

Mechanical Restraints for Limited Secure Placement

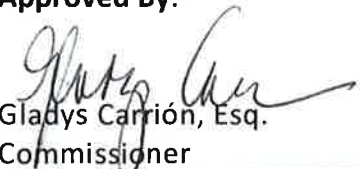
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<p>SUMMARY: It is the policy of the Administration for Children's Services (ACS) to promote the safety of youth and staff in limited secure juvenile justice placement (LSP), as well as the surrounding community, using the least intrusive/restrictive intervention necessary. This policy establishes guidelines, prohibitions, and limitations on the use of mechanical restraints in LSP facilities and during transport. Mechanical restraints shall be used without purposely inflicting pain or harm, only in accordance with the limitations and prohibitions on the use of physical interventions contained in each youth's Behavior Support Plan, and only when other forms of intervention are either inappropriate or have been ineffective.</p>			
<p>SCOPE: This policy applies to all LSP facilities having care and custody of youth placed with ACS pursuant to Article 3 of the Family Court Act. It applies to both the use of mechanical restraints on youth displaying acute physical behavior that presents a serious and evident danger to self or others or of any person, and for off-site vehicular transport.</p>			

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I. INTRODUCTION

The following policy was developed for use in the limited secure placement (LSP) system of the New York City Administration for Children's Services (ACS), the spirit of which rests firmly on the premise that youth placed in residential settings shall be placed in programs that are close to home, and for only as long as is necessary to maintain public safety and impart the skills and tools each youth needs to succeed in the community. All LSP settings are to prioritize youth-centered programming and strive to provide all youth with the full range of individual supports they need to achieve their treatment goals. Like the youth in LSP programs, families are to be treated with utmost dignity and respect, and shall be integrated into programming and treatment as full partners throughout the period of each youth's placement and aftercare. Communities and the natural resources they possess are to be valued and relied upon as part of the formula for success in each case. The primary responsibility of all those associated with the LSP system is to protect the safety and security of communities and the safety and security of the youth in placement.

II. POLICY

- A. Mechanical restraints shall only be used in the following circumstances:
 - 1. When a youth is displaying acute physical behavior that presents a serious and evident danger to self or others or of any person; or
 - 2. During off-site vehicular transport if the youth presents a clear danger to public safety, himself, or herself.
- B. Mechanical restraints may under no circumstances be used as punishment for noncompliance or in retaliation for youth conduct.
- C. LSP provider staff shall only use mechanical restraints after exhausting or concluding that all other less restrictive options would be inappropriate or ineffective. If, after considering and applying appropriate de-escalation techniques contained within a youth's Behavior Support Plan (BSP), the youth continues to display acute physical behavior, handcuffs may be applied, with approval from the facility director.
- D. Foot cuffs shall only be used during transport.
- E. Mechanical restraints shall be used with all reasonable diligence to not inflict pain or injury.
- F. All mechanical restraint devices must be approved by ACS.
- G. Only staff trained in the proper use of mechanical restraints shall be authorized to apply them.

- H. Youth shall not be attached by mechanical restraints to another person, furniture, fixture, or object.
- I. When both handcuffs and foot cuffs are applied, they must not be connected together.

III. DEFINITIONS

- A. Acute Physical Behavior – A youth’s conduct that:
 - 1. Presents a serious and evident danger to self or others; or
 - 2. Clearly indicates the youth is physically attempting to AWOL from the facility or from custody and all other means of preventing the AWOL have been exhausted.
- B. Behavior Support Plan – A specific documented plan developed by a youth’s treatment team in conjunction with the youth and the youth’s family, which is tailored to the youth’s individual needs and used to determine intervention strategies and/or safety procedures to be used to defuse the youth’s behavior(s) of concern and/or misbehavior. The plan shall include any limitations on physical interventions authorized or prohibited for the youth, including the use of mechanical restraints, as well as coping and de-escalation techniques that have been identified as helpful for the youth.
- C. Facility Director – For purposes of this policy, “facility director” means the facility director **or** the person designated by the director to act as the director in decision-making.
- D. Mechanical Restraint – A restraining device used to control or limit the movement of a portion of the body. Permissible mechanical restraints consist solely of handcuffs and foot cuffs that are approved by ACS and comport with state regulations.
- E. Transport – For the purpose of this policy, “during transport” includes the period of time when staff members escort the youth off-site and continues until the youth has been safely escorted to a secure destination (e.g., inside a locked area within the courthouse).

