

## Brant Community Safety Plan Protocol

### Background:

The Children and Youth Services Committee flagged the need for some revisions to the *Brant Community Crisis Protocol* in April 2016; the Protocol had last been revised in 2013. A group of community stakeholders was brought together to draft revisions, which included the name change of the Protocol to the *Community Safety Plan Protocol* to better reflect its intent.

Emergency and community services often interact with children, youth and adults who experience persistent crisis. Development of an *Individual Safety Plan* that can be shared, with consent, with key stakeholders, for each of these individuals is a means to support a consistent response that is most effective for each individual.

An *Individual Safety Plan* identifies behaviours that may indicate that a person is beginning to escalate in a pre-crisis phase, or exhibiting behaviours at a crisis phase, as well as behaviours in a post-crisis phase. The *Individual Safety Plan* also identifies, in concise format, what are helpful as well as not helpful interventions to try to de-escalate and stabilize the situation. The description of interventions is meant to be useful for a consistent approach by emergency and crisis responders, as well as for the individual's informal and formal support systems.

This *Community Safety Plan Protocol* is seen as working in alignment with other community processes that support individuals who may experience persistent crisis, including, but not limited to the Grand Erie District School Board's *A School and Community Threat/Risk Assessment Protocol*, the *Community Service Collaboration Protocol*, the *Case Resolution Protocol* and Case Resolution mechanism (for children's services), or the Community Response Table. (For more information on these community processes, call Contact Brant.)

### Purpose of the Protocol:

1. Recognize that children, youth and adults who experience persistent crisis are entitled to the same services and are required to abide by the same regulations as all other Brant citizens.
2. Ensure that crisis, emergency and community services work together on behalf of children, youth and adults who experience persistent crisis to increase the effectiveness of response to escalating crisis and crisis situations.
3. Through collaboration, reduce risks for citizens of Brant who experience persistent crisis by promoting a consistent approach, as outlined in their *Individual Safety Plan*, be used to meet the unique needs of each individual.
4. Promote regular use of the *Individual Safety Plan* to improve service coordination and response for individuals who experience persistent crisis.
5. Enhance positive working relationships among community organizations and emergency/crisis service providers supporting Brant citizens.

## **Guiding Principles:**

1. As full citizens of Brant and the Province of Ontario, children, youth and adults who experience persistent crisis are entitled to the same high quality emergency and crisis services as are all other residents; children, youth and adults who experience persistent crisis may require additional support when using emergency and crisis services.
2. Brant service providers are committed to working collaboratively, within their agency mandate, to provide for the care, welfare, and safety of individuals who may experience persistent crisis.
3. Each crisis situation faced by an individual results in a traumatic experience for that individual; professionals need to respond in a manner that will not add to the traumatic experience while effectively managing each situation.
4. Respect that the expectations for each stakeholder are consistent with their service mandate.

## **Procedures**

### **1. Orientation:**

- 1.1 Organizations will ensure that staff are annually oriented to the *Community Safety Plan Protocol*. (Note: An electronic orientation to this Protocol is available from the Children and Youth Services Committee through Contact Brant.)
- 1.2 Organizations will annually review with staff how to complete an *Individual Safety Plan*. Key points to remember in completing the *Individual Safety Plan* are:
  - Complete the form electronically to ensure other stakeholders that receive the template can read it.
  - Be concise. Use bullet format, as indicated on the template.
  - Ensure the *Individual Safety Plan* is updated as needed, and at least annually.
  - It is recommended that the individual's current medication list be attached to the *Individual Safety Plan*.
  - With consent, ensure that all required stakeholders have a copy, including but not limited to:
    - ✓ The individual/family/guardian
    - ✓ Internal agency staff supporting the individual
    - ✓ External agencies that also support the individual
    - ✓ Integrated Crisis Services, operated by St. Leonard's Community Services.
- 1.3 Community organizations will provide training, upon request, to assist crisis and emergency service providers as well as other community providers with understanding the population they serve.

## 2. Safety Planning:

2.1 An *Individual Safety Plan* identifies the unique behaviours that may indicate that a person is struggling and beginning to escalate. When behaviours are recognized at any of the 3 phases of crisis escalation, there is opportunity to support the individual and de-escalate the situation. The *Individual Safety Plan* should concisely identify interventions that may be useful to de-escalate and stabilize the situation, as well as specific interventions that are not helpful as they may further escalate the situation. The *Individual Safety Plan* includes a *Consent to Share the Safety Plan* template.

