

De-escalation Tool for Medical Office Staff (HEARD+D) IN PERSON



- 1

Hear

Listen actively and model calmness.
- 2

Empathize

Acknowledge and validate their feelings and experiences.
- 3

Assess

Assess the situation and yourself. Recognize your emotional state and biases and ask for help if needed.

- 4

Resolve

Inform and offer solutions.
- 5

Defuse

Set clear boundaries and protect yourself.
- 6

Document

Notify your manager and chart the incident.

FRUSTRATED BEHAVIOUR Showing irritation Sighing, pacing, fidgeting <i>"This is stressful!"</i> <i>"I can't believe this."</i>	ANGRY BEHAVIOUR Visibly irritated, sharp, loud, pressured speech, demanding action Loud voice, clenched fists, abrupt gestures <i>"This is unacceptable/ridiculous!"</i> <i>"I need it right now!"</i>	AGGRESSIVE BEHAVIOUR Physical posturing, verbal intimidation, hostile tone, accusatory statements Yelling, cursing, or slamming, invading personal space <i>"You're being stupid."</i> <i>"You're useless."</i>	THREATENING BEHAVIOUR Physical or verbal threats Pointing fingers, raising a fist, blocking exits, mentioning weapons <i>"You'll regret this!"</i> <i>"I'll come back with a gun!"</i>
--	---	--	---

- OFFICE STAFF PHYSICAL RESPONSE**
- Use soft eye contact without staring to show attentiveness.
 - Maintain a neutral posture with uncrossed arms, visible hands, and unclenched fists.
 - Remain seated if you were already sitting.
 - If standing, stand straight, and keep your feet shoulder-width apart for stability.
 - Keep a safe distance.
 - If needed, signal for assistance from other staff or security (e.g., duress system).

- OFFICE STAFF PHYSICAL RESPONSE**
- Increase your distance.
 - Keep a physical barrier between you and the patient (e.g., a counter).
 - Keep an exit path in sight and position yourself near an exit.
 - Signal for assistance from other staff or security (e.g., duress system).
 - If available, use the panic button to summon police assistance if needed.
 - If they move toward you, extend your arms straight in front of you with your palms facing outward to signal them to stop. Never engage. Do not use force.
 - If you feel unsafe, leave immediately to the nearest exit or room with a lockable door. Avoid turning your back on the aggressor unless necessary during an escape. If you or someone else is being assaulted or threatened with a weapon, leave immediately and call 9-1-1 from a safe place.

PROCEED WITH HEARD+D STEPS 1 TO 4

Speak calmly and professionally with confidence – do not match their volume. Do not interrupt them while they vent and set limits when needed. Keep sentences short and clear.

Go to **Step 5** if the patient escalates.

JUMP TO HEARD+D STEP 5 (DEFUSE)

Use a firm respectful tone. Do not argue. Give clear instructions and state consequences. Use short, assertive statements.

Only proceed with **steps 1-4** if the patient de-escalates

- 1

Hear

Listen actively, model calmness, and avoid interrupting.

- 2

Empathize

Acknowledge and validate. Speak slowly and with confidence – do not match their volume. Never shout/yell back.

"I hear your frustration."

"I can see how inconvenient this situation is."

- 3

Assess

Assess the severity of the situation, apologize if appropriate, and demonstrate positive intent.

"I hear that you're upset, but I need you to speak calmly."

"Sorry for the inconvenience. I'm here to help, and I will do my best to assist you."

Recognize your emotional state and biases and ask other staff for assistance if needed:

"Let me see if my manager is available to help you."

Consider moving the patient into a quieter room if safe to do so:

"Please take a seat in this exam room. I'll be back shortly."

- 4

Resolve

Inform/provide context and reasoning, confirm their needs, and offer solutions:

"Appointment availability is further out because.../The clinic has a policy that.../Prescription refills must.../What seems to have happened is..."

"To confirm you need [to book an appointment] ...is that correct?"

"Here's what I can do (provide options if possible): Which one would work best for you?"

When appropriate, note specific patient needs (e.g., hard of hearing, limited English) in the medical record to help staff prevent future escalations.

- 5

Defuse

Recognize your emotional state and biases and ask other staff for assistance if needed:

"Let me see if my manager is available to help you."

Evaluate the severity of the situation. If safe to proceed, set clear boundaries and limits:

"I need you to stop yelling. Please lower your voice so we can continue."

"Please keep this conversation respectful, or I will not continue it."

"I need you to stop this behaviour immediately or I will ask you to leave."

"For the safety of everyone, I need you to leave now."

Consider other patients and staff in the clinic. If safe to do so, move the escalated person into a quieter room away from others and ask for assistance from another staff, including a physician. Never be alone in a private room with the escalated patient. If moving the patient into a quieter room:

"Please take a seat in this exam room. I'll be back shortly."

Call 911 for direct threats.

- 6

Document

If Step 5 is needed, notify your manager. Chart the incident in the patient's medical record right away and in the clinic's incident report form for internal tracking *.

What to document:
 - Be objective, state the facts, and use quotes.
 - Describe the person's behaviour, incident details, and context, including date, time, location, contributing factors, statements, and de-escalation efforts. Consider the five W's: Who, What, Where, When, and Why.
 - State the harm caused to you, if any (e.g. intimidation, fear, physical injury, threats made) on the incident report form.
 - Chart the incident with the assistance of your manager if needed.
 - When reporting to the police, do not share patient medical information (except if public safety is in danger).
*If the incident caused an injury requiring medical treatment, you are required to report to WorkSafeBC and conduct an incident investigation.

Note: This chart provides examples of inappropriate behaviour, but it's up to you to assess where the patient is on the escalation scale.

Need more information? Visit the portal at CPHS.SWITCHBC.ca or email a health and safety advisor at CPHS@SWITCHBC.ca.