We Have Your Back
A Worker Safety Collaborative
An Initiative of the Florida Hospital Association

WORKER SAFETY WEBINAR SERIES:

PREDICTING AND PREVENTING VIOLENT BEHAVIOR:
AN INTRODUCTION TO THE CRITICAL AGGRESSION PREVENTION SYSTEM (CAPS)

WEDNESDAY, JANUARY 10, 2018
WELCOME!

WE HAVE YOUR BACK
A HOSPITAL WORKER SAFETY COLLABORATIVE
WHYB: Promoting workforce safety as an organizational priority in our hospitals

**FOCUS AREAS:**

- Safe patient lifting, handling and mobility
- Sharps injury and blood exposure prevention
- Workplace violence
- Finding solutions to reduce work stress, fatigue, and burnout
WHYB: Promoting workforce safety as an organizational priority in our hospitals

FA C U S A R E A S:

- Safe patient lifting, handling and mobility
- Sharps injury and blood exposure prevention
- Workplace violence
- Finding solutions to reduce work stress, fatigue, and burnout
Special Thank You to Our Sponsors!
Predicting and Preventing Violent Behavior: An Introduction to the Critical Aggression Prevention System (CAPS)

JOHN BYRNES
FOUNDER AND CEO
CENTER FOR AGGRESSION PREVENTION
ORLANDO, FLORIDA
Universal Tenet:

Hard Truth: “There is no reaction faster than an action”
The Problem

Root Causes
- Religious Fervor
- Political Extremism
- Mental Illness
- Criminal Intent
- Workplace Issues
- Domestic Concerns
- Traumatic Experiences

Issues
- Terrorism
- Violence
- Bullying
- Abuse
- Harassment
- Discrimination

Workplaces: Hospital/Healthcare
- Coworkers
- Patients/Families/Visitors
- Physicians
The Problem

Root Causes
- Religious Fervor
- Political Extremism
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- Terrorism
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Workplaces: Hospital/Healthcare
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Intuition
???
**The Problem**

**Root Causes**
- Religious Fervor
- Political Extremism
- Mental Illness
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- Workplace Issues
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**Issues**
- Terrorism
- Violence
- Bullying
- Abuse
- Harassment
- Discrimination

**Path to Violence**
- Workplaces: Hospital/Healthcare
- Coworkers
- Patients/Families/Visitors
- Physicians
Finding a **Solution** Through “Emerging” Aggression

U.S. Secret Service & U.S. Dept. of Education & National Institute of Justice

“Safe School Initiative Study”

“An inquiry *should focus instead on the student’s behaviors and communication* to determine if the student *appears to be planning or preparing for an attack.*”

“The ultimate question to answer …. is whether a student is *on a path to a violent attack …*”
“An inquiry should focus instead on the student’s behaviors and communication to determine if the student appears to be planning or preparing for an attack.”

“The ultimate question to answer …. is whether a student is on a path to a violent attack …”

12-16-2013, FBI’s Behavioral Analysis Unit’s Behavioral Threat Assessment Center’s Chief, Andre Simmons, states their ability to prevent violence is predicated on identifying a person who is “on a pathway to violence.”
Any Effective Solution

Critical Aggression Prevention System

Prevention Process:

Emerging Aggression

“Someone on the Path to Violence”
Any Effective Solution
Critical Aggression Prevention System

Prevention Process:
Emerging Aggression

Scalable Observations:
Aggression First Observers

Trained Responses:
Certified Aggression Managers

“Someone on the Path to Violence”

Forensic Recording and Tracking:
Meter of Emerging Aggression
Observy Mobile App
Primal Aggression Continuum™

- Instinctual fight or flight response
- Fueled by adrenaline
- Aggressors who lose control and attack
Primal Aggression Continuum™

- Instinctual fight or flight response
- Fueled by adrenaline
- Aggressors who lose control and attack

Cognitive Aggression Continuum™

- Conscious, Deliberate Aggression
- Fueled by intent (Hostile/Malicious Intent)
- Victimizer, Predator (Criminal) or Terrorist
Primal & Cognitive Aggression Continua™

Which is more lethal?