- **Pre-crisis / Beginning Escalation Phase:** Behaviours may reflect that the individual is slightly more active and worked up, obviously becoming more worked up and increasing problematic behaviour. This phase is the time when an individual may still be able to listen and respond to directions, and avoid further escalation - a calm, consistent, 'simple directions' approach is best, avoiding power struggles. Use open questions beginning with "What..." or "How...". Give and take space, let the individual know you are listening, use distraction where possible to refocus the individual, and praise positive behaviour. Be cautious to keep the individual and others safe as the individual's behaviours could become unpredictable/aggressive. A call to Integrated Crisis Services is recommended if escalation continues.
  - **Crisis Phase:** Behaviours reflect that the individual is highly agitated. The individual at this phase is often aggressive, including shouting, punching, kicking, etc.; will not be able to understand; will be unpredictable; and is potentially dangerous to themselves and others. This phase warrants the need to call emergency responders and remove others from the situation to reduce risks to others if this has not occurred already. It is important to stay calm even though not able to control the situation; do not expect the individual to listen or follow through, and remember this is not a 'teachable moment' point in time. Remember to take direction from the emergency responders.
  - **Post-Crisis Phase:** Behaviours reflect that the individual is becoming less agitated and more able to listen and respond. Continue with a calm, consistent approach, and be supportive of the de-escalating behaviours; reassure the individual; listen to them; and positively reinforce good behaviour. Allow time before discussing the incident and acceptable choices and options for the future.
- **The *Individual Safety Plan* should include responses that are known to redirect the person as well as responses that are known to further escalate the person. It should identify a support person (family or service provider) that may be able to assist to redirect and de-escalate the situation.**

2.2 Community organizations will discuss safety planning with individuals and/or their families in service, describing the development of a written *Individual Safety Plan* for the following purposes:

- To provide a written guideline for all staff supporting the individual to provide consistent supports to prevent and manage interventions for escalating behaviours that may lead to crisis situations, as well as supports following a crisis situation. This should be a coordinated *Individual Safety Plan* for all stakeholders involved in providing services that is shared, with consent.
- To provide written guidelines for family/caregivers to support the individual to provide consistent supports to prevent and manage interventions for escalating behaviours that may lead to crisis situations.
- With consent, to share the *Individual Safety Plan* with Integrated Crisis Services, provided by St. Leonard's Community Services, to maintain on file and enable them to better manage interventions for escalating behaviours and crisis situations, as well as provide appropriate follow-up support.

It should be noted that Integrated Crisis Services is provided by St. Leonard's Community Services jointly, according to age and presenting need, with:

- Woodview Mental Health and Autism Services (for youth under age 16)
- Brant Community Healthcare System, and
- Alzheimer Society of Brant.

It must also be noted that in their Integrated Crisis Service role, St. Leonard's will share the *Individual Safety Plan* with involved emergency responders, including Brantford Police Services, Brant County OPP, and/or the Brant Community Healthcare System (Brantford General Hospital Emergency Department).

➤ **Consent must be requested to share the *Individual Safety Plan* with Integrated Crisis Services, which includes the Integrated Crisis Service Providers and any involved emergency responders, to support effective use of Safety Plans and full implementation of this Protocol.**

2.3 Organizations will complete an *Individual Safety Plan* (Appendix 1) with individuals who are likely to experience persistent crisis, and ensure at least an annual update. Part of the *Individual Safety Plan* includes Consent to Share the Safety Plan with specific stakeholders.

2.4 St. Leonard's Community Services will confidentially maintain all *Individual Safety Plans* on file for children, youth, and adults, to be used as necessary when the individual presents to crisis and/or emergency services.

- Please note: It will take one business day for St. Leonard's to upload the *Individual Safety Plan* for use as intended in this Protocol.

