

CareCertify LLC

Front-Line Caregiver Training Series

CG-07

De-escalation & Challenging Behaviors

Participant Guide

Front-Line Caregiver Training Series · Audience: CNAs · HHAs · PCAs · DSPs · Caregivers · CE Hours: 1.0

Connection Calms, Control Escalates

Clients become agitated, fearful, or aggressive for reasons — pain, confusion, fear, trauma, or an unmet need they can't express. Challenging behavior is communication, and your response either calms the moment or makes it worse. These are learnable skills that keep both of you safe.

This guide teaches you to find the cause, de-escalate with calm and respect, stay safe, recognize when a situation is a crisis, and get the right help fast.

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

- Explain why challenging behaviors happen
- Apply verbal and nonverbal de-escalation techniques
- Keep yourself and the client safe during agitation
- Recognize a crisis and get the right help
- Respond to suicide warning signs using 988 and crisis resources

Section 1: Why Challenging Behaviors Happen

Challenging behaviors — agitation, aggression, resistance, calling out — usually express pain, fear, confusion, trauma, or an unmet need the client can't put into words. Looking past the behavior to its cause is the first step to resolving it. It's rarely personal, even when it feels that way.

Section 2: Verbal De-escalation Techniques

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

In an escalating moment, your steady tone and relaxed body language do more than any words. If you can't stay calm, get space and get help.

Section 3: Nonverbal De-escalation

Your body communicates safety or threat. Keep a relaxed, open posture with hands visible, give physical space, and avoid looming over or cornering the client. Move slowly, approach from the front, and project calm, unhurried energy. People in distress read your body before they hear your words.

Section 4: Keeping Yourself and the Client Safe

Safety comes first. Position yourself so you and the client are protected and you have an exit; don't let yourself get cornered. Never use force or restraint except where you are specifically trained and it's permitted for safety. If a situation becomes unsafe, leave and get help — no task is worth an injury to you or the client.

Section 5: Recognizing a Crisis

De-escalation handles most distress, but some situations are crises: threats to harm self or others, loss of contact with reality, or severe agitation that won't settle. Sudden, new confusion can be a medical emergency. Don't try to manage a crisis alone — escalate to your supervisor and crisis resources.

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 gives immediate support, and counties have mobile crisis response teams. Always notify your supervisor and follow agency policy.

Section 7: Suicide Warning Signs and Response

Warning signs include hopelessness, talk of death or being a burden, giving away belongings, withdrawal, or sudden calm after distress. If a client expresses thoughts of self-harm, take it seriously, stay with them, and get help immediately — your supervisor, 988, and 911 if there's danger. Never leave the person alone or dismiss what they said; asking about suicidal thoughts does not plant the idea.

Take it seriously, every time

Direct, caring attention and prompt help save lives. When in doubt, get help.

Section 8: Reporting and Learning From Incidents

Report behavioral incidents and crises per agency policy, and document objectively — the likely trigger, what happened, and what you did. Debriefing and identifying triggers helps prevent recurrence and informs updates to the care plan. Every incident is a chance to make the next encounter safer.

Key Terms

Term	What it means
De-escalation	Calming a tense situation through connection, space, and respect.
Trigger	A cause behind a behavior — pain, fear, noise, an unmet need.
988 Lifeline	The Suicide and Crisis Lifeline — call or text 988.

Mobile crisis team	A county team that responds to mental-health crises.
Crisis	A situation with danger to self or others or loss of contact with reality.
Compassion fatigue	Emotional exhaustion that can affect how you respond — watch for it.

Check Your Understanding

1. Why do challenging behaviors usually happen?
2. Give three verbal de-escalation techniques.
3. How do you keep yourself 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, CG-08: Abuse Prevention & Mandated Reporting covers recognizing and reporting maltreatment of vulnerable adults.