MENTAL ILLNESS AND ALCOHOL AND OTHER DRUG RELATED HARM ARE COMMON IN OUR COMMUNITY

KNOW HOW TO PROVIDE ASSISTANCE IN YOUR VENUE

In your venue, you may encounter an individual exhibiting aggressive or problematic behaviour as a result of a mental health or drug-induced episode. If you do, you can use these steps to assess and respond to the situation:

ASSESS FOR SAFETY: Use the traffic light system

GREEN behaviours:

- cooperative
- anxious, restless, excessive talking
- able to respond to questions and direction (e.g., to move to a quieter or safer environment)

Response:

- engage in de-escalation
- monitor your safety

ORANGE behaviours:

- loud outbursts
- frequent non-purposeful movements (e.g., pacing, lip-smacking, repeated hand movement)
- difficult to engage (e.g., partial listening, partially follows instructions, preoccupied)

Response:

- attempt de-escalation
- monitor your safety

RED behaviours:

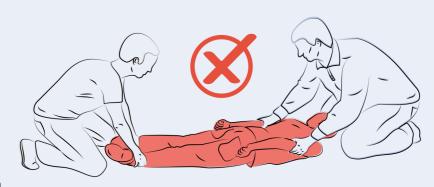
- uncooperative (e.g., refusing to follow staff instructions)
- aggressive or combative
- lacking capacity to make decisions

Response:

- call '000'
- avoid approaching the individual
- maintain your safety and that of other people in your venue

AVOID PHYSICAL RESTRAINT IF POSSIBLE

- All physical restraint involves some possibility of physical and psychological injury, such as laceration, bruises, broken bones, brain injury, and death.
- Individuals may have unknown health vulnerabilities that make even minor attempts at physical restraint more dangerous and life threatening.
- Any form of restraint should only ever be used by professionals with proper medical training.





NEVER USE PRONE RESTRAINT

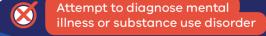
Prone restraint refers to face down, floor restraint, with or without pressure applied to the stomach and back:

- This increases risk of restraint-related 'positional asphyxiation', which occurs when a person's airway is blocked, reducing oxygen intake.
- Positional asphyxiation or any blockage of air flow to an individual can result in brain injury or death, even if airflow is only momentarily obstructed.









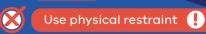












The effective use of de-escalation strategies reduces the need for physical restraint, and use of de-escalation can result in satisfactory outcomes for all individuals without risk of physical harm or

5 TIPS TO ENGAGE IN DE-ESCALATION

Communicate with the individual:

- ask for and use their name
- ask them how they are and listen
- validate and summarise what the individual is saying
- attempt to unite by finding common goals and setting clear boundaries

Keep calm:

- keep a calm voice, pace your speech and be concise
- never threaten, argue, yell or shout
- repeat yourself often
- avoid negative statements

Reduce stimuli:

- respect the personal space of the individual, do not get too close or block exits
- lower music volume
- respectfully ask others to move away

Offer and empower choices:

- identify the individual's needs and wants
- try to accommodate reasonable requests
- be optimistic
- offer to call the individual a taxi or 000

5 Think about next steps:

- have a plan to avoid further escalation
- review the incident and discuss any learnings with staff
- ensure all incidents are recorded in your venue's incident register

Did you know?

- ► Approximately 1 in 5 Australians aged 15+ have a current mental health disorder, or have suffered one in the past 12 months.
- ▶ People of all ages, backgrounds and socio- economic levels can be affected by mental illness.
- ▶ Up to 1 in 3 adults consume alcohol at problematic levels that puts them at risk of alcohol-related disease and injury.
- ▶ There is a link between problematic alcohol use and other mental health conditions, especially for mood disorders (e.g., depression and anxiety).
- ▶ Up to 45% of adult Australians report having experienced a substance use, mood or anxiety disorder in their lifetime.
- ▶ People living with a mental illness are no more likely to be violent than anyone else in the community.





and Community Safety