators with strategies for maintaining engagement, achieving training objectives, and ultimately contributing to successful training outcomes.

De-escalation Strategies Training Objectives

By the end of the training, learners will be able to:

1. Identify best practices for nonverbal communication with residents.
2. Recognize how escalation and de-escalation impact residents, staff, and the overall care in nursing facilities.
3. Identify early warning signs of escalating behaviors.
4. Evaluate the role of personal readiness (self-check) in de-escalation.
5. Describe how to effectively de-escalate an event.



Getting Prepared Checklist for the Facilitator

Four to six weeks prior to the training session:

To access the fact sheets, bite-sized learning videos, and modules referenced in this toolkit, please visit the Centers for Medicare & Medicaid Services' Nursing Home Training and Resources page: <https://www.cms.gov/about-cms/what-we-do/nursing-homes/providers-cms-partners/training-resources>.

- ❑ Select the date(s) and time(s) for the training. Please note that multiple days may be required to administer the training to accommodate all staff.
- ❑ Identify a training facilitator. Based on the facility, this could be a social worker, staff development coordinator, director of nursing, or another staff member with relevant experience.
- ❑ Consider your facility's procedures for assigning and coordinating training sessions. Remember to include an RSVP to gauge the number of learners expected.
- ❑ Reserve a training location with enough seats to accommodate the learners.
- ❑ Confirm the room has a computer, internet access and a large display.
- ❑ Ensure sufficient staff coverage is arranged so learners can participate fully in the training session.
- ❑ Review the in-service toolkit instructions in this document.
- ❑ Promote the training via postings in facilities (See Appendices for template– Page -[13](#)).
- ❑ Promote the training via email (See Appendices for template–Page - [14](#)).
- ❑ Practice and prepare for the training.

One day or more prior to the training session:

- Training facilitator should review the fact sheets bite-sized learning and complete the module prior to the training.
- Review the RSVP list for the number of learners.
- Print both module pre-test and post-test for **each participant** (See Appendices—Pages [15-16](#) and [17-18](#), respectively).
- Print module Pre/Post Test Answer Key for facilitator only (See Appendices—Pages [19-20](#)).
- Download this fact sheet: **The Do's and Don'ts of Nonverbal Communication**.
- Print copies of the fact sheet for dissemination or share via email.
- Post the fact sheet in employee areas throughout the facility.

One hour prior to this session:

- Ensure the audio and visual equipment function properly to show the videos to the class.
- Cue up the bite-sized learning videos: **De-escalation Strategies - BSL**.
- Cue up the module video in a new tab: **De-escalation Strategies - Module**.
- Have pens or pencils ready for learners who need them to take the tests.

Delivering the In-Person Training: De-escalation Strategies

As you guide learners through this training, remember to:

- **Foster an interactive and engaging environment that encourages open discussion and active participation.**
- **Use the provided materials to structure discussions to ensure that key learning objectives are met.**
- **Encourage questions to ensure comprehension and engagement.**
- **Be mindful of the allotted time.**

The facilitator's role is pivotal in creating a supportive learning atmosphere where all learners feel empowered to contribute.

Enjoy facilitating this journey of learning and growth!

1. Introductions

- **Start by introducing yourself and setting clear expectations for the session.**
- **Introduce the training as follows by saying:**

Welcome to our training on de-escalation strategies.

Today, we will learn more about how to handle some challenging situations you may face when working with residents.

Throughout this session, we'll explore how escalation and de-escalation affect residents, staff, and overall care.

You will gain the ability to recognize early indicators of escalating situations, evaluate your readiness to handle these situations, and effectively calm things down.

From incident handling to recognizing nonverbal communication, we're here to equip you with the skills you need for safer, smoother resident engagement.

Let's dive in and get ready to learn how to de-escalate situations together!

- **Learners introduce themselves and their role (if applicable).**

2. Present the Fact Sheet: The Do's and Don'ts of Nonverbal Communication

- **Introduce the fact sheet as follows:**

We will review a fact sheet with practical techniques to improve communication and enrich interactions with residents.

Effective communication goes beyond words—it includes gestures, expressions, and body language, known as nonverbal communication.

Understanding nonverbal cues is essential for fostering meaningful connections with residents, enhancing their comfort, and effectively meeting their needs.