### 3. Crisis Situation:

- 3.1 Crisis and emergency response providers will refer to the *Individual Safety Plan* wherever possible and consider the information provided in approaching the individual.
- 3.2 Wherever possible, the crisis and emergency responders will consult with the individual's case manager to determine follow-up. The service provider, in some circumstances, may also be able to arrange for supports to be provided to the individual during the crisis, for example at the hospital.
- 3.3 Community organizations supporting an individual through a crisis situation, should provide a copy of the *Individual Safety Plan* to crisis and emergency responders, wherever possible. It is also recommended that a copy of the individual's current medication list be provided.
- 3.4 Community organizations who have developed an *Individual Safety Plan* and provided this to the individual's family/caregiver, should encourage the family/caregiver to provide a copy of the *Individual Safety Plan* to crisis and emergency responders, wherever possible, as well as the individual's current medication list.

### 4. Crisis and Emergency Response Services:

- 4.1 St. Leonard's Community Services - Integrated Crisis Services provide an immediate crisis support and/or counselling for children, youth and adults experiencing a mental health and addictions situational crisis. This includes 24/7 phone support and a mobile response, when needed, to de-escalate the situation. Call:  
**519-759-7188, or 1-866-811-7188.**
  - St. Leonard's Integrated Crisis Services offers short-term follow-up support in the days following the crisis and will link the individual to appropriate community services according to identified access pathways.
  - St. Leonard's Community Services offers a Mental Health Walk-in Clinic, 11:00 a.m. – 8:00 p.m., 7 days a week for immediate crisis support and/or counselling for children, youth and adults at: 225 Fairview Drive, Unit 1, Brantford.
- 4.3 In any emergency situation, police, ambulance or fire can be reached by calling **911**.

### 5. Post Crisis:

- 5.1 Following a crisis situation, and once the individual is fully calmed down, the individual may want to talk or may want to be alone; they may also indicate remorse or may be defiant. In any case, staff should be supportive and reassure the individual; allow time before discussing the incident and outlining any consequences; outline acceptable choices

and options for the future; listen to them; and positively reinforce good behaviour. Staff should remember to never take the incident personally.

- 5.2 Community organizations should review all crisis situations involving individuals they support to ensure the *Individual Crisis Plan* is appropriate.
- 5.3 Where situations were not resolved to the satisfaction of the individual or family/guardian, the case manager's organization should communicate with the involved crisis/emergency provider(s) to problem solve for future incidents.
- 5.4 As appropriate, any partner may instigate a review of the Protocol and procedures to address systemic issues.

## **6. Review:**

- 6.1 The Children and Youth Services Committee will ensure an annual review of the Protocol, and will ensure other stakeholders that are not members of this committee are requested to review the Protocol. Other key community tables include, but are not limited to, the Brant Resource Managers Table.
- 6.2 All agencies will annually be requested to recommit their support to the Protocol, and ensure staff are oriented/re-oriented to the community Protocol.
- 6.3 Any stakeholder to the Protocol may request that the Protocol be reviewed and/or amended at any time by directing their request to the Children and Youth Services Committee through Contact Brant.

## **7. Partners to the Protocol:**

Organizations across various service sectors have developed this community Protocol. Annually, the Children and Youth Services reviews the Protocol, with a re-commitment to incorporating the intent of these procedures in the services they provide in the Brant community. The Children and Youth Services Committee then sends out the Protocol to broader stakeholders and planning tables for their review and re-commitment to the Protocol.

## INDIVIDUAL SAFETY PLAN

*Please complete electronically to ensure legibility; one individual per Safety Plan.*