**Primal Aggression**

**Cognitive Aggression**

**STAGE 9**
- Puts physical harm to victim.
- Kills themselves.

**STAGE 8**
- Continues to attack victim.
- Loses control and uses physical harm.

**STAGE 7**
- Victim becomes aware of self-harm.
- Patient becomes aware of self-harm.

**STAGE 6**
- Victim begins to plan.
- Patient begins to plan.

**STAGE 5**
- Victim starts to feelayered.
- Patient starts to feelayered.

**STAGE 4**
- Victim feels threatened.
- Patient feels threatened.

**STAGE 3**
- Victim feels vulnerable.
- Patient feels vulnerable.

**STAGE 2**
- Victim feels angry.
- Patient feels angry.

**STAGE 1**
- Victim feels angry.
- Patient feels angry.

**NORMAL BEHAVIOR BASELINE**

**TRIGGER PHASE**

**CRISIS PHASE**

**DIVERGENCE**

**ESCALATION PHASE**

**NORMAL BEHAVIOR BASELINE**

**TRIGGER PHASE**

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Primal & Cognitive Aggression Continua™
Which is more lethal?

Cognitive Aggression

Primal Aggression

PRIMIAL PHASE

Crisis Phase

Stage 9
Willing to do whatever it takes, including taking their own life to meet their objective: murder/suicide, terrorism.

Stage 8
Plans to attack victim without self-sacrifice; murder, combatant.

Stage 7
Complicit and in conspiracy with Stage 6 & 8, becomes tactical in nature.

Escalation Phase

Normal Behavior Baseline

Trigger Phase

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Primal & Cognitive Aggression Continua™

Which is more lethal?

Crisis Phase

Stage 9
- Willing to do whatever it takes, including taking their own life to meet their objective: murder/suicide, terrorism.
- Stage 9
  - Panics or becomes enraged. Exhibits the body language of an attacker. Fight, flight or freeze phenomena.
  - Complete loss of judgment. Actions and words usually fail to make sense.
  - Loses verbal control and speech generally incoherent.

Escalation Phase

Stage 6
- Issues an ultimatum. Proclaims the victim as evil.
- Stage 6
  - Persuades self as a victim. Demonstrates intimidation and threats.
  - Belligerent, yelling, sweating, unusual sweating.
  - The aggressor refuses to comply. Depersonalizes victim.

Stage 5
- Deliberately damages the reputation of another by exposing them publicly as an enemy.
- Stage 5
  - Hypervigilant, questions authority.
  - Deterioration of fine motor skills.
  - Scattered and depressed thinking.

Stage 4
- Secretly creates distrust of their victim within their community. Stirs behavior.
- Stage 4
  - Hypervigilant, questions authority.

Stage 3
- Abandons communication as a tool.
- Stage 3
  - Hypervigilant, questions authority.

Stage 2
- Chooses a side and fixes on one point of view. Loses trust of others.
- Stage 2
  - Deterioration of fine motor skills.

Stage 1
- Hardens points of view, begins deception, creates distance, lacks empathy.
- Stage 1
  - Hypervigilant, questions authority.

Conflict, Bullying, Harassment, Abuse
Discrimination begins
Primal & Cognitive Aggression Continua™

Which is more lethal?

Tactical

Spiraling out of control

STAGE 9
Willing to do whatever it takes, including taking their own life to meet their objective: murder/suicide, terrorism.

STAGE 8
Plans to attack victim without self-sacrifice: murderer, combatant.

STAGE 7
Complicit and in conspiracy with Stage 8 & 9, becomes tactical in nature.

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Primal & Cognitive Aggression Continua™

Which is more lethal?

Tactical

Spiraling out of control

 Murder/Suicide/Terrorist

The Murderer/Combatant

STAGE 9
Willing to do whatever it takes, including taking their own life to meet their objective: murder/suicide, terrorism.

STAGE 8
Plans to attack victim without self-sacrifice: murderer, combatant.

STAGE 7
Complicit and in conspiracy with Stage 8 & 9, becomes tactical in nature.

STAGE 9
Panics or becomes enraged. Exhibits the body language of an attacker. Fight, flight or freeze phenomena.

STAGE 8
Complete loss of judgment. Actions and words usually fail to make sense.

STAGE 7
Loses verbal control and words generally do not make sense.
Primal & Cognitive Aggression Continua™

Which is more lethal?

Tactical

Spiraling out of control

Murder/Suicide/Terrorist

The Murderer/Combatant

The Accomplice

STAGE 9
Wiling to do whatever it takes, including taking their own life to meet their objective: murder/suicide, terrorism.

