

Lesson Plan for W.A.V.E. 303

Section	Time (Approx.)	Slide	Ask/Say & Speaking Notes
Welcome & Introduction	3-5 minutes	1 - 5	<p>Note: Welcome participants and introduce yourself. You may wish to use a short icebreaker activity.</p> <p>Housekeeping details:</p> <ul style="list-style-type: none"> ▪ Length of session, finishing time ▪ Washrooms ▪ Emergency exits/muster point ▪ Cellular phones, pagers turned off unless absolutely necessary <p>This session will be a hands-on learning experience with lots of interactive participation. Ask questions as we go through the program.</p> <p>Successful completion of this program includes:</p> <ul style="list-style-type: none"> ▪ your active involvement in discussion ▪ working through the activities as you practice W.A.V.E. <p>Note: Have the participants fill out evaluations & fit for training declaration at this time.</p>
Learning Objectives & Course Participation	2 minutes	6 & 7	<p>In this W.A.V.E. session you will learn:</p> <ul style="list-style-type: none"> ▪ The appropriate approach to an individual (e.g., client). ▪ An awareness of yourself, your environment and an individual. ▪ The basic principles to identify risks and then eliminate or manage the risk(s). ▪ The basics of how to protect yourself in an adverse situation, keeping respect and professionalism foremost. ▪ A few techniques to break away from a pinch, hold or choke. <p>W.A.V.E. is part of an employer's comprehensive program to address violence in the workplace.</p>
What Does W.A.V.E. Stand For?	1-2 minutes	8	<p>When we review and practice the approach and techniques, it will be necessary for me to watch you as you give a return demonstration. It is part of my role as a W.A.V.E. trainer to ensure that you leave here today with a good understanding of W.A.V.E.</p> <p>Note: You may wish to distribute a participant evaluation form at this time and have participants complete the "pre" questions only. Have them complete the balance of the evaluation at the end of the session.</p> <p>Quick Reference Document Note: Explain that the document is an overview of the information for the session and they may wish to keep this handy, post in the staff area and refer to it following training.</p>
The W.A.V.E. Program	1 minute	9	<p>W.A.V.E. 101: The coarse content is situational awareness and may be applicable to every level of worker, depending on risk of role. W.A.V.E. 101 includes basic information on awareness, assessment and appropriate approach.</p> <p>W.A.V.E. 303: Includes 101 and introduces employees to a selection of breakaway techniques. This is facilitated through discussion, practical hands-on practice, return demonstration and role play activities.</p>
History of W.A.V.E. & Violence in Healthcare	1-2 minutes	10, 11	<p>Key facts:</p> <ul style="list-style-type: none"> • Violence and harassment affect all health worker groups and work setting in the health sector. • Up to 62% of health workers have experienced workplace violence.

			<ul style="list-style-type: none"> Verbal abuse (58%) is the most common form of non – physical violence, followed by threats (33%) and sexual harassment (12%).
Accountability	2-3 minutes	12 & 13	<p>Note: The goal is to help workers understand they are responsible and accountable for their actions.</p> <p>ASK: What does “accountability” mean to you?</p> <p>ANSWERS: Give each person the opportunity to give their response(s). You may want to write the responses on a flipchart and refer back to them as you go through this section.</p> <p>The general definition of “accountability” includes:</p> <ul style="list-style-type: none"> being bound to give an explanation of your conduct being responsible; answerable. <p>In day-to-day work, accountability means:</p> <ul style="list-style-type: none"> following the policy using the skills you have received in training being responsible for the decisions/actions you make at work and even at home performing your job duties accurately and appropriately and using your knowledge, skills and abilities received during training - including making appropriate choice asking for help/assistance or additional training use equipment safely report anything that is unsafe. <p>As a W.A.V.E. trainer, some of the things I am accountable for are:</p> <ul style="list-style-type: none"> preparing in advance and being here today to teach the program staying up to date with any new material related to W.A.V.E. observing each of you as we work through the program and helping you to learn completing attendance lists, any follow-up required with your manager/supervisor <p>Everyone is accountable - me, you, your manager/supervisor, VPs, right up to the CEO.</p> <p>ASK: Can you share some of the areas or ways you are accountable at work and even at home?</p> <p>ANSWERS: Give each person the opportunity to share. Some answers may include:</p> <ul style="list-style-type: none"> coming to work on time wearing appropriate clothing (e.g., uniform, footwear) documenting incidents changing the way we work and using the skills we are taught <p>ASK: How do you think we should be held accountable?</p> <p>ANSWERS: Some answers may include:</p> <ul style="list-style-type: none"> as per the policy - such as the W.A.V.E. policy performance plan <p>ASK: Does the employer have an option about following the law?</p> <p>ANSWER: No. No choice. Not optional.</p> <p>ASK: Do workers have an option/choice about following the law?</p> <p>ANSWER: No. The law is the law. What employers have to provide, workers must use.</p>
Definition of Violence According to The Saskatchewan Occupational Health and Safety	1-2 minutes	13	<p><i>The Saskatchewan Occupational Health and Safety Regulations, 2020, Regulation 3-26,</i> states: “Violence” means the attempted, threatened or actual conduct of a person that causes or is likely to cause injury and includes any threatening statement or behavior that gives a worker reasonable cause to believe that the worker is at risk of injury.</p>

Regulations, 2020			
Violence in Healthcare is a Global Issue	5-6 minutes	14, 15, 16	Note: Ask the group if they have experience violence in the workplace and get them to share examples.