IV. CIRCUMSTANCES UNDER WHICH MECHANICAL RESTRAINTS MAY BE USED

- A. ACS authorizes LSP providers to use mechanical restraints in order to minimize injury to youth, staff and/or the public after staff have concluded that all other less restrictive options would be inappropriate or ineffective, after considering and applying appropriate de-escalation techniques contained within a youth’s BSP, and

with approval from the facility director. Mechanical restraints may only be used under the following circumstances:

1. To control the acute physical behavior of a youth after the provider has consulted the youth's BSP¹ and exhausted the Safe Crisis Management (SCM) continuum of less restrictive interventions and has found such interventions to be ineffective;
2. When a youth continues to display acute physical behavior while the provider seeks authorization to use a room isolation; or
3. During Transport
 - a. Mechanical restraints may be used during the transport of youth to and from off-site appointments after an individual assessment of the youth is conducted by provider staff and it is determined that the youth presents a clear danger to public safety, himself, or herself.
 - b. At least 24 hours in advance of the special transport for a youth determined to be a clear danger to public safety, himself, or herself, an LSP facility director must complete the Mechanical Restraints Special Transport Request Form [Attachment B] documenting the request to use mechanical restraints. Special transport can include transport to funerals, hospitals to visit family, interviews for programs, etc.
 - i. ACS shall notify the provider as to whether the request was approved within 24 hours.

V. PROPER, AUTHORIZED USE OF MECHANICAL RESTRAINTS

A. Authorization

1. Whenever provider staff members are considering the application or re-application of mechanical restraints in situations other than transport, they must obtain prior approval from the facility director. If exigent circumstances make prior approval impossible to obtain, staff must report the use of mechanical restraints to the facility director as soon as practicable, but no later than one (1) hour after the mechanical restraints were applied.
2. The facility director shall determine which staff members shall be responsible for the application of mechanical restraints during each shift. The name of the responsible staff members must be documented in the Facility Activity/Communication Log.

¹ See *Safe Intervention Policy for Juvenile Justice Placement*.

3. Every use of mechanical restraints, along with reference to the authorizing facility official, must be documented in the Facility Activity/Communication Log before the end of the shift during which mechanical restraints were applied.
4. Safe and proper application of mechanical restraints shall only occur when a minimum of three (3) staff members, trained and up-to-date in the use of mechanical restraints, are present during their use.

B. Transition to Mechanical Restraints

1. Transitions from physical interventions to mechanical restraints shall occur only after other less restrictive strategies have been applied and found to be inappropriate or ineffective.
2. In order to protect the safety of both youth and staff, safe transitions to mechanical restraints shall be made by at least three (3) staff members using only the following approved seven (7) SCM interventions:
 - a. Bicep Assist
 - b. Side Assist
 - c. Seated Kneeling Upper Torso
 - d. Standing Upper Torso
 - e. Multi-Person Upper Torso
 - f. Seated Kneeling Hook Transport Position
 - g. Standing Hook Transport Position
3. When transitioning from one of the seven (7) authorized SCM physical interventions, the youth's wrists must be placed behind his or her back and secured with mechanical restraints one wrist at a time.
4. When transitioning from the Side Assist intervention, the mechanical restraint must be placed first on the exposed wrist that is on top. The youth shall be placed in a seated position and the other wrist shall be secured with the mechanical restraint.
5. After the application of mechanical restraints, and if it is safe to do so, staff may escort the youth to a neutral, unobstructed space, away from other youth and from possible triggers in order to continue the de-escalation process. Staff members must assist the youth by holding the youth under his or her arms for support, to provide balance and to prevent any injuries or falling.

