

DATE:	SEPTEMBER 14, 2018
NUMBER:	I.93
SUBJECT:	USE OF RESTRAINT EQUIPMENT
RELATED SECTIONS:	DSB P&P I.45 , I.51 , I.57 , I.89 , M.25 ; Addendum F; MSD.R.3

PURPOSE

To establish the criteria and procedures for the use of authorized restraint equipment on any in-custody inmate.

POLICY

Instruments of restraint may be applied to inmates in accordance with outlined procedures and Addendum F. Restraints shall never be used as a form of discipline or a substitute for treatment. All inmates placed in restraints shall be segregated away from other inmates, to prevent abuse. This policy is not intended to affect the use of restraints for the routine movement of inmates (e.g., handcuffs, waist chains). Each facility shall outline, via a green sheet, the types of restraining equipment available as well as the storage location. In situations dealing with an inmate known to be pregnant, or in recovery; after delivery; refer to Detention P&P: I.51, I.57; M.38.

PROCEDURE

- I. AUTHORIZATION FOR PLACEMENT AND RETENTION IN A PRO-STRAINT CHAIR
 - A. Absent exigent circumstances, the watch commander shall be notified prior to an inmate's placement into restraints (Pro-Strait chair). The watch commander will evaluate the circumstances that exist and determine if restraints shall be applied and the type(s) to be used.
 - B. Except for monitoring of inmate's health status, medical staff does not participate in the placement of restraints on inmates ordered by sworn staff. When restraints are used by sworn staff for security reasons, medical staff is notified immediately in order for them to:
 - 1. Review the health record for any contraindications or accommodations required, which, if present, are immediately communicated to the watch commander within one hour of placement.
 - 2. Initiate health monitoring, which continues at designated intervals as long as the inmate is restrained. A medical assessment shall also be completed as outlined in Medical Services Division policy and procedure MSD.R.3. If the health of the inmate is at risk, it will be immediately communicated to the watch commander.

- C. The watch commander is responsible for determining the need for the inmate's continued retention in restraints. Such retention shall be reviewed a minimum of every hour. The inmate's behavior will be monitored and their progress noted on the Inmate Observation Log (J-19A form). The watch commander will ensure restraints are removed as soon as conditions allow.

II. PLACEMENT IN A PRO-STRAINT CHAIR

- A. One deputy from the placement team shall be designated as the "safety deputy." The safety deputy's sole responsibility is to monitor the health and safety of the inmate being placed into the Pro-Strait chair. If at any time during the placement, the safety deputy determines the inmate may be in immediate physical distress, such that the inmate may suffer serious bodily injury or death, the safety deputy shall immediately stop the placement. Necessary precautions will be taken to ensure the wellbeing and safety of the inmate. The watch commander or designated sworn supervisor shall be on scene to monitor Pro-Strait chair placements. Absent exigent circumstances, the watch commander will have the chair placement event digitally recorded on a portable device.
 - 1. Prior to placing an inmate into the Pro-Strait chair, and if the inmate is handcuffed, deputies shall apply leg and waist chains prior to removing the handcuffs. The safety deputy shall monitor this process.
 - 2. Waist chain handcuffs must be double-locked to prevent inmate manipulation which can cause complications (e.g., affect blood circulation in the wrists).
 - 3. Leg and waist chains may remain on the inmate while in the Pro-Strait chair.
 - 4. The continued retention should be evaluated at every check; no inmate should remain in the Pro-Strait chair for longer than two (2) hours without justification and approval from the watch commander. Pro-Strait chair placements exceeding two (2) hours shall require written justification on a supplemental Incident Report in NetRMS and will be approved by the watch commander.
- B. Pro-Strait chairs can be permanently mounted in any location, where the inmate can be constantly observed, or serve as a portable device. As a portable device, the Pro-Strait chair can be moved to various locations within a facility.
- C. After an inmate is removed from the Pro-Strait chair, the inmate shall be medically evaluated by medical staff as soon as possible.

III. OBSERVATION AND EVALUATION OF INMATES IN A PRO-STRAINT CHAIR

- A. Safety checks of inmates placed in restraints (Pro-Strait chair) shall be conducted at least twice every thirty minutes, but as frequent as possible to ensure no unexpected health concerns or injuries arise. During these checks, both sworn and medical staff shall be cognizant of the inmate's condition and look for signs of an immediate threat to the medical/mental health of the inmate. These signs include, but are not limited to; discoloration of the skin below the restraints, difficulty breathing, obvious wounds or injuries, complaints by the inmate of pain and or injury, and self-destructive behavior.

- B. Medical staff must be notified immediately if the inmate exhibits any signs of medical distress, including agitated psychosis and/or excited delirium. If necessary, the on-site or on-call physician will be consulted or 911 services utilized.
- C. All safety checks, whether conducted by sworn or medical personnel, shall be documented on the J-19A form. Both medical and sworn staff shall confirm the restraints are properly applied and that the inmate is safe.
- D. Sworn and medical staff will consider the hydration and sanitation needs of the restrained inmate. If the inmate makes a request for water or restroom facilities, the request shall be granted if sworn staff determines it can be done without jeopardizing the safety of the inmate, staff and/or the security of the facility.
- E. A consultation with a psychiatrist shall be secured as needed. An on-call psychiatrist is available for after-hours consultation. If the watch commander, in consultation with medical staff, determines that an inmate cannot be safely removed from restraints after eight hours, the inmate shall be medically evaluated by a physician.
- F. Prolonged use of restraints that severely limit the motion of the inmate's extremities may cause unnecessary pain and or injury. Upon review and recommendation by medical staff and with the approval of the watch commander, restraints may be adjusted or partially removed to allow alternating extremities to be exercised, at a minimum of every two (2) hours. Periods of extremity exercise shall be documented on the J-19A form. If the extremity exercise cannot be completed, due to the inmate's continued uncooperative behavior, those facts will be included in the supplemental Incident Report.