W.A.V.E. Approach Zones	3-5 minutes	17 & 18	<p>Imagine if everyone had a traffic light over our head that would show others whether to “go ahead”, “use caution” or to “stop”. W.A.V.E. links this example of colors to the W.A.V.E. approach zones.</p> <p>Green = You can approach me as I had a good sleep, I’m in a good mood and feeling pretty good. It is safe to approach me.</p> <p>Yellow = I am feeling a little bit off today but it still may be safe to approach keeping in mind you are keeping your guard up. Be cautious.</p> <p>Red = Do not approach me as I am having pain I did not sleep well. I don’t want anyone to come any closer. Your safety is at risk!!!!</p>
The Approach Zone & Assessment	5-10 minutes	19, 20, 21	<p>Key Principle of W.A.V.E. Do not get within 3 feet minimum and/or 2 arms lengths of a person until you have taken the time to do a proper assessment. A proper assessment will help determine that it is safe for you to get closer.</p> <p>W.A.V.E. has different approach zones based on whether a person is standing, sitting or lying down.</p> <p>Standing or Sitting Imagine the person is the centre of a clock. In front of a person is 12 o'clock, right side is 3, behind is 6 and to the left is 9 o'clock</p> <p>Going back to the stop light color system, green is the safe zone and you may not need to be as on guard. Yellow from 9 to 11 or from 1 to 3 is the safest working area, or approaching area, to a person. The side is usually determined by whether you are right or left handed.</p> <p>The red zone is the “DO NOT approach zone!” This is because when you stand directly in front of someone they can simply do too many things to you that may be hard to defend against.</p> <p>Lying Down If someone is lying down, for example on a bed, stretcher or couch, then the color zones change. You now have two red zones as well two green zones.</p> <p>The red zones are now focused toward the largest muscle group in our bodies – the thighs. This is the “DO NOT approach zone!”</p>
Too Close for Comfort – Activity	5-10 minutes	22, 23	<p>This is a fun activity that will help you understand the “comfort zone” of approach. I will observe each of you during this activity and coach/assist you.</p> <p>Activity:</p> <ul style="list-style-type: none"> ▪ Team up into pairs - one of you will be #1 and the other will be #2. ▪ Each pair faces each other. ▪ Stand about 3 feet apart or 2 arm’s length away from each other. ▪ Make eye contact with each other; try to keep a straight face during this activity. ▪ On the count of one, two, three, #1 takes baby steps toward #2. ▪ Keep approaching slowly. ▪ When #2 feels uncomfortable – they will put their hand out and say “stop”. <p>Look at the distance between each of you – this is where #2 prefers to have the conversation.</p>

			<p>Note: Repeat this activity with #2 taking the baby steps toward #1. Each participant has the opportunity to practice this.</p> <p>ASK: Why do you think we just did this activity?</p> <p>ANSWERS:</p> <ul style="list-style-type: none"> ▪ shows where someone's personal space is ▪ comfort zones of each person <p>Think about:</p> <ul style="list-style-type: none"> ▪ How many times is a client/patient approached by a staff member? ▪ Sometimes the approach is a lot closer than what we just did. ▪ See how uncomfortable that activity made you feel? ▪ Imagine being the client or the individual you are approaching.