C. Time Limits and Post-Mechanical Restraint Requirements

1. Mechanical restraint devices are intended to be used as a short-term intervention and not for long-term immobilization. Provider staff shall release youth from all forms of mechanical restraint as soon as it is safe to do so.
2. Mechanical restraint devices shall not be used in excess of 15 minutes unless they are being used during transport.
3. If a youth is still exhibiting acute physical behavior near the 15-minute mark, staff shall contact the facility director for further instructions. If it is determined that the youth continues to display acute physical behavior, the facility director may authorize one additional 15-minute period. However, the mechanical restraints must be removed as soon as the youth is under control and can be managed using other less restrictive interventions.
4. If, approaching the 30-minute mark, the youth continues to display acute physical behavior and the facility director believes the removal of the mechanical restraints would jeopardize the safety of the youth and others, the facility director must contact the Division of Youth and Family Justice (DYFJ) Office of Field Operations for further guidance.
5. All youth who have been restrained using mechanical restraints shall receive a post-restraint health review by an LSP medical staff member or other licensed health care professional as soon as practicable after the youth has been released from mechanical restraints. The health review shall focus on any complaints or injuries reported by the youth or staff during the period of mechanical restraint. Photographs of those parts of the youth's body where restraints were applied must be taken as a part of the health review, as well as any other areas of the body where injuries during the restraint period are reported to have been sustained.
6. If the youth requests medical attention, complains of injury or pain or is visibly injured, 911 must be called, and/or the youth must be transported to the local hospital promptly for treatment.
7. Following an incident involving the use of a physical intervention, the youth shall be assessed by a mental health clinician. When mental health staff members are not on site and the youth wants to see a clinician, a mental health referral shall be generated and the youth shall be evaluated within 24 hours of the incident. A youth with a history of mental health issues documented in his or her BSP shall be referred to a qualified mental health professional as soon as possible after an incident involving the use of a physical intervention.

8. After a youth has been released from mechanical restraints, and when it is safe to do so, a debriefing should take place with the youth. An LSP provider supervisor or facility director shall conduct the debriefing and include staff who were involved in the use of the mechanical restraints.²

VI. SAFETY PRECAUTIONS

- A. Only staff members who have successfully completed and are up-to-date with their training on the use of mechanical restraints, SCM, first aid, and CPR are authorized to use mechanical restraints.
- B. Throughout the use of mechanical restraints, as with all physical restraints, staff shall monitor the youth for signs of distress and determine whether or not a youth is responsive and can speak.
- C. Health emergencies always override the physical restraint. If a youth displays signs of any health emergency, staff must immediately stop the restraint and check for breathing. Staff must immediately remove the mechanical restraints and initiate CPR and emergency medical response procedures, including calling 911, if breathing is absent.
- D. A staff member with a handcuff/foot cuff key must remain on the scene of a mechanical restraint until the cuffs are removed.

VII. REPORTING AND DOCUMENTATION

- A. Staff shall fully document each use of mechanical restraints, regardless of duration, on an incident report form and in the Facility Activity/Communication Log Book. Information about the safe transition to mechanical restraints must be included in the incident report form. Documentation must be clear as to the purpose for the use of mechanical restraints (i.e., to control acute physical behavior or for transport).
- B. Staff shall notify a youth's parent, guardian, or other discharge resource after use of mechanical restraints other than for transport no later than eight (8) hours after their use. Staff shall document all attempts to notify the youth's parent, guardian, or other discharge resource of the use of mechanical restraints.
- C. The facility director shall review reports of mechanical restraints for appropriateness, accuracy, thoroughness, detail and compliance with policy. The facility director shall

² See *Safe Intervention Policy for Juvenile Justice Placement*.

document his or her conclusions of the review in the incident report form and in the Facility Activity/Communication Log Book.

VIII. PROHIBITIONS AND LIMITATIONS

A. Therapeutic Restrictions

Therapeutic restriction on the use of mechanical restraints means that the use of mechanical restraints is limited or prohibited by the youth's BSP in order to prevent heightened risk of psychological distress.

B. Medical Restrictions

1. Medical restriction on the use of mechanical restraints means that the use of mechanical restraints is limited or prohibited by the direction of medical staff due to a medical/health-related condition. Such restrictions include, but are not limited to, the following:

- a. Staff must not apply mechanical restraints to pregnant youth.
- b. Staff must not use handcuffs or foot cuffs on a youth with an injury or health condition (e.g., injury or condition which has caused swollen ankles), if the mechanical restraint device would be placed on or near the affected body part and might further injure or exacerbate the injury or health condition. For example, staff shall not handcuff a youth with a broken arm or wrist or apply foot cuffs to a youth with a swollen ankle.
- c. Staff must be aware of other less apparent health conditions documented in the BSP that may limit or prohibit the use of mechanical restraints.