STAGE 8
Plans to attack victim without self-sacrifice: murderer, combatant.

STAGE 7
Complicit and in conspiracy with Stage 8 & 9, becomes tactical in nature.

CRISIS PHASE (Simplified)
COGNITIVE AGGRESSION

STAGE 9
Panics or becomes enraged. Exhibits the body language of an attacker. Fight, flight or freeze phenomena.

STAGE 8
Complete loss of judgment. Actions and words usually fail to make sense.

STAGE 7
Loses verbal control and words generally do not make sense.

CRISIS PHASE (Simplified)
PRIMAL AGGRESSION
# Meter of Emerging Aggression™

<table>
<thead>
<tr>
<th>Threat Risk</th>
<th>Behavior</th>
<th>Communication</th>
<th>Interaction</th>
<th>Demand</th>
<th>Facial Expression</th>
<th>Tactual Movement</th>
<th>Tactual Clothing &amp; Articles</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Destroys the enemy with no intention to survive or harm that enemy through self-destruction</td>
<td>Acting subtly and communicating through actions or establishing logicality with correspondence</td>
<td>Takes self-destructive action in an attempt to destroy the enemy</td>
<td>Appears to be in a trance, “Walking Dead,” remote &amp; profound disconnection</td>
<td>Absence of fear-based expression, complete detachment, fazed or aloof</td>
<td>Hates and upon notice of security or activities that precipitate their plan</td>
<td>Tactual Affirmation</td>
</tr>
<tr>
<td>8</td>
<td>Mates plans apparent with intent to “knock and earn,” plans to assure. (Flat Extension)</td>
<td>Direct threat with means or aggressor refines direct threat or continued deception on subject of potential consequences</td>
<td>Membrane acts tactically, as if they begin to strategically implement their attack</td>
<td>Thousand yard stare, profound disconnection</td>
<td>Loss of animation, complete detachment of victim</td>
<td>Faint, feverish or chills</td>
<td>Unauthorized uniforms, concealed weapons or explosives</td>
</tr>
<tr>
<td>7</td>
<td>Operational planning: surveillance activity, pricing, security response</td>
<td>Tact to evade victim’s completeness</td>
<td>Begins to communicate or use threatening tone of language</td>
<td>Facial flushing with blood, breathing can become fast and shallow</td>
<td>Technical training and maneuvering in preparation for an attack</td>
<td>Tactful clothing could be camouflaging, Acquires and concealed weapons, explosives and/or surveillance equipment</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Exploits security processes, Attack intention, intelligence gathering, analysis and decision. Overly attempting to intimidate victim or submission. May exhibit acute behavior changing signals or escalating behavior to their intent</td>
<td>Oversteeps or oversteps, threatening one’s own view</td>
<td>Aggressive behavior is either the result of the group’s consensus or an individual’s behavior</td>
<td>Faint to feverish</td>
<td>Ugly behavior</td>
<td>Incorrigible, weather in favor of craft</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Cowardly intimidation, victim as an enemy</td>
<td>Increase in irritability mood &amp; behavior during interaction</td>
<td>Aggressive behavioral pattern is consistent with the group or an individual’s behavior, no behavior in support of the cause</td>
<td>Prolonged eye contact or avoid eye contact as a heightened form of disconnection</td>
<td>Contemplative</td>
<td>Suspicious objects in tamas</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Virtually attacks the victim’s core identities, turns the victim’s community against his victim with malicious intent, overly undermines victim’s trust relationship with his community</td>
<td>Response is evasive or ambiguous</td>
<td>Emotion becomes polarized having mobile ground</td>
<td>Arrogant or mild at times</td>
<td>Gang symbols</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Appears detached and self-absorbed,Expresses voice through actions versus words (e.g., place note or script)</td>
<td>Repetitively spits long before responding in an effort to deceive</td>
<td>Takes action without involving others</td>
<td>Heightened anxiety resulting in excessive preparedness</td>
<td>Solicitous</td>
<td>Feeling anxious</td>
<td>Griefing deviation, Observe weight deviations from baseline</td>
</tr>
<tr>
<td>2</td>
<td>Harmful debate, distrustful and hesitant on issue (opinion) disregarding others</td>
<td>Verbalляет; contempt</td>
<td>Communicates only from his own perspective, sampling (telling and common ground)</td>
<td>Facial flushing</td>
<td>Frowned smile</td>
<td>Persuades with additions of threatening tone</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Beginning behavior that is nonconspicuous, nonprovocative, lacking in complicity (distort) and beginning to deceive</td>
<td>Appears scattered and disjointed, exhibits anger and discomfort</td>
<td>Argumentative in a confrontational way</td>
<td>Repetitive self-talking or a reflection of deception</td>
<td>Neutral</td>
<td>Lack of articulation deviations from baseline</td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>Does not fit usual or typical behavior (Expected baseline of behavior)</td>
<td>Interacts with others appropriately (baseline)</td>
<td>Interacts with others appropriately (baseline)</td>
<td>Appropriate demeanor, department and standard (baseline)</td>
<td>Natural smile</td>
<td>Pace is appropriate to venue (baseline)</td>
<td></td>
</tr>
</tbody>
</table>