Signs of Aggression	5-6 minutes	24	<p>When doing an assessment, sometimes there are some simple signs of possible aggression.</p> <p>Male is showing physical signs of aggression through facial expressions. Other male is also showing physical signs by clenching his hands. Female is showing verbal signs by yelling.</p> <p>ASK: Can you give me some suggestions of what you have experienced or seen?</p> <p>ANSWERS: Physical signs of aggression could be finger pointing, pacing, throwing things. Verbal signs of aggression could be swearing, loud speech, simply telling you "no".</p> <p>ASK: What if you ask someone how they are and they don't say anything? You wouldn't approach any closer as you're still unsure of how they are. But what could no response mean?</p> <p>ANSWERS: If someone doesn't respond it is a very good reason not to approach any closer as you are still unsure of how they are. As healthcare workers, it could be explained as:</p> <ul style="list-style-type: none"> ▪ they are deaf or they may need their hearing aide ▪ they don't understand your language or they can't speak ▪ medications are impacting their ability to communicate ▪ Vision <p>What else can you think of?</p>
6 Steps to Safety	8-10 minutes	25	<ol style="list-style-type: none"> 1. Make eye contact with the individual (if appropriate). 2. Choose which yellow zone of the individual you will be approaching on. Remember the dominant side for you and non-dominant for the individual. 3. Determine safe distance. Stay away 3 feet minimum or 2 arms lengths of a person until you have taken the time to do a proper assessment and you have determined that it is safe for you to approach. 4. Angle your body to the side. This will minimize target areas in the event the individual strikes out. 5. Talk with your hands. Keep your hands visible so the individual knows you're not hiding anything. 6. Use assessment process of the individual. Before you start your task as well as while you are performing your task.
What's your line?	2-3 minutes	26	<p>When you make eye contact (if appropriate) explain:</p> <ul style="list-style-type: none"> ▪ WHO YOU ARE: Hi, My name is (first name could be adequate). ▪ WHAT YOUR JOB IS: I am a (e.g., caregiver, housekeeper, maintenance worker). ▪ WHAT YOU ARE GOING TO BE DOING: I am here to (e.g., give you a bath, change your bedding, change the light bulb). <p>The approach is kept simple and clear. It will become a very natural process.</p> <p>A simple question such as "How are you?" is sometimes all you need answered.</p> <p>W.A.V.E. in Client Care In addition to the elements in W.A.V.E., knowing the client is critical:</p>

			<ul style="list-style-type: none"> access to client chart if possible – know what the client’s “triggers” are that may initiate or even escalate a situation – know the care plan for that individual. Can the client see and hear adequately communication from other workers/supervisor on client status are any changes in the client’s behaviour documented and are changes communicated effectively to the circle of care
Step 1	2-3 minutes	27	1. Making eye contact (if appropriate) Look for: <ul style="list-style-type: none"> Mood Health Possible intentions Which “light” are they displaying (Red, Yellow, Green)
Step 2	2-3 minutes	28	2. Choose the appropriate yellow zone Questions to ask yourself: <ul style="list-style-type: none"> Which is my dominant side – right or left? Which appears to be their dominant side – right or left? Approach from your dominant side and their non-dominant side.
Step 3	3-5 minutes	29	3. Determine a safe distance and stay there until it’s safe to move closer. Remember...3 feet away or 2 arm lengths and be respectful of them and their personal space. Before moving closer, be aware and think about: <ul style="list-style-type: none"> Individual’s size and level of mobility Environmental space Objects that could be used as weapons (e.g., cane, walker, hot beverage) ASK: Why would you need to be aware and think about these things? ANSWERS: <ul style="list-style-type: none"> The individual’s size could mean they have a longer arm and can reach out further Even though they could be in a chair, their level of mobility could be quicker than expected. The environment could be loud which makes it hard to hear. The room could be small and cluttered. I need to watch where my exit is so I don’t get blocked in the room. A cane could give someone a longer reach. Hot beverages could be thrown at me.
