POLICY AND PROCEDURE

NO.400.1



Handcuffs and Restraints Guidelines			
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Only handcuffs provided by the Department during academy training and handcuffs purchased by the individual officers throughout their careers that are all carbon steel construction weighing at least 10 ounces will be authorized.

PROCEDURES:

- 1. Use of restraining devices is mandatory on all prisoners, unless in the officer's judgment unusual circumstances exists which make the use of restraining devices impossible or unnecessary (e.g. prisoner is handicapped, etc.)
- 2. Where feasible, prisoners should always be cuffed with hands behind the back in accordance with established standards for handcuffing. Metal handcuffs are to double-locked after they are placed on the subject to prevent the cuffs from tightening.
- 3. All types of cuffs and restraining devices shall be applied with caution to prevent accidental or incidental injury to the subject being handcuffed. If they are placed on the subject too loosely, the prisoner will be able to free his hand(s) and become a threat to or escape from the officer. If they are applied too tight, they may cause injury to the prisoner and be difficult to remove.
- 4. Once restrained with handcuffs, the prisoner should not be further restrained unless the prisoner continues to attempt injury to responding officers and/or other persons in the area. Should this occur, leg restraints shall also be used. They shall not be secured to the prisoner's handcuffs in a "hogtie" fashion.
- 5. Once the prisoner is restrained, the officer shall insure that the prisoner can adequately breathe by placing him on his side or back (if lying down), or by placing him in a sitting position or other position that will allow him to breathe freely. No subject is to be placed face down in the prone position.
- 6. If a cruiser is utilized, caged or not, one officer will ride in the back seat of the cruiser directly behind the officer who is driving. At no time is a prisoner to be "hogtied" and placed in a cruiser on his stomach.
- 7. Once at the station, handcuffing shall be in accordance with policy # 700, Handling of Prisoners.
- 8. Plastic or flexible cuffs will only be used by officers involved in mass arrests, in situations where handcuffs are unavailable, or during incidents involving S.W.A.T, the Tactical Patrol Force, or the execution of a search warrant.

PRE-ARREST HANDCUFFING:

Officers may use a reasonable amount of force to effectuate an investigative an investigative detention. The force used must be commensurate with the purpose of the stop. The force used must be proportional to the degree of suspicion that prompted the stop. However, if the force used exceeds what is reasonably required under the circumstances of the investigative detention, the seizure will rise to the level of an arrest. If an arrest is deemed later by the court to have occurred before probable cause had been established, it would constitute an unreasonable seizure. Such seizures are a violation of both the U.S. Constitution and the Massachusetts Declaration of Rights, and they can lead to the dismissal of criminal charges filed against the subject, as well as to civil liability against the involved officers.

Thus, the circumstances in which pre-arrest handcuffing may be permissible are very limited, and officers must be able later to articulate all of the circumstances that contributed to their decision to handcuff individuals prior to arrest. The courts will examine all of the facts known to the officers. The prominent Massachusetts cases that have permitted pre-arrest handcuffing have all involved the following factors:

- dangerous felonies very recently committed
- **very accurate descriptions** of the suspects and/or their vehicles, which will help to determine the degree of suspicion focused on the suspects
- **weapons** that are believed to be in the possession of the subjects and were used in the commission of the crime [*viz.*, armed robbery, carjacking, stolen shotgun]
- reasonable belief that officers' lives could be in jeopardy. The following factors will help to support further this reasonable belief:
 - the time of day
 - the location of the investigative detention [e.g., a high crime area]
 - the number of officers present.
 - the number of suspects present.

For further information, officers are encouraged to review the following Massachusetts Investigative Detention& Handcuffing cases.

- Comm. v. Borges, 395 Mass. 788, 1985.
- Comm. v. Pandolfino, 33 Mass. App. Ct. 96, 1992.
- Comm. v. Andrews, 34 Mass. App. Ct. 324, 1993.
- Comm. v. Varnum, 39 Mass. App. Ct. 571, 1995.
- Comm. v. Kitchens, 40 Mass. App. Ct. 591, 1996.
- Comm. v. Gordon, 98-P-706, Mass. App. Ct., 1999.

SPECIAL CONSIDERATIONS / MEDICAL CONCERNS:

Part of the ability to **Monitor** and **Evaluate** the medical well-being of a subject is the recognition of certain conditions that can and have caused sudden death during and after the arrest process. By being aware of certain medical conditions that have led to sudden death during arrest situations, an officer is better prepared to recognize the symptoms which will cue the officer to seek immediate medical attention. Some of the symptoms will be recognized prior to the actual arrest, some can be observed during the arrest, while others become noticeable after the subject is handcuffed.

Officer "need to know" (Post Arrest Medical Concerns)

- Elevated body temperature
- Known cocaine or other drug abuser
- Impaired thinking, disorientation, hallucinations and/or delusions, intense paranoia followed by violent and/or bizarre behavior
- Great strength and a diminished sensitivity to pain
- Known psychiatric patient not taking medicine
- An extended "fight" or active resistance
- The addition of alcohol to any of the above conditions

If a subject exhibits two or more of these symptoms or actions, continue to monitor and call for medical attention.

REPORTING PROCEDURES:

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See policy # 400, Use of Force (section X, Reporting Use of Force Incidents).

Per:

Gary J. Gemme Chief of Police

(Policy # 730 Handcuffs & Restraints, Sept. 9, 1993, changed to Handcuffs & Restraints Guidelines, # 400.1 and revised April 13, 2007)

("Special Considerations" section and Policy # 725, "Special Order-Positional Asphyxia", replaced with "Special Considerations / Medical Concerns" section, May 6, 2008)