Let's explore the power of nonverbal communication together.

- **Instruct learners to read the fact sheets on their own or in groups.**
- **Lead a discussion using the following potential questions:**
 - Why do you think nonverbal communication is important?
 - Which forms of nonverbal communication do you frequently use?
 - What can you do to keep yourself from using the “don’ts” of non-verbal communication?
 - What non-verbal communication do people display that makes you feel heard and understood?
 - What additional questions do you have?

3. Bite-sized Learning: De-escalation Strategies

- **Introduce the bite-sized learning video as follows:**

In this six-minute video, we will look at identifying signs of emotional distress and how to effectively engage with residents to prevent the situation from escalating or getting worse. This training shows how we can use de-escalation practices to support residents who may be upset or agitated so we can enhance their safety, care, and well-being.
- **Start the bite-sized learning video by selecting the Watch Video button.**
- **Watch the bite-sized learning with the learners.**
- **Lead a discussion with the following potential questions:**
 - What are some signs you have noticed in residents or others before a situation escalates?
 - How do you prepare yourself mentally to handle these situations with residents?
 - How does a calm, composed demeanor help during an escalating situation?
 - What techniques were used to de-escalate the situation, and why do you think they were effective?
 - What additional questions do you have?

4. Module: De-escalation Strategies

- **Introduce the module video by saying:**

We're about to begin a 20-minute video module on essential skills for handling challenging situations. By the end of this session, you will gain insights into how escalation and de-escalation impact residents, staff, and the overall care within our facility. Throughout the video, we'll explore how to recognize early warning signs of escalating behaviors, the importance of personal readiness in de-escalation, and effective strategies for calming potentially tense situations.

We'll also learn practical approaches to handling incidents and conducting post-incident debriefs, all aimed at enhancing operational smoothness and improving the quality of care we provide.

Let's dive in together and learn how to create a safer and more supportive environment for everyone in our facility.

- **Distribute the pre-test questions to the learners and, if needed, pens/pencils. Instruct the learners to complete the pre-test. Let them know the goal of the pre-test is to measure their learning on the post-test. No one is expected to know all the answers.**
- **Collect the pre-tests from the learners.**
- **Start the module video and watch it with the learners.**
- **Pause the video for each of the following knowledge checks and self-checks to let learners answer the questions. Then, discuss the correct answers or feedback as a group. Once the discussion for each question is complete, restart the video.**

✓ **Pause at Time Stamp: 3:07**

Knowledge Check: Escalating Behaviors

Which escalating behaviors was Mr. Lopez showing? *(select all that apply)*

- A. Verbal Aggression
- B. Physical Aggression
- C. Agitation or Restlessness
- D. Sudden changes in mood and behavior
- E. Self-harm

The correct answers are A, C and D:

- A . Verbal aggression as Mr. Lopez was yelling at Jessica.
- C. He was agitated and restless, pacing back and forth while anxiously searching for cameras.
- D. Mr. Lopez's mood changed suddenly, becoming upset after Jessica touched his wrist.

✓ **Pause at Time Stamp: 5:22**

Self-Check 1:

Take a moment to pause the video and ask learners how they would handle this situation with Mr. Lopez.

Note to facilitator: This is an open discussion question. Encourage responses from learners.

✓ **Pause at Time Stamp: 6:57**

Knowledge Check: Preparation

What should Jessica do before talking to Mr. Lopez?

- A. React quickly based on her feelings because timing is critical.
- B. Think about what she wants to say, considering her tone and volume.
- C. Ignore what happened because he was overreacting.

The correct answer is B. Think about what she wants to say, considering her tone and volume.

✓ Pause at Time Stamp: 12:50**Knowledge Check: De-escalation**

What is the best way for Jessica to de-escalate the situation with Mr. Lopez?

- A. Acknowledge his feelings and offer reassurance.
- B. Call security to help her control him.
- C. Calmly explain to him how he is being irrational.

The correct answer is A. Acknowledge his feelings and offer reassurance.

✓ Pause at Time Stamp: 17:46**Self-Check 2:**

Debriefing is important after an incident because it allows us to reflect and learn from what happened. Let's debrief Mr. Lopez's situation. To help with this process, pause the video and take a few minutes to answer the four questions.