Step 4	2-3 minutes	30	4. Turn your body at an angle. <ul style="list-style-type: none"> Your dominant side is turned toward the individual. Turning slightly sideways reduces target areas and helps to make you less threatening With your dominant side forward you are better prepared to respond.
Step 5	2-3 minutes	31	5. Talk with or show your hands. <ul style="list-style-type: none"> Simply approaching with “open” body language can convey a non-threatening attitude. People may be suspicious of you if they can’t see your hands. Your hands will be in a position ready to respond.
Step 6	2-3 minutes	32	6. Assess the Client <ul style="list-style-type: none"> Ask open-ended questions like “How are you feeling today?” If you know something about them and their condition you may want to ask about that, for example “Can you tell me how your toe is today?” Pay attention to their response. Listen to what they are saying and how they are saying it.
Activity	10-15 minutes	33	Note: Having the 6 Steps to Safety visible helps participants as they could use this as a guide as they go through the steps. This is where your participants will learn the approach so you may need to coach them through this activity.

			<p>Go through the following points to get the activity started:</p> <ul style="list-style-type: none"> ▪ Create teams of 2. ▪ Each group will have one chair. ▪ Have enough room in between each group for safety. ▪ One of you will sit in the chair and be the “client.” ▪ The other will be the staff member. ▪ First you need to create and perform your “line” - this is what you first say while approaching a client. Introduce yourself with your first name, what department you work for/your job title. Then tell the client what task you will be performing and then end off with an open-ended question to further get feedback from the client. <p>You may want to add some role-playing scenarios with you as the client. Some suggestions to increase the learning experience are listed below. While doing these scenarios, ensure you also coach the participant not to fall into this “trap”.</p> <ul style="list-style-type: none"> ▪ extend a handshake - coach the participant ▪ attempts to obtain personal information ▪ attempts to trick them to come closer (e.g., to tie his/her shoelace prior to doing an appropriate assessment) ▪ ignores and walks away ▪ has an agitated visitor/family member in the room <p>If you do add role playing scenarios, reinforce the 6 Steps to Safety with each activity.</p>
Approaching Closer	3-5 minutes	34, 35, 36, 37, 38	<p>Note: There are four points here to cover and demonstrate to your participants. Participants practice while you observe and coach.</p> <p>**During any part of the approach, communication is very important. Always tell your client why you are there and what will happen.**</p> <p>1. Lower Approach (slide 35) Rather than standing over someone in what may be perceived as a domineering stance, assume a 3-point stance if appropriate and safe to do so. This stance puts you on both feet and one knee, not just on the balls of your feet. Caution – this could put you as an easier target. It’s best to know your client before you use this approach. This approach is most effective when working with children or to engage and maintain positive eye contact with your client or resident.</p> <p>2. Gaining control (slide 36) Reaching out to tap someone’s arm, perhaps by the wrist, can help you continue to assess to client. Are their muscles tensing up, is their arm getting ready to move (yellow light moving toward red) or are relaxed and open to you talking to and touching them.</p> <p>3. Redirecting technique (slide 37) This is where you are in the lower approach and they have attempted to strike out, try to use their force to redirect the blow or give yourself momentum to move away.</p> <p>4. Leaving the area (slide 38) Keeping yourself safe is key. If you are safe you can call for help. This may require leaving the area. Leaving the area to get help may be difficult if there is someone in danger but we need to realize that when we go to get help that may be better than staying to try to resolve the problem and possibly putting ourselves at risk in the process.</p>
3 P’s of a Right Attitude	1-2 minutes	39	<p>It helps when we have the 3 P’s of a right attitude:</p> <p>Positive: having a positive attitude toward our job and the people we work with, clients and co-workers, will help us to properly and objectively assess our clients and those we work with.</p> <p>Professional: taking responsibility for our actions.</p>

			<p>Productive: at work we are being paid to do a job. We should do it well and to the best of our ability so we can go home at the end of the day and be proud of what we did.</p> <p>If a person comes to work with a positive attitude (with a smile on their face, making eye contact and asking others how they are, etc.) it just might decrease the possible chances of that person even becoming involved in a physical confrontation.</p>
5 Scans for Workers	3-5 minutes	40	<ol style="list-style-type: none"> 1. While driving to a location. When close to the area, if you see any threats you have the due diligence and/or right to drive away. 2. Before exiting your vehicle. While still in the safety of your running vehicle you should complete another scan of the area. 3. Exiting your vehicle and before closing the door. Use your senses to determine if it is safe to proceed. Are there any unusual noises or smells? Perhaps a dog barking; people yelling; the sound of things being broken? 4. Walking in to meet the client. When standing at the doorway to the area to perform another scan of the immediate space. When you are standing, the height and angle provides you with a different visual perspective. This process continues to provide protection and a safe exit if required. 5. While meeting and assessing the client. Complete assessment of the client and environment prior to entering the area.
