

DEPARTMENT OF HUMAN SERVICES
JUVENILE JUSTICE SERVICES
POLICY AND PROCEDURES

Policy No.: 05-06	Effective: 08/14/2008	Revision Date: 06/29/2021
Subject: Use of Restraint Devices		

I. Policy Statement

Restraint devices may only be used on minors in Division facilities/programs to 1) enhance security when minors are being transported, or 2) protect minors who are dangerous to themselves or others. Restraint devices may only be used in accordance with the respective facility or program operations manual and in accordance with the restraint matrix in this policy. Restraint devices shall not be used as a form of discipline.

II. Rationale

The purpose of this policy is to establish guidelines for the use of restraint devices on minors in the Division's facilities/programs.

III. Definitions

"Mechanical Restraint" is a device applied to a person's body or limb to restrict the person's movement. These devices can include handcuffs, leg restraints, and waist restraints, or plastic zip cuffs. Mechanical restraints may only be used during transport or when a minor presents a threat of physical injury to themselves or others.

"Safety Device" is a type of device used to safeguard a youth against self-injury (e.g. protective headgear and safety garment).

"Protective Headgear" is a type of safety device used to safeguard against head trauma when a minor is hitting their head against a wall or other dangerous objects.

"Safety Garment" is a suicide prevention garment used to help protect a minor from self-harming behaviors. The garment is not a mechanical restraint.

"Zip Cuff" is a type of specialized mechanical restraint which is a plastic strap that may be used to restrain a minor's hands or feet when standard handcuffs or leg restraints are not available.

"Transport" is the process of moving a minor in a vehicle to another location, typically another secure facility.

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“Spit Hood” is a restraint device intended to prevent someone from spitting or biting. Spit hoods are generally made of mesh fabric and plastic and placed over the minor's head.

“Self-directed Violence” is behavior that is directed at oneself, and may actually or potentially result in injury to oneself.

IV. Procedures

Prior to using any mechanical restraints or safety devices, Division staff must complete current training requirements. This includes crisis response, safety and security training, and use of safety devices.

Additional restraint procedures, specific to each facility/program, shall be described in the respective Operations Manuals. Division staff are required to complete site-specific training for their respective facilities/programs.

A. Use of Mechanical Restraint Devices

1. Mechanical restraint devices shall be used with caution and only to the extent necessary to maintain safety and security after less restrictive options have proven unsuccessful, excluding transports (see 05-04 Transportation Policy).
2. The use of mechanical restraint devices shall be limited to:
 - a. precaution against escape during transport;
 - b. protection of the minor against self-injury; and,
 - c. prevention of injury to others.
3. Mechanical restraint devices shall never be used as punishment.
4. Mechanical restraint devices shall not be modified.
5. Approval for the use of mechanical restraint devices may be given by the lead staff on shift and shall be immediately confirmed by the supervisor, Assistant Program Director (APD) or designee. The name of the administrator giving authorization shall be added to the incident report.
6. Mechanical restraint devices shall not be used for more time than is reasonably necessary to gain control of the minor's behavior. Staff shall remove mechanical restraint devices when it is safe to do so once a minor reaches a reasonable level of calmness, is able to process the situation and take direction.
7. While minors are in restraints, staff shall remain in immediate physical proximity, with no physical barriers and direct-line-of-sight supervision.
8. Minors shall never be left alone while restrained.

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9. Staff shall maintain hands-on assistance for minors who are walking in leg restraints to prevent falling and possible injury.
10. Staff shall not use a restraint device to bind a minor to an object or to another person.
11. Excluding transports, staff shall promptly notify appropriate medical staff and a qualified mental health professional for evaluation/consultation whenever mechanical restraint devices are used.
12. Whenever mechanical restraint devices are used (excluding transports), involved staff shall complete incident reports and notify a supervisor, parent/guardian, case manager (where applicable) and APD, or designee, in accordance with Division policy 05-15.

B. Mechanical Restraint Devices Matrix

This matrix is designed to inform staff at Division facilities/programs when and under what circumstances the use of mechanical restraint devices and safety devices are authorized. Please refer to the written operation manuals for clarification.