*Note: This image contains detailed diagrams and tables related to the Meter of Emerging Aggression™, a model for assessing and managing aggression. The table outlines various behaviors, communications, and interactions associated with increasing levels of threat and provides a framework for identifying patterns and predicting escalated aggression. The visual representation includes arrows and icons to illustrate the progression of behavior from low to high levels of threat.*

**Slide 23**

*Center for Aggression Management*
1. Identification of a person’s level of aggression
   A. Threat Risk Levels: **Low, Moderate, High**

2. “System” of Best Practices:
   A. Communication
      1) Observe and Report (**Aggression First Observers**) 
      2) Observe and Engage (**Certified Aggression Managers**) 
   B. Analysis 
   C. Recording, Tracking and Notifying (**individuals or groups**) 

3. Recommended Best Practice Responses
Getting Involved!
"See Something, Say Something!"

Why don’t people get involved?
- They don’t see it as in their best interest
- They don’t know what to look for | Intuition alone

Meter of Emerging Aggression (MEA)
- Aggression Continuum: They connect bullying with violence
- They realize that they could become a victim
- They see that getting involved is in their best interest!
- The earlier you get involved, the easier it is to diffuse!
What Do You Get With CAPS?

- Critical Aggression Prevention System (CAPS) provides:

1. Common language and common denominator
2. Objective assessment of threat
3. Pragmatic response to emerging aggression
4. Focus on aggressive behavior offering a clear picture to measure threat
5. Opportunity for legal defensibility
6. Safer and more productive environment
1. Step by step through each stage & threat levels
2. When does aggression begin?
3. Stages 1-3 are not seen as “aggressive behavior”
4. Type of aggression (Primal and Cognitive)
5. Identifying the Path (Precursors) to:
   a) Disconnection
   b) Loss of trust
   c) Conflict
   d) Bullying
   e) Harassment
   f) Abuse
   g) Violence

Exercise: Show Us An Example!
First: Sam, an individual who works with you, begins a subtle almost unnoticeable change in his behavior. Normally he is a productive member of your team, cooperative and caring, today, he seems less so. In fact, he has become noticeably distant, uncooperative and nonproductive. When you ask him about this change in behavior, he appeared a little scattered and replies, out of character, with something that seems on-its-face to be untrue.
**Second:** Later that day you engage Sam in a conversation that evolves into a discussion of office politics. Sam, with a feigned smile, expresses to you that he has a real distain and negative bias for any “woman boss.” He is becoming fixated on harming her reputation; he seems to be questioning her effectiveness and trustworthiness. Sam has worked for this hospital for over ten-years and was passed over for the promotion to her position. As Sam shares these insights with you, his face becomes flushed with a micro-expression of contempt, so as to further affirm this anguish over having to report to a woman. He angrily proclaims that this hospital passed over him and gave the position of Manager to her only because she was a woman!
Third: A few days later, Sam’s behavior had not improved. In fact, he appears more detached and self-absorbed. Typically you as a team, guided by the Manager, discuss key issues and make decisions collectively about your desired outcomes and strategies to achieve these outcomes; Sam seems to be acting independently, regardless of any position you as a team might make. As he acts out, displaying his intent, he seems to be quite fidgety, squirming in his chair and you notice a bead of sweat on his brow.
**Fourth:** The following week, one of the other members of the staff and a longtime friend of Sam’s, shared with you that he read an alarming message that Sam had posted on his Facebook page. This message questioned the trustworthiness of the Manager and whether members of the staff should continue to follow her lead. Sam is also trying to quietly convince other staff members that “the Manager” needs to be taken down a peg or two.
Fifth: It’s been two months and Sam, who is quite charismatic, has covertly convinced more than half of the dozen staff members to his way of thinking. In meetings, Sam has respectfully told the “Manager” that many of those here are unhappy with her direction. But when challenged by the Manager to be more specific and what suggestions would he make, he looks at his co-conspirators and with feigned smile he quietly retreats.
Sixth: It’s been a month and Sam has exhibited this same behavior a half-dozen times, each time making an accusation followed by a retraction when confronted.