Preparing for Violence – Other Possible Contributors	1-2 minutes	41	<p>Other possible contributors to violence:</p> <ul style="list-style-type: none"> ▪ Times of distress: hearing bad news, being in a waiting room, not understanding what's happening. ▪ Medical conditions: Dementia, pain, other ▪ Substance abuse: drugs and/or alcohol ▪ Environment: busy, strange place <p>Note: The following information is provided for you in the event you need to provide additional information on possible contributors to violence:</p> <p>Example for Times of distress: Because we work in healthcare we might forget just how stressful it can be to come into our facilities. Think of this:</p> <ul style="list-style-type: none"> ▪ You go to your doctor for a physical and you're told you have to be scheduled for another test. ▪ Your appointment at the test center is in six weeks. ▪ For those six weeks all you can think about is what could possibly be wrong. ▪ The day arrives and you're to be there at 7a.m. ▪ Everything at home still has to run okay so that you make your appointment. Family, kids to school, babysitter schedule.... ▪ When you get to the test center you must figure out the parking system, which door to go into, where to get admitted. ▪ In admitting, there are dozens of people also waiting. ▪ You must give your personal information to strangers. ▪ Every step of the day is just one more stressful event after another. <p>We must remember that just coming into our system can be a very stressful event. Usually it pertains to an illness, injury and the unknown. We can try to make it as easy and nice as possible yet it is very stressful on people.</p> <p>Medical conditions may directly be related to violence in healthcare. Examples are: dementia, head injuries, uncontrolled blood sugars. We must always rule out organic reasons as to why a client maybe acting this way.</p> <p>Substance abuse can be a concern. Individuals may be unpredictable, agitated and/or very strong when using substances. It is very possible to have more than four employees holding these patients down in emergency.</p> <p>Alcohol can influence someone's personality and make them more aggressive when they are under the influence. A person, when addicted to a substance and physically needs it, can be very dangerous and sometimes they will do anything to get their "next fix."</p>

			<p>The environment can greatly affect how a person is feeling and can contribute to their stress. For example:</p> <ul style="list-style-type: none"> ▪ We divide our patients by curtains; all of the noises and all the pain that people are going through can still be heard. ▪ Waiting for an elevator. The bell goes off and the door opens. Oh no...the elevator is 95% full but there is just enough space on it for one more. Getting on would be very uncomfortable - this could increase the stress level of that person.
<p>To Protect Yourself, You Can</p>	<p>3-5 minutes</p>	<p>42</p>	<p>To Protect Yourself, You Can:</p> <ul style="list-style-type: none"> ▪ Secure your personal property (e.g., locker, car, purse, wallet) ▪ Always be aware of your surroundings ▪ Trust your instincts ▪ Be aware of your own complacency (e.g., becoming too comfortable, in a routine) ▪ Plan for events before they happen ▪ Be aware of suspicious activity ▪ If working alone, have ways to communicate with others ▪ Have respect for others and their situation ▪ Have a proper attitude at work (3 Ps) <p>Note: The following information is provided for you in the event you need to provide additional information or have classroom time with a smaller group.</p> <p>What is the possibility of someone working alone?</p> <p>Who here is going to be working alone in their job? Maybe a nurse, or a housekeeper, we may work alone sometimes.</p> <p>We must be able to identify when working alone. We need to be more aware of our surroundings in order to keep the same level of safety.</p> <p>ASK: What are some situations when you'd be working alone?</p> <p>ANSWERS: (consider these situations) At night there are three staff (2 LPN's and 1 RN) covering the entire floor. If one staff was at the desk, the second went into the north corner to check on a patient and the third went to the south corner to check on another patient...they'd be alone and what if something happened?</p> <p>How many people here have parking? Sometimes in areas staff are walking a few blocks to their vehicle. In the fall and winter months the walk could be in the dark in the morning and in the dark going home.</p> <p>Going to the cafeteria for our lunch breaks on nights? Using the stairways alone? The parkades?</p> <p>Can you see how you are working alone some of the times?</p> <p>Safety in healthcare should not start when you walk into the building. It should always be present in your life and sometimes just getting to or from work can be the most dangerous part of your job or day.</p> <p>Be aware of your surroundings.</p> <p>Protection of us starts with ourselves. It is our responsibility to protect ourselves by being aware of our surroundings at all times.</p> <p>Being aware of the day to day dangers that surround us from the time we arrive to work and the time we leave work.</p> <p>Do not be submissive, have eye contact. An individual walking with his/her head down is not aware of his surroundings.</p>