IV. MAXIMUM RESTRAINT DEVICES

Cord Cuff Restraint and The WRAP Restraint System (The WRAP) are the only devices authorized for use when maximally restraining an inmate. When placing an inmate in any maximum restraint device one deputy shall be designated as the "safety deputy." The safety deputy's sole responsibility is to monitor the health and safety of the inmate being placed into the restraint device. If at any time during the placement, the safety deputy determines the inmate may be in immediate physical distress, such that the inmate may suffer serious bodily injury or death, the safety deputy shall immediately stop the placement. Necessary precautions will be taken to ensure the wellbeing and safety of the inmate. Absent exigent circumstances, the watch commander or designee shall be on scene to monitor the placement. Inmates will only remain in maximum restraints for the minimal time necessary to move them to another location or to transition the inmate into a Pro-Strait Chair.

- A. Maximum restraint devices will be stored with the facility tactical response equipment and be utilized with the approval of the watch commander.
- B. Following the application of a maximum restraint device, the inmate shall be rolled onto their side into the recovery position or an upright seated position as soon as possible.
- C. Deputies must continuously monitor the inmate's level of consciousness and breathing while in maximum restraints.
- D. After the maximum restraints have been removed, the inmate shall be medically evaluated.

- E. Cord Cuff Restraints are not authorized to be carried on a deputy's person when not in use.
- F. As an alternative to lifting an inmate restrained in The WRAP, he/she may be moved by means of shuffle or hobble only if the inmate has displayed cooperative behavior. If this method is used, appropriate support must be given to the inmate to prevent possible injury.

V. OTHER RESTRAINT DEVICES

- A. Tactical Handcuff Lead- is to facilitate the safe removal of handcuffs through a cell door food flap. It provides deputies with the ability to retain control of the handcuffs when dealing with uncooperative inmates.
 - 1. The Tactical Handcuff Lead is approximately six feet long with a hand loop at one end and a handcuff loop at the other end. The Tactical Handcuff Lead is secured onto the links between the handcuffs by passing the handcuff loop through the hand loop and pulling the lead taut.
 - 2. The Tactical Handcuff Lead is not to be carried on the deputy's person when not in use. The Tactical Handcuff Lead is not intended to be used as a Cord Cuff Restraint or on an inmate who is too intoxicated to stand or walk on their own.
 - 3. In and of itself, use of the Tactical Handcuff Lead is not considered force.
- B. Max-Cuff Restraint- is to be used as a temporary restraint in medical situations where the metal waist and leg chains are medically restricted. These procedures include Magnetic Resonance Imaging (MRI), or the need to image portions of the body without any obstructions; X-Ray or Computerized Tomography (CT scan).
 - 1. The Max-Cuff is effective as an all-purpose restraint for hands, legs, arms, leg to hands as a hobble, and can easily be concealed.
 - 2. While transitioning from waist and leg chains to the Max-Cuff, the inmate should not be free from restraints at any time.
 - 3. In and of itself, use of the Max-Cuff is not considered force.

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

C. Grip Restraint Device (Grip) - is for use during medical procedures that prohibit the use of metal restraint devices. Medical procedures include: MRI, or the need to image portions of the body without any obstructions, X-Ray or CT scan.

1. While transitioning from waist and leg chains to the Grip, the inmate shall not be free from restraints at any time.
2. In and of itself, use of the Grip is not considered force.
3. Each facility will have a Grip available and it will be deployed with transporting deputies on hospital runs.

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

D. Hobble Chain- is used to limit the mobility of inmates. It is an effective means of restraining a combative inmate. It allows for transporting an inmate in a seated, upright position, while preventing the inmate from kicking (e.g., doors, windows, staff, etc.).

1. The Hobble Chain consists of a leg chain that is attached to both the waist and leg chains on an inmate.
2. The Hobble Chain may be applied at the deputy's discretion.
3. In and of itself, use of the Hobble Chain is not considered force (e.g., movement of a cooperative green banded inmate).

E. Four Point Restraints- are used in the Psychiatric Stabilization Unit (PSU) per the direction and authorization of a psychiatrist (refer to DSB P&P section M.25).

VI. DOCUMENTATION

- A. When force (as defined in I.89 and Addendum F) is used to apply any restraint device, it shall be documented as a use of force via an Incident Report in NetRMS.
- B. A copy of the J-19A form, when applicable, shall be attached to the Incident Report in NetRMS. The original J-19A form shall be filed in the inmate's custody record.

VII. TRAINING AND MODIFICATIONS

- A. Training guidelines in the procedures and proper use of any restraint device listed in this policy shall be developed and reviewed annually by the Detention In-Service Training Unit.

- B. Any modifications or attachments to any of the restraint devices listed in this policy must be reviewed and approved by the Detention Services Area III Commander before implementation.