Sam covertly sends a thinly veiled threat to the Manager, suggesting that he knows where she lives. One of the Manager’s neighbors says that she saw a man’s car meeting Sam’s description parked down the street from her home. The Manager figures out who sent the threat, connecting this fact with the alleged stalking and Sam’s employment is terminated with the hospital predicated on a zero tolerance for making a threat.
Seventh: Sam has a few staunch allies within the hospital (within and outside of the team); he has convinced them to keep an eye on the Manager, as to where she is and when. With their help he has placed an anonymous sealed envelope on her desk containing a picture of her home and a threat to blow it up after she and her family have gone to sleep.

At the subsequent inquest, one of the Manager’s neighbors noticed his car again parked in the neighborhood taking photos of her house. Upon further reflection of local law enforcement and review of community traffic cameras, Sam’s vehicle has been seen in his Manager’s neighborhood many times over the past two weeks.
Eighth: According to family members, Sam is beside himself almost to the point of rage. He has reconnoitered (surveilled) his former Manager’s home to determine when she might be home with her family. It is his intention to attack with “shock and awe.” “These poor people will not know what hit them!” was a statement allegedly made by Sam to one of his friends; who said that this kind of a statement was completely out of character for Sam; and thus, he did not believe a word of it! According to Sam’s friend, this was just Sam blowing off steam after being terminated.
Ninth: The day of the intended incident, Sam sees one of his Manager’s daughters playing in their yard and decides that he won’t kill them all, only his Manager. Sam was an explosives expert in the Army so he decides that he will carry an explosive device on his person, carry it into the hospital and blow himself up with her and anyone else in blast range. He felt, if I am going to give up my life; I might as well make it a spectacular event, I will be the talk of the Nation’s media for weeks.
Exercise: Summary

1. Step by step through each stage & threat levels
2. When does aggression begin? (Stages 1-3)
3. Type of aggression (Primal and Cognitive)
4. Identifying the Path (Precursors) to:
   a) Disconnection
e) Harassment
   b) Loss of trust	f) Abuse
c) Conflict
g) Violence
d) Bullying
Rampages That Could Have Been Prevented

Sandy Hook Shooting
Adam Lanza
December 14, 2012
26 killed, 2 wounded

Connecticut's Office of the Child Advocate (OCA) released the following postmortem:

"While we describe the predisposing factors and surrounding abuses in [Adam Lanza’s] life, we do not conclude that they add up to an inevitable lead to mass murder."

And yet...
Critical Aggression Prevention System (CAPS) Indicators of Emerging Aggression by Stage
- Middle School - Not known to have close friends (Stage 2)
- Fascination with mass shootings (Stage 3)
- By 2005, extensive Internet contact with family except his mother (this lived in the same house), and then only via email (Stage 3) [judicious interview]
- Spent long hours alone playing violent video games (Stage 5) [judicious interview]
- In fifth grade wrote and submitted "The Big Book of Grumpy," an extremely violent, graphic writing. Still obsessed with this document in 8th grade (Stage 6)
- Period often to violent movies (Stage 7)
- "I have no idea who I am, except to say I am a violent person" (Stage 7) [judicious interview]

It is believed he began planning in February of 2012, almost 10 months before the attack (Stage 7), when he posed a threat about mass shooters achieving fame (thus in advance to attack) (Stage 7)

Numerous examinations by mental health professionals - diagnosed with autism, anxiety, sensory integration disorder, but never judged to be at risk of harming himself or others.

Adam Lanza could have been prevented from committing this heinous act had the people around him been trained to see and respond to these indicators, from Stages 4-7, through which he was ascending over the course of many years.

PREVENTABLE INCIDENT

Virginia Tech Shooting
Suwan Ha Cho
April 16, 2007
32 killed, 17 wounded

Washington Post (April 16, 2007)

"In fact, it is not at all certain that some might have survived. Cho from carrying out the rampage that left 32 people dead by killing himself. He shot the campus medical school housed there then, and each shot, it is rumored to be 'disemboweled and decapitated,' not at all of blowing himself up or others."