C. Additional Rules to Follow When Using Mechanical Restraints

1. Staff must handcuff youth **in the front at the waist** using a handcuff device for transportation only.
2. Staff must apply handcuffs **behind the youth's back** during physical restraints.
 - i. **Note:** The use of prone restraints shall not be permitted, and supine restraints shall not be permitted if a youth is in handcuffs.
3. Staff must double-lock handcuffs and foot cuffs.
4. Staff must perform periodic checks to make sure that the youth's hands, wrists, and ankles are free from pain and injury and to deter any possible AWOL.

5. Staff must not place handcuffs or foot cuffs over a youth's clothing (e.g., coat or jacket sleeves, shirtsleeves, and pants), except that foot cuffs may be placed over a youth's socks. Handcuffs shall be placed on a youth's bare wrists.
6. Staff must provide constant visual supervision of youth in mechanical restraints.
7. If youth are placed in room isolation while in mechanical restraints, the restraints must be removed within 15 minutes of room isolation absent approval of the DYFJ Office of Field Operations. LSP staff must adhere to all requirements of the *Room Isolation for Limited Secure Placement* policy, including that youth must remain under constant visual observation.
8. Whenever youth are being transported to a public location and mechanical restraints are applied, staff must take special care to conceal handcuffs (e.g., by draping a garment over the youth's wrists).
9. Staff authorized by the facility director to apply mechanical restraints must keep them discreet and secured on their person during their shift.
10. Handcuff and foot cuff keys should be kept secured.
11. When mechanical restraints are used during transport, such mechanical restraints must remain securely locked until the youth has been safely escorted to a secure destination.
12. Upon return to the facility from any transport, provider staff must search the youth and the vehicle for contraband in accordance with ACS search policies.

IX. TRANSPORT SCENARIOS AND GUIDANCE

A. Bathroom Use

1. Staff shall anticipate the need for mechanically restrained youth to use the bathroom and make reasonable efforts to determine where and how a youth may be safely secured to do so at the destination.
2. If a youth needs to use the bathroom, staff shall identify all means of egress other than the bathroom main entrance/exit door.
 - a. If no other means of egress exist, staff shall remove the handcuffs but can leave the foot cuffs on, if necessary. Staff of the same gender as the youth shall secure the area outside of the stall in a multiple occupancy bathroom or outside the door of a single occupancy bathroom while the youth uses the bathroom.

- b. If there is at least one other means of egress in a single occupancy bathroom (e.g., a window), staff shall try to identify an alternate bathroom without any means of egress other than the bathroom entrance/exit door. If impracticable, staff shall remove the handcuffs, but can leave the foot cuffs on, and shall secure the area outside of the stall in a multiple occupancy bathroom or outside the door of a single occupancy bathroom while the youth uses the bathroom.
- B. When mechanical restraints are used in transport to court or medical appointments, the following procedures are to be followed:

1. Family Court

Staff shall remove handcuffs and foot cuffs before the youth enters the family courthouse, unless it is determined the youth presents a flight risk or is demonstrating acute physical behaviors.

2. Criminal or Supreme Court

Staff shall not remove handcuffs and/or foot cuffs unless the youth has been turned over to Department of Correction (DOC) staff.

3. Medical/Hospital Appointments

- a. Staff shall not remove handcuffs and foot cuffs until or unless the youth is escorted to an area that is secure, i.e., does not have means of egress, or can be secured by the strategic placement of staff. An open waiting room is not considered to be a secure area, but an examination room without a window and with one door can be considered secure as long as staff members position themselves in a way that blocks the youth's access to the door.
- b. When practicable, staff shall contact the hospital or clinic to arrange for a secure space, i.e., a room with only one door as the one point of egress. Otherwise, facility staff shall talk with security staff, either in advance or upon arrival, to determine if there is an available room that can be secured by staff.
- c. If a youth has been waiting in a room that is not secure (e.g., an emergency room waiting area) and has been doing so for a period of one (1) hour, staff shall make a risk assessment and contact the facility director to discuss whether to remove the youth's handcuffs and/or foot cuffs.
- d. If a youth is admitted to a hospital, at least one (1) staff person must remain with the youth until he or she is discharged. At the time of admission, staff

must consult with the facility director about the continued use of handcuffs and/or foot cuffs during the hospitalization.