- A. What happened?
- B. What went well?
- C. What improvements will be made?
- D. What was learned?

1. What happened?

Jessica was helping a 72-year-old resident diagnosed with schizophrenia with his jacket. The resident has been feeling anxious and exhibiting paranoid thoughts and behaviors lately. He believed that people at the facility were plotting against him and that hidden cameras were monitoring him.

When Jessica touched his wrist while assisting him, Mr. Lopez became upset. He yelled at her, likely due to past traumatic experiences of being restrained and monitored in a mental health facility.

2. What went well?

- Jessica had read Mr. Lopez's care plan and was aware of his past trauma while in the mental health facility.
- She knew his diagnosis and understood his feelings of paranoia.
- Jessica did a self-check before helping Mr. Lopez.
- She apologized to Mr. Lopez for upsetting him to show she cared about his feelings.
- Jessica listened to him and didn't judge him.

- She showed him her hands to show she wasn't hiding anything and offered to check his room for cameras together.
- Jessica reported the situation to the nursing director so everyone could learn from it.

3. What improvements will be made?

- Provide continuous training for staff to effectively support residents with mental health disorders on empathy, trauma-informed care and de-escalation techniques.
- Schedule regular monitoring and follow-up sessions to ensure continuous support for residents like Mr. Lopez.
- Explore communication improvements and care adjustments to prevent similar incidents in the future.
- Schedule debriefing sessions and implement enhanced communication strategies to address individual needs and triggers.

4. What was learned?

- Jessica learned the importance of knowing the resident's history.
- Jessica discovered that Mr. Lopez's past traumatic experience can affect how he responds, reacts and thinks.
- Compassion and active listening are crucial to help calm those who are upset.
- Jessica and the staff realized that talking openly, showing compassion, and working together are crucial for helping residents.

Upon completion of the video:

- **Lead a wrap-up discussion using the following questions:**
 - Does anyone want to share a de-escalation story and what they learned from it?
 - Related to de-escalation, why is it important to review the resident's care plan?
 - What procedures do we have in place for responding to escalating behaviors? Based on what we learned today, how can we improve them?
- **Distribute the post-test questions to the learners to complete independently.**
- **Collect the post-test questions from the learners.**

Training Wrap-up

- **Answer any additional questions from learners.**
- **Thank learners for attending the training.**
- **Calculate the pre and post-test learning scores.**

APPENDICES

Sample Promotional Postings

Attend the upcoming training on de-escalation strategies to:

1. Learn how maintain control when things get out of control.
 2. History matters. Learn how understanding triggers is key to de-escalation.
 3. Learn how to read non-verbal cues and support residents when tension arises.
 4. Learn how to turn tense situations into opportunities for healing and connection.
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Sample Email

Subject: Enhance Your Skills in Managing Challenging Situations in Nursing Facilities

Dear [Recipient],

Are you looking to enhance your ability to manage challenging situations in nursing facilities? Our de-escalation training offers essential skills to navigate difficult events with confidence and competence.

Throughout the training, you'll gain a deep understanding of how escalation and de-escalation impact residents, staff, and overall care in nursing facilities. We'll equip you with the tools to spot early signs of trouble, evaluate your readiness to handle it, and effectively calm situations down.

Key training points:

- **Identify early warning signs of resident distress.**
- **Learn strategies to de-escalate situations.**
- **Define and practice nonverbal communication.**

Don't miss this opportunity to elevate your skills and contribute to a safer and more harmonious working environment.

Date: [Insert Date] **Time:** [Insert Time]

Location: [Insert Location]

Please RSVP by [Insert RSVP Date].

For inquiries, contact [Insert Contact Information].

Thank you for your commitment to enhancing the well-being of our facility's residents. We look forward to seeing you.

Best,

[Your Name]

[Your Position/Title]

Module Pre-Test

Name: _____ Date: _____

1. A resident's family disputes the care provided, even though the resident had initially agreed to it. How should you handle this situation?
 - A. Stand your ground and explain the care decisions.
 - B. Involve the resident in the discussion to mediate.
 - C. Seek assistance from a coworker or supervisor.
 - D. Offer the family a compromise to maintain peace.