			<p>Prior to walking away from your vehicle, how many of you actually scan your surroundings prior to exiting your vehicle?</p> <p>How many people secure your vehicles before you leave them?</p> <p>Did you park out of convenience or safety in mind?</p> <p>Think about where you park your vehicle determines where you will exit at the end of your shift. We are creatures of habit whether they are good choices or not. Stay out of the shadows despite this is your regular walking path. Do not park in the shadows as individuals can watch your property and this can be a valuable resource to them.</p> <p>Take responsibility for your own safety. Everyone has to take responsibility for their own safety and conduct themselves accordingly. Do not wait for others to do it.</p> <p>Trust your instincts. When the little hairs on the back of your neck are standing up because something may be wrong...chances are they are wrong. You have to trust your instincts and listen to them and act accordingly. A lot of people get themselves into bad situations and had a chance to get out of that situation before it happened...but they never listened to their instincts first. They were conflicted with denial, excuses and about how "what they did" might influence or affect "another person thinks of them."</p> <p>An example of this is the elevator, when the door opens and there an occupant inside of it and your "spidey senses" are saying "don't go in there, don't go in there." Do you still go in there because you don't want to make it appear to the person that you don't trust them for any reason? A simple and easy way to get out of this scenario is by simply saying "I'll get the next one thank you" or "I'm waiting for another person so I'll catch the next one" or "I forgot something and will take the next elevator.</p> <p>If your instincts are telling you something is wrong you need to trust those thoughts. Instincts have evolved and protected us over time so why do we sometimes ignore those thoughts? Try to plan for events the best you can before they happen. Taking this training can be an example of planning ahead.</p>
Social Media	2-3 minutes	43, 44	<p>What do I do if that happens?</p> <ul style="list-style-type: none"> ▪ Reference workplace specific policies & procedures ▪ Save or snapshot the messages and report to Police ▪ Report abuse through social media channel ▪ Block the individual ▪ Inform Manager/Supervisor ▪ Inform family members so they can be aware of potential threats to themselves as well
EPP Codes & Awareness	2-3 minutes	45, 46	<p>Codes</p> <ul style="list-style-type: none"> • Does your facility have a Code White? • Have you reviewed it lately? • What is your role? • Who decides when it becomes a Code Green? • Do you know what a Code Silver is? What about Code Purple? <p>How aware are you?</p> <ul style="list-style-type: none"> • Protect yourself and be aware of your surroundings. • Secure yourself and your vehicle
Suspicious Activity	1-2 minutes	47	<p>Crime does not always happen at two in the morning or with a person wearing a black hoodie. Sometimes things do not appear as they are.</p>
How to Keep Yourself Safe	2-3 minutes	48	<ul style="list-style-type: none"> • You come before your bag. Throw it away from you! • Leave your bag at home or carry only what you need • Place your bag under your coat

			<ul style="list-style-type: none"> • Use reflective surfaces like windows to see if any one is behind you • Walk in busy, well-lit areas • Walk briskly • Look at everyone as you pass
Bringing it all together	1-2 minutes	49	<p>By assuming a positive and upbeat attitude, being mindful to our profession by being proficient, professional and trained we anticipate to be more productive in our roles and tasks. Let's always assess, apply confidence to the situation, and manage it with the utmost overall safety in mind.</p> <p>Remember....</p> <ul style="list-style-type: none"> ▪ Approach – be aware and use the Green, Yellow and Red Zones ▪ Communication – be clear ▪ Document, report incidents – know the process in your work area
W.A.V.E. Breakaway Techniques	10-12 minutes	50, 51, 52, 53, 54,	Note: Introduce breakaway techniques & play videos embedded.