And yet...
Critical Aggression Prevention System (CAPS) Indicators of Emerging Aggression by Stage
- Great deal of description about being "weak" in school (very early) (Stage 2)
- 9th grade - withdrawn and uncommunicative (Stage 3)
- Misplaced the school, missed class, absent (Stage 4)
- 1999-2001 grades - had written on school locker: "Find yourself, I hope you can believe in God."
- Wrote in a school assignment that he wanted to "report Confidential."
- Somber, quiet, less involved in activities (Stage 4)
- Somber, quiet, less involved in activities (Stage 5)
- Dated a girl he found attractive, but then was found to be attracted to "disemboweled and decapitated." (Stage 6)
- "You have to believe in God." (Cho)
- Concerned with his future, not much better for the future (Stage 7)
- "I have no idea who I am, except to say I am a violent person." (Stage 7) [judicious interview]

Cho could have been prevented from committing this heinous act had the people around him been trained to see and respond to these indicators, from Stages 4-7, through which he was ascending over the course of many years.

PREVENTABLE INCIDENT

Isla Vista Shooting (near Santa Barbara)
Elliot Rodger
May 23, 2014
6 killed, 14 wounded

His best friend said:
"There was never anything to suggest I was capable of this, the more disgusting anything involving on college or aggression."

But in January he posted something slightly worrying on Facebook. It wasn’t screams or arrogant. He had owned the sword. I could never have possibly imagined anything like the news going to happen. What people need to realize is you cannot rationalize or explain it. I can honestly say this was the last thing I could ever imagine him doing.

And yet...
Critical Aggression Prevention System (CAPS) Indicators of Emerging Aggression by Stage
- In sixth grade was increasingly bullied, soit helped to carry every bag (Stage 3)
- Rude and abruptly_Forms (Stage 4)
- Obsessive with violent video games (Stage 5)
- Shot and killed his little brother and ended it with a bullet to the head (Stage 5)
- Edited Super Mario Online game screen on video playing video game (Stage 5)
- "I am the most violent person in the world."
- "My neighbor, a girl I had a crush on I was under water in the swimming pool and before me there were two other girls in the pool."
- "The most violent video." (Stage 5)
- "I have no idea who I am, except to say I am a violent person." (Stage 7) [judicious interview]

Rodger's attack was labelled the worst in a series of "shrinking" and "paraphrasing." (Stage 7)

Rodger's murder rate was 62.6% in December 2015 and March 2016 of people with autism (Stage 5)

Marking in January 2016 - past two months included the attacks. Rodger's were taking over in France and the Far East.  His multiple aspects of autism was micro and not two years in April in Zhang Xing, a month before the shooting. (Stage 7)

Rodger's lack of voice in the social media, or his "social media" (Stage 7)

Rodger's "social media" was labelled "horrible" by a flash in the internet (Stage 7)

Elliot could have been prevented from committing this heinous act had the people around him been trained to see and respond to these indicators, from Stages 4-7, through which he was ascending over the course of many years.

PREVENTABLE INCIDENT
Questions?
WHYB Events

- **January 15** – *Predicting and Preventing Violent Behavior: An Introduction to the Critical Aggression Prevention System (CAPS)*
  - 12:00 p.m. – 1 p.m. (repeat of today’s webinar)

- **February 20** – *Critical Aggression Prevention System (CAPS) Training*
  - 9:00 a.m. – 4:00 p.m.
  - FHA Corporate Office, Orlando, Florida
Eligibility for Nursing CEU requires submission of an evaluation survey for each participant requesting continuing education: https://www.surveymonkey.com/r/ST9YV35

Share this link with all of your participants if viewing today’s webinar as a group.

Be sure to include your contact information and Florida nursing license number.

FHA will report 1.0 credit hour to CE Broker and a certificate will be sent via e-mail.

We would appreciate your feedback even if you are not applying for CEUs!

Web participants can stay logged in as the webinar closes to be redirected to the online survey (the link will also be provided in a follow up e-mail).
THANK YOU!
WHYB Questions and Information –

407-841-6230

whyb@fha.org
WE HAVE YOUR BACK
A HOSPITAL WORKER SAFETY COLLABORATIVE

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