2. When communicating with residents from diverse backgrounds, which approach is most effective for de-escalation?
 - A. Using medical terminology to ensure clarity.
 - B. Acknowledging and respecting cultural beliefs and values.
 - C. Requesting the help of your supervisor.
 - D. Ignoring cultural differences to maintain neutrality

3. Considering gender dynamics, which statement is accurate for de-escalation?
 - A. Always assign a male staff member to handle difficult situations.
 - B. Assign a staff member who is the same gender as the resident.
 - C. It depends on the resident; sometimes a male, other times a female may be better.
 - D. Gender doesn't impact de-escalation outcomes.

4. Which factor might unintentionally increase stress during de-escalation interactions?
 - A. Walking towards the resident.
 - B. Keeping your hands visible.
 - C. Being larger than the resident.
 - D. Using jargon-free language.

5. Which of the following actions should a staff member avoid when interacting with an upset resident?
 - A. Ask questions to encourage the resident to talk more.
 - B. Step back and give the resident space until they calm down.
 - C. Give the resident choices to help them feel in control.
 - D. Make promises to resolve the situation quickly.

6. While assisting an agitated resident, you discover they have a potential weapon (e.g., raising a cane). What's the best course of action?
 - A. Leave the room immediately and inform a coworker.
 - B. Confiscate the weapon without hesitation.
 - C. Engage in conversation to distract the resident from the weapon.
 - D. Call the resident's family for guidance.

Module Post-Test

Name: _____ Date: _____

1. A resident's family disputes the care provided, even though the resident had initially agreed to it. How should you handle this situation?
 - A. Stand your ground and explain the care decisions.
 - B. Involve the resident in the discussion to mediate.
 - C. Seek assistance from a coworker or supervisor.
 - D. Offer the family a compromise to maintain peace.

2. When communicating with residents from diverse backgrounds, which approach is most effective for de-escalation?
 - A. Using medical terminology to ensure clarity.
 - B. Acknowledging and respecting cultural beliefs and values.
 - C. Requesting the help of your supervisor.
 - D. Ignoring cultural differences to maintain neutrality

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 - A. Leave the room immediately and inform a coworker.
 - B. Confiscate the weapon without hesitation.
 - C. Engage in conversation to distract the resident from the weapon.
 - D. Call the resident's family for guidance.

Module Pre/Post-Test Answer Key

1. A resident's family disputes the care provided, even though the resident had initially agreed to it. How should you handle this situation?
 - A. Stand your ground and explain the care decisions.
 - B. Involve the resident in the discussion to mediate.
 - C. **Seek assistance from a coworker or supervisor.**
 - D. Offer the family a compromise to maintain peace.

The correct answer is C.

2. When communicating with residents from diverse backgrounds, which approach is most effective for de-escalation?
 - A. Using medical terminology to ensure clarity.
 - B. **Acknowledging and respecting cultural beliefs and values.**
 - C. Requesting the help of your supervisor.
 - D. Ignoring cultural differences to maintain neutrality

The correct answer is B.

3. Considering gender dynamics, which statement is accurate for de-escalation?
 - A. Always assign a male staff member to handle difficult situations.
 - B. Assign a staff member who is the same gender as the resident.
 - C. **It depends on the resident; sometimes a male, other times a female may be better.**
 - D. Gender doesn't impact de-escalation outcomes.

The correct answer is C.

4. Which factor might unintentionally increase stress during de-escalation interactions?
 - A. Walking towards the resident.
 - B. Keeping your hands visible.
 - C. **Being larger than the resident.**

D. Using jargon-free language.

The correct answer is C.

5. Which of the following actions should a staff member avoid when interacting with an upset resident?

A. Ask questions to encourage the resident to talk more.

B. Step back and give the resident space until they calm down.

C. Give the resident choices to help them feel in control.

D. **Make promises to resolve the situation quickly.**

The correct answer is D.

6. While assisting an agitated resident, you discover they have a potential weapon (e.g., raising a cane). What's the best course of action?

A. **Leave the room immediately and inform a coworker.**

B. Confiscate the weapon without hesitation.

C. Engage in conversation to distract the resident from the weapon.

D. Call the resident's family for guidance.

The correct answer is A.