Reminder	1-2 minutes	55	DURING PRACTICE, IF AT ANY TIME YOU EXPERIENCE PAIN OR DISCOMFORT, TELL YOUR PRACTICE BUDDY TO STOP!! TELL ME.
Warm Up Activity	5 minutes	56	<p>Before the techniques we are going to do a Warm Up activity.</p> <p>Note: This could be stretching, a circle warm-up to ensure feet are not planted to the floor.</p>
Keep Top of Mind	1-2 minutes	57	<p>When working with a partner, I will...</p> <ul style="list-style-type: none"> • Stop if told to do so • Move slowly and not try to trick/sabotage my partner • Try to concentrate on technique more than strength • Trade roles several times until comfortable and familiar • Alert my Instructor to any injuries
Practice Breakaway Techniques	40-60 minutes	58	<p>Breakaway Techniques</p> <ul style="list-style-type: none"> • Covering up Technique • Arm Grab releases • Pinch releases • Hair pull releases (front & back) • Choke hold releases (front & back) <p>Note: Demonstration, return demonstration, discussion, etc., should take approximately 40-60 minutes. The size of the class would impact the duration.</p> <p>Practice of the techniques will take place in pairs. Pick the pairs or have them select someone to work with.</p> <p>Line up the teams in facing each other (if the room allows) or spread out in the room – ensure there is enough distance between the teams so that practice is safe and no one bumps another.</p> <p>The Quick Reference handout will have these techniques explained...so you may need to refer to that when you practice.</p> <p>The following is the text that appears on the Quick Reference. Demonstrate one technique at a time. If you're co-teaching, both of you demonstrate. If you're teaching alone, use one of your participants to assist you with the demonstration.</p> <p>As you're demonstrating, give a step by step clear description of what you are doing.</p> <p>As participants practice, you need to walk around and observe each person. Coach and assist each person so that they are practicing the technique appropriately. Reinforce "Practice Slowly".</p>

			<p>Key Points:</p> <ul style="list-style-type: none"> ▪ communicate with the individual who may be pinching or have a hold of your arm. Calmly and assertively say “let go”. Depending upon the individual, this direct order could be enough to have them release their grip on you. ▪ maintain your self-control and keep breathing. Don't give in to your sense to panic – stay focused. When you stop breathing you may stop thinking – your brain needs oxygen to function properly. ▪ only match the level of response to the level of assault to adequately break away – do not use excessive force.
Covering Up		59	<p>Protect your vital organs during an assault:</p> <ul style="list-style-type: none"> ▪ use your hands/forearms to cover the side/front/back of your head or any part of your body that you can ▪ turn your body away while raising your knee (closest to the individual) toward your chest. Use your thigh to provide protection. This action is done in a smooth, fluid movement. Use of this technique could put you off balance and result in injury to yourself – use this technique with caution.
Arm Grab Releases		60, 61, 62	<p>Arm Grab Escape</p> <p>a. Assaultive individual has a hold of your arm and both his thumbs are up.</p> <ul style="list-style-type: none"> • Assaultive individual has a two-hand grip on your arm and both thumbs are up. ▪ move in, towards the individual ▪ reach through the individual's arms with your free hand and grip your captured hand ▪ turn, broaden your stance ▪ rotate arms up in a full arc, going in the direction of the individual's thumbs. Move is effected by directing effort against the individual's thumbs (weakest point of the grip) ▪ execute technique swiftly before the individual has had time to react to and resist ▪ move out of the way <p>b. Assaultive individual has one thumb up and one thumb down.</p> <ul style="list-style-type: none"> ▪ move in, towards the individual ▪ grab your own captured hand with free hand from underneath and twist your arm like a corkscrew. (this technique won't work unless you get your weight moving into him) <p>Release from one-hand grab</p> <p>Assaultive individual grabs your wrist with one hand.</p> <ul style="list-style-type: none"> • Since such assaults are not life threatening, you may decide to allow the assaultive individual to maintain the grab while attempting verbal and nonverbal intervention measures (including asking the individual to let go). ▪ place your free hand onto the individual's grasping wrist (optional) ▪ step in towards the individual ▪ make a fist with your captured hand, and roll your fist with your palm inward towards your body until the smallest part of the wrist appears between the assaultive individual's thumb and forefinger (which is the weakest part of his grip) ▪ keep your elbow close to your body ▪ bend your fist toward your own wrist, and with a quick motion, pull your wrist through the individual's thumb and forefinger pulling upwards towards your shoulder ▪ move out of the way
Pinch Release		63	<p>Assaultive individual pinches your arm.</p> <ul style="list-style-type: none"> ▪ grasp assaultive individual's hand with free hand and grasps the small thumb muscle (base of the thumb), at the same time pushing arm down. ▪ move toward the point of capture with full body weight. ▪ this will cause the individual to release pinch hold. ▪ move out of the way.
