

# Conducting an Intervention

"If you see something, DO SOMETHING"

Planned Intervention?

NO

See  
**"Witnessed  
Diversion"**

YES

Have treatment facility/bed available prior to intervention

Set-up/Plan the Intervention Team (see "Things to Remember")

Invite them to the "meeting"; do NOT let them leave or drive!

Ensure they do not have a say in their treatment, as they will try to control the situation

Immediate transfer to treatment facility

Witnessed Diversion?

NO

Collect evidence (dates, occurrences, witnesses in a non-discriminatory manner)  
Contact an interventionalist and establish relationship prior to intervention

Establish a facility and bed for treatment

Prepare for intervention and intervention team

Invite them to the intervention; do NOT let them leave or drive!

Ensure they do not have a say in their treatment, as they will try to control the situation

YES

Is the situation urgent/out of control?

YES

**Call "911"**

Keep the individual in sight at all times (high risk for self-harm)

Call in interventionalist ASAP

Get treatment facility and room available ASAP

Contact Security

NO

**Contact treatment facility immediately!**

Collect urine sample/have evidence prepared

Collect evidence (urine drug screen, etc) and prepare for intervention (security, family/friends, witnesses)

Invite them to the "meeting"; do NOT let them leave or drive!

Ensure they do not have a say in their treatment, as they will try to control the situation

## IMPORTANT CONTACTS

- Alabama State Peer Advisor- Dr. Laura Wright, CRNA, PhD, MNA **(205) 253-1629**
- AANA Peer Assistance Helpline **(800) 654-5167** or visit <http://www.AANAPeerAssistance.com>.
- UAB Addiction Recovery Program\* - Bronwyn McInturff, MSW, LCSW – **(205) 975-9381**
- Bradford Health/Warrior Lodge\* **(205) 647-1945** or **(800) 333-1865**
- Talbott Recovery\* (located in Georgia) **844-830-3106**
- Parkdale Center (located in Indiana) **(888) 883-8433**

\*Alabama Board of Nursing approved

## THINGS TO REMEMBER

\*In all cases, security should be available, as the person may respond aggressively or violently. With enforcement present, they are more likely to be swayed to carry on with treatment rather than oppose it.

\*All facilities should have an AANA-approved treatment facility on speed-dial with experience in treating licensed anesthesia providers. Some facilities will also send experienced interventionists to assist in the intervention.

\*Do not use the term “intervention” when speaking to the involved party. Instead, invite them to a “meeting”, so they are taken by surprise. This will prevent them from leaving or having a preconceived plan.

\*Intervention Team: a team of 3-5 members that confronts the individual. Ideally, this should consist of the interventionist, friend/family who could provide support/comfort, supervisor/HR to provide support/set up PTO for time off during treatment, and security.