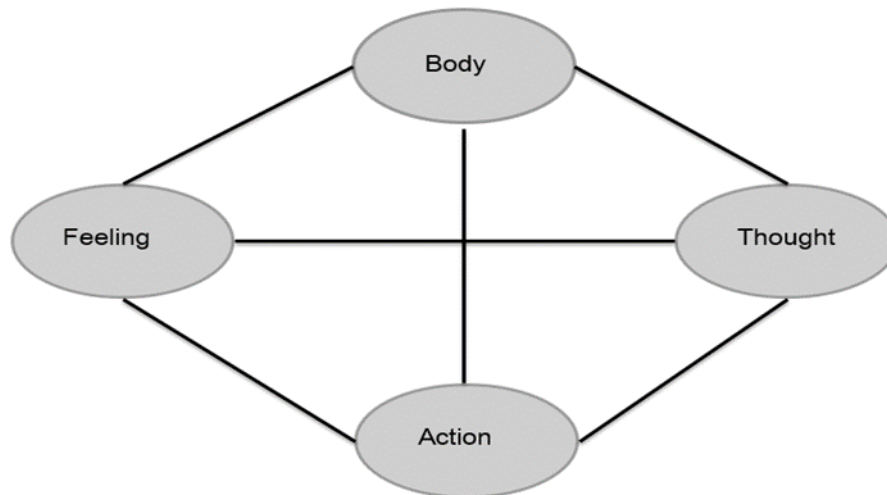


STEP 1: USE COPING STRATEGIES WHEN TRIGGERED

Physical signs <i>(what does it look like when triggered)</i>	Emotional signs <i>(thoughts/feelings/statements when triggered)</i>
Ex. "red face, sweaty clenched fists"	Ex. "No one cares about me."

My coping skills	How others help me cope
Ex. Draw/color, listen to music, or journal	Ex. Listen, give 5 min break, Hug



STEP 2: DE-ESCALATION TECHNIQUES

- Listen to concerns without interruption or judgement
- Remind them of motivators and incentives
- Consider how the environment is impacting the child
- Give space, stand out of their reach
- Offer PRN (as needed) medication
- Keep firm limits, clearly explain expectations
- Avoid responding to verbal insults/inappropriate language
- Limit verbal communication, use soft voice
- Use distraction
- Validate feelings
- Provide caring gestures
- Help them communicate by requesting they use a 1-10 scale to rate symptoms

Name: _____
DOB: _____
MRN: _____

STEP 3: CALL FRIEND/FAMILY MEMBER FOR SUPPORT

Name	Relationship	Phone Number
_____	_____	_____
_____	_____	_____

**STEP 4: NOTIFY OUTPATIENT TEAM
ALWAYS CALL 911 IN THE EVENT OF AN EMERGENCY**

OUTPATIENT TEAM	Name	Agency	Phone/e-mail	Next appointment
Case Manager				
Therapist				
Psychiatrist / Nurse Practitioner				
Primary Care Physician				
Caseworker (JFS/CPS)				
Other resources: _____				

ALTERNATIVE CRISIS LINE OPTIONS

EMERGENCY SERVICES	911
CCHMC – Psychiatric Intake Response Center (PIRC)	513.636.4124 (cincinnatichildrens.org)
Hamilton County Mobile Crisis	513.584.5098
Butler County Mobile Crisis	1.844.427.4747 or 1.844.4CRISIS
Clermont County Mobile Crisis	513.528.7283
Warren/Canton County Mobile Crisis	1.877.695.6333
Talbert House Care Crisis Hotline	513.281.CARE (2273)
Northern Kentucky Crisis Line (Northkey)	859.331.3292
National Suicide Prevention Lifeline	1.800.273.TALK (8255)
Suicide Prevention My3 App	http://myapp.org/
Hamilton County Developmental Disabilities Services (DDS)	24-hour on-call: 513.794.3300 24-hour report line: 513.559.6629
Hamilton County Jobs and Family Services	513.241.KIDS (5437)

Name of persons completing form:

Patient: _____ Parent/Caregiver: _____

Clinician: _____ Other: _____

Date: _____