Hair Pull Release		64, 65	<p>Assaultive individual grips your hair from the front</p> <ul style="list-style-type: none"> ▪ step in, toward assaultive individual.

			<ul style="list-style-type: none"> ▪ immediately establish control to minimize further pain or damage from being pulled or shaken. Push the individual's grabbing hand(s) firmly down against your head. Move your head toward the individual at a 45 degree angle (reposition grabbing hand into a mechanically inferior position). ▪ by establishing control the immediate danger from the hair grip is terminated and negotiation can begin or help can be summoned. <p>To release the hair-pull grip:</p> <ul style="list-style-type: none"> ▪ continue control over grabbing hand. ▪ drop either foot back. ▪ move your head down and walk backwards. ▪ when you feel grip releasing move back, out of the way. <p>Assaultive individual grips your hair from the back</p> <ul style="list-style-type: none"> ▪ place both your hands on top of the individual's hand(s) but do not interlock your fingers, use enough pressure (it may not take much pressure) on the individual's hand(s) to release the grasp of your hair ▪ take a step forward while bending around to face them. This move will turn their hand(s) upside down and will help to release their grasp of your hair. ▪ With your hands still on theirs, raise your body up and this should release their grasp of your hair. Care must be taken during this technique as it is likely to cause pain in the wrist of the individual. This action is done in a smooth, fluid movement.
Choke Hold Release		66, 67	<p>Release from front hand choke</p> <ul style="list-style-type: none"> ▪ assaultive individual attempts to choke you from the front. ▪ step in, towards the individual. ▪ tuck chin downward as close to chest as possible. ▪ raise both arms straight up at the same time, keeping them outside of the individual's arms (e.g., as if you were cheering for a touchdown!); then rotate and at the same time, bring both arms downward, in an arc so that your upper arms come down over individual's wrist/forearm (utilizing rotary force and leverage). ▪ as you rotate, grip will be broken. ▪ move out of the way. ▪ turn and face assaultive individual, hands in stop position, talk to individual. <p>Release from rear hand choke</p> <ul style="list-style-type: none"> ▪ assaultive individual attempts to choke you from the rear. ▪ step back, towards the individual. ▪ tuck chin downward as close to chest as possible. ▪ raise both arms straight up at the same time (e.g., as if you were cheering for a touchdown!); then rotate and at the same time, bring both arms downward, in an arc so that your upper arms come down over individual's wrist/forearms (utilizing rotary force and leverage). ▪ as you rotate, grip will be broken. ▪ move out of the way or ▪ step back, hands to stop position, talk to individual.
Summary	2-3 minutes	68	<ul style="list-style-type: none"> • The appropriate approach • Self, environment and individual awareness • The basic principles to identify risks and then eliminate or manage the risk(s). • The basics of how to protect yourself in an adverse situation, keeping respect and professionalism foremost. • Techniques to break away from a pinch, arm grab, hair pull, cover up, hold or choke.
Questions?		69	<p>Ask participants to complete the "after the session" and other questions on the evaluation and hand it back in to you before leaving. The employer will need a copy of the sign in sheet in order to document and record training received by staff.</p> <p>W.A.V.E. 303 wallet cards can be distributed now or after the session. Check on the preferred process of the employer as they may wish to take a copy of each certificate for the employee file.</p>

			Ensure Fit for Training Declaration completed by participant. Thank participants for coming...
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