<b>Name:</b>	<b>DOB:</b> (Month/Day/Year)
<b>Address:</b>	<b>Date Completed:</b>
<p><b>Client Alert:</b> <i>Be brief and concise.</i>  <u>Strategies to use in a crisis situation; list 2 – 3 points:</u></p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul> <p><u>Key things NOT to do in a crisis situation; list 2 – 3 points:</u></p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>	
<b>Risk Factors:</b> <i>Check all appropriate identified risks.</i>	
<input type="checkbox"/> Alcohol - abuse <input type="checkbox"/> Antisocial/Negative Behaviour <input type="checkbox"/> Antisocial/Negative Behaviour (within home) <input type="checkbox"/> Basic Needs: unable to meet own basic needs <input type="checkbox"/> Criminal involvement; includes assault <input type="checkbox"/> Drugs – abuse <input type="checkbox"/> Housing: no access to appropriate housing <input type="checkbox"/> Other:	<input type="checkbox"/> Mental Health: diagnosed MH problem <input type="checkbox"/> Mental Health: suspected MH problem <input type="checkbox"/> Negative Peers: associates with negative peers <input type="checkbox"/> Parenting: parent/child conflict <input type="checkbox"/> Physical Violence (perpetrator) <input type="checkbox"/> Suicide: current suicide risk <input type="checkbox"/> Threat (behaviours) to Public Health & Safety <input type="checkbox"/> Other:
<b>Allergies:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes - <i>Details:</i> <ul style="list-style-type: none"> <li>•</li> <li>•</li> </ul>	<b>Known Diagnoses:</b> <i>(medical and psychiatric)</i> <ul style="list-style-type: none"> <li>•</li> <li>•</li> </ul>
<b>Identify any other key information</b> (e.g., <i>Community Treatment Orders, Threat/Risk Assessment completed, etc.</i> ) <ul style="list-style-type: none"> <li>•</li> </ul>	
<b>Individual's Phone:</b>	<b>Health Card #:</b>
<b>Parent/Guardian/Next of Kin:</b>	<b>Parent/Guardian/Next of Kin Phone:</b>
<b>Case Manager:</b>	<b>Agency:</b> <b>Phone:</b>
<b>Family Physician:</b>	<b>Phone:</b>
<b>Psychiatrist:</b>	<b>Phone:</b>
<b>Pediatrician:</b>	<b>Phone:</b>

Complete all sections in point form. Be brief and concise.

**LEVEL 1 - PRE-CRISIS / BEGINNING ESCALATION PHASE**

Behaviours that indicate a problem is surfacing	Interventions – What to do	What is NOT helpful
• • •	• • •	• • •

**LEVEL 2 - CRISIS PHASE**

Behaviours that warrant emergency response	Interventions – What to do	What is NOT helpful
• • •	• • •	• • •

**LEVEL 3 – POST CRISIS PHASE**

Behaviours that indicate crisis has subsided	Interventions – What to do	What is NOT helpful
• • •	• • •	• • •

<b>I agree with this Safety Plan:</b>	
<b>Individual/Guardian Name:</b>	<b>Individual/Guardian Signature:</b>
<b>Individual/Guardian Name:</b>	<b>Individual/Guardian Signature:</b>
<b>Plan Written by:</b> <i>(Staff Name and Agency)</i>	<b>Staff Signature confirming shared with above:</b>
<b>Date Signed:</b>	<b>Due Date for Annual Review:</b>

**Note:** Attach current medication list to this Safety Plan.

**Provide a copy to:**

- The individual/guardian
- With consent, deliver to St. Leonard’s Integrated Crisis Services, 225 Fairview Drive, Brantford.

## Consent to Share the Individual Safety Plan

<p>I give my consent to share this <i>Individual Safety Plan</i> for the purpose of identifying the preferred consistent response in times of escalating crisis, or crisis, with the following service providers:</p>		
	√	<b>Initial for Consent</b>
<p><b>Integrated Crisis Services</b>          (Provided by: St. Leonard's Community Services with Woodview Mental Health and Autism Services, Brant Community Healthcare System, and Alzheimer's Society Brant).</p> <p>I understand Integrated Crisis Services keeps a copy of this Safety Plan on file at St. Leonard's Community Services and will provide this Safety Plan to involved emergency responders that may include: Brantford Police Services, Brant OPP, and/or Brant Community Healthcare System (Brantford General Hospital).</p>		
Brant Family and Children's Services		
Brant Haldimand Norfolk Catholic District School Board		
Brantwood Community Services		
Canadian Mental Health Association		
Community Living Brant		
Contact Brant		
Family Counselling Centre of Brant		
Grand Erie District School Board		
Lansdowne Children's Centre		
Nova Vita Domestic Violence Services		
Sexual Assault Centre of Brant		
St. Leonard's Community Services		
Woodview Mental Health and Autism Services		
Other:		
<b>Individual/Guardian:</b>	<b>Date:</b>	
<b>Individual/Guardian:</b>	<b>Date:</b>	
<b>Signature of Staff</b> reviewing this Consent with individual/family:	<b>Date:</b>	