Correctional Facilities			
	Conditions for Use of Mechanical Restraint Devices		
	During Transport to or from SF	Risk of Self-injury	Risk of Injury to others
Secure Care Facilities	Yes	Yes	Yes
Detention Centers	Yes	Yes	Yes
Community-Based Programs			
Case Management	Yes	No	No
Gemstone	No	Safety Devices Only	No
DSI	No	No	No
Youth Services	No	No	No
Youth Services Residential	No	Safety Devices Only	No
ALTA	No	No	No

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- C. Transporting with Mechanical Restraint Devices
 - 1. Minors will be cuffed in front of the minor's body and attached to a waist restraint. When being transported to or from a secure facility (or court), leg restraints will be applied to the minor's ankles.
 - 2. In the event of an emergency which requires evacuation, minors may be transported using zip cuffs as the restraint device when standard handcuffs or leg restraints are in limited supply.

- D. Use of Protective Headgear
 - 1. Staff may use approved protective headgear for a minor engaging in self-directed violence that puts the minor's head at risk (e.g., banging their head against a wall or other object). The decision to use protective headgear shall be made by the lead staff on shift, and be approved by the supervisor, APD or designee immediately. The name of the administrator giving authorization shall be added to the incident reports.
 - 2. Staff shall not physically restrain a minor for the sole purpose of forcing the minor to wear the headgear. Staff shall exercise patience and caution when initiating the use of headgear to avoid escalation of a minor's self-directed violence. Staff shall encourage the minor and gain compliance through discussion and negotiation. Protective headgear shall never be used as a punishment.
 - 3. Whenever protective headgear is used, involved staff shall complete incident reports and notify a supervisor, parent/guardian, case manager (where applicable) and APD, or designee, in accordance with Division policy 05-15.

- E. Use of Safety Garments
 - 1. Staff may use a suicide prevention safety garment when necessary for a minor engaging in self-directed violence.
 - 2. Staff shall exercise patience and caution when initiating the use of a safety garment to avoid escalation of a minor's problematic behavior. Staff shall encourage and gain compliance through discussion and negotiation. Staff shall not physically restrain a minor for the sole purpose of forcing the minor to wear a safety garment. Safety garments shall never be used as a punishment.
 - 3. Whenever a safety garment is used, involved staff shall complete incident reports and notify a supervisor, parent/guardian, case manager (where applicable) and APD, or designee in accordance with Division policy 05-15.

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- F. Use of a Spit Hood
 - 1. A spit hood may be used on a minor when they are actively attempting to spit on or bite staff or residents. Use of a spit hood shall never be used as punishment.
 - 2. Whenever a spit hood is used, involved staff shall complete incident reports and notify a supervisor, parent/guardian, case manager (where applicable) and APD, or designee, in accordance with Division policy 05-15.

- G. Use of Mechanical Restraint Devices on Pregnant Minors in a Secure Facility
 - 1. To prevent falls, staff shall modify procedures for a minor who is pregnant based upon the following guidance/requirements:
 - 2. Routine appointments: Staff shall use only handcuffs to the front of the minor's body. There shall be no waist restraints or leg restraints.
 - 3. Additional staff may be utilized to enhance security.
 - 4. During medical visits or once the minor is in the hospital's care, staff shall remove the handcuffs to facilitate the medical evaluation and treatment of the minor and the fetus.
 - 5. Transport to hospital for birth: Restraints on transport, during active labor and delivery should not be used except when absolutely necessary due to serious threat of harm to the minor, staff or others.
 - a. Staff shall apply leg restraints only after the minor has been medically cleared by a licensed medical provider.
 - b. Handcuffs shall be reapplied when the minor is transported back to the facility.

- H. Use of Mechanical Restraint Devices on Minors with Medical Issues or Disabilities
 - 1. All planned medical transports shall be staffed to determine safety and security needs.
 - 2. To prevent falls, staff shall modify procedures for a minor with a medical issue.
 - 3. If a minor has a cast, splint or sling on an arm, staff shall use leg restraints, waist restraints and cuff the uninjured arm.
 - 4. Staff shall handcuff and use a waist restraint without the use of leg restraints if a minor has a cast or splint on their leg.
 - 5. Staff shall consult the facility APD for conditions outside of those outlined above.
 - 6. In emergency situations, and at the request of medical personnel, staff may remove or modify mechanical restraint procedures in order to facilitate treatment.

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I. Discretion.

1. At the discretion of the Division director and only upon medical or clinical approval, the policies stated above may be modified on a case-by-case basis.

V. Continuous Renewal

This policy shall be reviewed every three (3) years to determine its effectiveness and appropriateness. This policy may be reviewed before that time to reflect substantive change.

This policy has been reviewed by the Division of Juvenile Justice Services Executive Management Team, and is approved upon the signature of the director.



Brett M. Peterson, Director
Division of Juvenile Justice Services

06/29/2021

Signature Date