X. CONTROL AND STORAGE

- A. All handcuff and foot cuff keys must be stored in a locked and secure key cabinet in the LSP facility control room. Authorized staff members are required to sign out handcuffs and sign them in when they are no longer in use and by the end of the shift. Hand cuffs, foot cuffs and keys must be physically accounted for at the end of each shift.
- B. Handcuffs and foot cuffs shall be stored in the control room.
- C. Supervisors and their designees shall be the only staff members permitted to carry handcuffs and handcuff keys during the shift. The handcuffs must be discreetly secured in a handcuff case.
- D. Foot cuffs shall not be carried by staff during the shift.
- E. Handcuff keys shall be affixed to a soldered ring with facility keys. Staff must keep handcuff and foot cuff keys securely on their person during any transport.
- F. In the event that mechanical restraints or keys are lost or missing, staff shall conduct a facility-wide search in keeping with ACS search policies.³ An incident report form shall be completed by each staff member involved.
- G. Handcuffs and foot cuffs shall be tested a minimum of once per month to confirm they are in good working order. These inspections shall be noted in the Facility Activity/Communication Log Book.
- H. Providers shall maintain an accurate and up-to-date inventory list of mechanical restraint devices and cuff keys. Providers shall also maintain on-site a current list of staff members trained in and authorized to use mechanical restraints.

XI. TRAINING

- A. Only staff trained in the proper use of mechanical restraints shall be authorized to apply them.

³ See *Limited Secure Placement Personal Youth Search Policy*.

- B. All LSP provider direct care staff and supervisors are required to complete pre-service and refresher training in the use of mechanical restraints every six (6) months in conjunction with SCM training. See VI (A) for information about training.

**DIVISION OF YOUTH AND FAMILY JUSTICE
MECHANICAL RESTRAINTS DURING TRANSPORT
FORM**

Youth's Name (Last, First, MI): _____ D.O.B.: _____

LSP Name/Location: _____ Date: _____

Admission Date: _____ Current Phase: _____

Purpose of Trip: _____

Destination: _____

Date of Trip: _____ Departure Time: _____ Expected Return Time: _____

Name(s) of all staff providing the transport: _____

Staff shall make an individualized assessment of the youth in order to determine whether the youth presents a clear danger to himself, herself, or to public safety. State how and why you have determined the youth does/does not constitute a clear danger to self, other or public safety:

Does the youth have an AWOL history? Yes No

If yes, provide the date of last AWOL or attempt, and describe what happened:

Explain how and why you have determined the youth does/does not pose a flight risk:

Type of Mechanical Restraint Requested:

Handcuffs Foot cuffs Both

Submitted By: _____ Date _____

LSP Staff Person

Mechanical Restraint Transport :

___ Approved

___ Denied

Facility Director Signature _____ **Date** _____

cc: LSP Provider, ACS Case Record, Field Operations Transport File, DYFJ Director

**DIVISION OF YOUTH AND FAMILY JUSTICE
MECHANICAL RESTRAINTS SPECIAL TRANSPORT
REQUEST FORM**

Youth's Name (Last, First, MI): _____ D.O.B.: _____

LSP Name/Location: _____ Date: _____

Admission Date: _____ Current Phase: _____

Purpose of Trip: _____

Destination: _____

Date of Trip: _____ Departure Time: _____ Expected Return Time: _____

Name(s) of all staff providing the transport: _____

Does the youth have an AWOL history? Yes No

State how and why you have determined the youth does/does not constitute a clear danger to self, other or public safety:

Does the youth have a medical condition that may be affected by the application of mechanical restraints? List all medical conditions.

Type of Mechanical Restraint Requested:

Handcuffs Foot cuffs Both

Submitted By: _____ Date _____

LSP Staff Person

FOR DYFJ USE ONLY:

Mechanical Restraint Transport Request:

____ **Approved**

____ **Denied**

DYFJ Field Operations Staff Signature _____ **Date** _____

cc: LSP Provider, ACS Case Record, Field Operations Transport File, DYFJ Director