

CareCertify LLC

Behavioral & Mental Health Training Series

BH-05

De-escalation & Crisis Response

Participant Guide

Behavioral & Mental Health Training Series · Audience: ARMHS · CTSS · Behavioral Aides · MH Practitioners · Case Managers · CE Hours: 1.0

Connection Calms, Control Escalates

Clients in behavioral health settings sometimes become agitated, frightened, or overwhelmed. How you respond either calms the moment or fuels it. De-escalation is a set of learnable skills built on calm, connection, and respect, and crisis response is about getting the right help quickly and safely.

This guide covers the escalation cycle, de-escalation skills, safety, recognizing a crisis, and the help available — including 988 and county mobile crisis teams. Throughout: stay calm, stay safe, and never handle a crisis alone.

Learning Objectives — by the end of this module you will be able to:

- Describe the cycle of escalation
- Apply verbal and nonverbal de-escalation techniques
- Keep yourself and others safe during a crisis
- Recognize a behavioral health crisis
- Activate 988, county crisis teams, and 911 appropriately

Section 1: The Cycle of Escalation

Escalation usually follows a cycle: a trigger, rising agitation, a peak of crisis, then de-escalation and a recovery phase. Intervening early, as agitation rises, is far easier and safer than at the peak. After the peak, the person needs calm and time to recover, not pressure. Recognizing where someone is in the cycle helps you respond well — and your own calm shapes the entire cycle.

Section 2: Verbal De-escalation

De-escalation works through connection, not control. Stay calm and keep your voice low and slow, give space, and respect boundaries. Listen and acknowledge the feeling rather than arguing or commanding. Offer simple choices and a dignified way out of the moment, and avoid threats, ultimatums, and crowding.

Your calm is the tool

Your steady tone and relaxed body do more than any words. If you can't stay calm, get space and get help.

Section 3: Nonverbal De-escalation

People in distress read your body before your words. Keep a relaxed, open posture with hands visible, give physical space, and avoid looming over or cornering the person. Approach from the front, move slowly, and project calm. Your nonverbal signals can either reassure or threaten.

Section 4: Keeping Everyone Safe

Safety comes first. Position yourself so you, the client, and others are protected, and keep an exit available. Never use force or restraint except where you're specifically trained and it's permitted for safety. If a situation becomes unsafe, leave and get help — no interaction is worth an injury.

Section 5: Recognizing a Behavioral Health Crisis

A behavioral health crisis includes threats to harm self or others, loss of contact with reality, or severe agitation that won't settle. A sudden, new change in mental status can have a medical cause. A crisis is a team response — escalate to your supervisor and crisis resources rather than trying to manage it alone.

Section 6: Getting the Right Help

Know your resources before a crisis. For imminent danger to life, call 911. For a mental-health crisis, the 988 Suicide and Crisis Lifeline provides immediate support (call or text), and every Minnesota county has a mobile crisis response team that can respond in the community. Always notify your supervisor and follow your agency's crisis policy.

Section 7: Post-Crisis Support and Learning

After a crisis, the person is in a vulnerable recovery phase — support them calmly and avoid lecturing or problem-solving too soon. Ensure follow-up and any safety planning happens per the clinical team. Document objectively, debrief with your team, and identify triggers and what helped, so the next situation can be handled even better.

Section 8: Caring for Yourself After Crises

Crisis situations are physically and emotionally taxing. Debrief afterward, use supervision and peer support, and watch for accumulating stress and burnout. A regulated, supported staff member de-escalates far more effectively than an exhausted one — your wellbeing is part of safe crisis response.

Take every safety statement seriously

Any statement about wanting to die, harm self, or harm others is taken seriously and acted on immediately. When in doubt, get help. The next lesson covers suicide risk in depth.

Key Terms

Term	What it means
Escalation cycle	The pattern of trigger, rising agitation, peak, and recovery.

De-escalation	Calming a tense situation through connection, space, and respect.
988 Lifeline	The Suicide and Crisis Lifeline — call or text 988.
Mobile crisis team	A county team that responds to mental-health crises in the community.
Crisis	Danger to self or others, loss of contact with reality, or unmanageable distress.
Debrief	A team conversation after an incident to support staff and learn.

Check Your Understanding

1. What are the phases of the escalation cycle?
2. Give three verbal de-escalation techniques.
3. How do you keep everyone safe during agitation?
4. What distinguishes a crisis from ordinary distress?
5. What number do you call for a mental-health crisis, and when do you call 911?

What's Next

Looking ahead

Next, BH-06: Suicide Prevention & Risk Awareness covers recognizing risk and responding to keep clients safe.