**Guidance to support a person with additional needs who becomes distressed and angry when you try to engage with them.**

This short guidance is for staff or carers who might not normally encounter such challenges. It may also be useful for others aiming to ensure best outcomes for all. It is always best if the individual is accompanied by a trusted other, but this may not always be possible, and even if it is, there may still be some anxiety.Please note such challenges occur in a relatively small proportion of people with additional support needs.

1. First, Check the person’s health passport if they have such and if possible, speak to them and anyone supporting them
2. Your goal is not to stop the person’s behaviour. It is to understand that the behaviour is not intentional, but is a sign of distress.
3. The person’s behaviour may be their way of showing you that they are frightened, in pain, do not understand what you are saying, or are overwhelmed by noise, lights, medical staff, etc. Your goal is to see this as emotion and not aggression, and respond accordingly.
4. Your goal is to help the person **regain self-control**.
5. Why?
	1. Because the person is NOT ABLE right now to regain self-control without your support.**1**
	2. Helping them to regain self-control is the **safest way** to reduce the immediate risk to everyone.
6. Emotions can be contagious. If you remain calm, it will help the person to also feel calm. Be aware of your own feelings. Try not to become “affected” by their distress. Instead, **be calm** and **show calm.**
7. Calm is not just the absence of distress. Calm **is an active state of being:**
	1. **Mentally aware and present.** Let the person know you are there and are tuned in to them. Listen.
	2. **Physically relaxed.** Take some deep breaths and help your body to loosen and relax.
	3. **Genuinely accepting** of what is going on around you. Accept the person’s feelings as genuine without judging them in any way.

**1** Many people who have disabilities or mental health difficulties have important differences in how their brain works under stress.

* One important difference is in the parts of the brain that help keep us safe by watching out for danger and threats.
* People who have disabilities sometimes have overdeveloped systems for detecting threat, and underdeveloped systems for figuring out what to do about it.
* Physical restraint is associated with higher rates of injuries to both patients and staff.

**How to help a person with a disability regain self-control when they are distressed**

1. Do not do anything that increases the person’s distress. This may include actions that **other** people might find helpful, but **this** person does not. Examples include too much talking, explaining, cajoling, touching them, etc. If you notice they don’t like it, don’t do it.
2. Engage with the person around a preferred topic or interest.
3. Address their emotional distress, not their behaviour. It is sometimes helpful to acknowledge their feelings with a few words, such as “I can see you don’t like when I touch your face. I will be quick.”
4. Often it is enough to **quietly and attentively** wait a few minutes. Listen.
5. Avoid direct or prolonged eye contact.
6. Reduce the amount of language you use. Your primary means of communication will be body language and facial expression to promote calm. Avoid strong body language.
7. If you have to talk, keep your language very simple and give clear directions in a slow and calm way.
8. Best if one person at a time talks to the individual, others can stay in the background.
9. Give the person physical space. Stay at arm’s length away if possible and take a small step backwards if their distress increases. Always approach the person from the side so as not to startle them.

**At the height of their distress:**

**Wait**. It is often enough.

Stay calm and engaged. Listen.

***If this general advice is not helping***, look for more detailed information about the person, such as their *Health Passport* or *Behaviour Support Plan.*

