

	<p align="center"><b>JUSTICE AND PUBLIC SAFETY CABINET DEPARTMENT OF JUVENILE JUSTICE POLICY AND PROCEDURES</b></p>	<p><b>REFERENCES: REFERENCES: 505 KAR 1:110 3-JTS-3A-16-18, 26, 27, 29, 31 3-JCRF-3A-02, 05; 4C-17 1-JDTP-3E-02 1-JBC-3A-15, 18-21, 27, 28 4-JFC-2A-09, 15, 17, 27, 29 NCCHC Y-66</b></p>
<b>CHAPTER: Program Services</b>		<b>AUTHORITY: KRS 15A.0652</b>
<b>SUBJECT: Restraints</b>		
<b>POLICY NUMBER: DJJ 324</b>		
<b>TOTAL PAGES: 4</b>		
<b>EFFECTIVE DATE: 1/04/2016</b>		
<b>APPROVAL: Bob D. Hayter</b>		<b>, COMMISSIONER</b>

**I. POLICY**

Staff shall utilize appropriate behavior management methods and techniques to promote a safe and secure program culture. Staff shall be permitted to use approved methods of restraint for youth in instances of justifiable self-defense, protection of youth or others, protection of property, prevention of escape, or to maintain or regain control.

**II. APPLICABILITY**

This policy shall apply to each Department of Juvenile Justice (DJJ) operated day treatment program, group home, and youth development center (YDC).

*The use of mechanical restraints shall be prohibited in a day treatment program.*

**III. DEFINITIONS**

Refer to Chapter 300.

**IV. PROCEDURES**

- A. Restraints and restraint equipment shall be used only as a control measure to protect the youth, staff, and other youth and only when all other actions appropriate to the situation have been ruled out.
- B. Youth shall not be permitted, expected, or directed to physically manage other youth.
- C. Three (3) types of restraints approved by the department shall be:
  - 1. Physical Restraint
    - a. Staff shall utilize only agency approved and trained skills in the physical management of aggressive youth.
    - b. Staff shall not use physical restraint as punishment.

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- c. Staff shall use only the level of physical restraint necessary to control aggressive behavior, until the youth is able to demonstrate self-control.
  - d. DJJ staff, who have the responsibility, or potential responsibility, for the direct care, supervision, and treatment of youth, shall be required to hold certification from the Division of Professional Development in approved methods of restraint.
  - e. Staff shall complete an incident report documenting the use of physical restraint in compliance with DJJ policy. Each specific physical restraint technique used shall be noted in the incident report.
2. Mechanical Restraint
- a. Staff shall utilize agency approved and trained techniques and equipment in the use of a mechanical restraint.
  - b. Staff shall not use mechanical restraint as punishment.
  - c. The Superintendent or Administrative Duty Officer (ADO) shall approve use of mechanical restraints.
  - d. Minimum force shall be used in the application of mechanical restraints to reduce the possibility of injury to the youth and staff.
  - e. Use of mechanical restraints:
    - i. Shall be authorized when staff determines that physical restraint is no longer an effective method of managing aggressive youth;
    - ii. As a precaution against escape or assault during transport; or
    - iii. May be utilized as a prevention against serious self-injury, injury to others, or property damage.
  - f. Staff shall document the use of mechanical restraints in an incident report, except when mechanical restraints are used in the transportation of a youth by the DJJ Transportation Branch.
    - i. The incident report shall be completed in compliance with DJJ policy.
    - ii. The specific mechanical restraint equipment used shall be noted in the incident report.
    - iii. The report shall be reviewed by the Superintendent for compliance with policy and procedure.
    - iv. In cases of routine transportation, the use of mechanical restraints shall be documented on the mechanical restraint usage log and in the youth's progress notes.
  - g. Staff shall check youth every fifteen (15) minutes during the mechanical restraint episode to ensure the youth is not in physical distress.

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- i. Documentation shall be made on the youth observation log.
    - ii. For mechanical restraint use during transportation, staff shall adhere to DJJ policy.
  - h. Staff shall be prohibited from placing and maintaining youth in an unusual position after the mechanical restraints have been applied.
  - i. Youth shall not be affixed to a stationary object in any manner so as to constitute a fixed restraint. Four-point and five-point restraints shall be prohibited.
- 3. Therapeutic Restraint
  - a. Therapeutic restraint shall only be used in compliance with DJJ Chapter 4 policies.
  - b. Youth shall not be held in a restraint longer than the time absolutely necessary.
- 4. When mechanical or therapeutic restraints are used for the management of behavior:
  - a. Restraints shall be removed when there is positive change in a youth's behavior, it is believed that the youth can be controlled without them, and it is safe to do so; and
  - b. If no positive change in the youth's behavior occurs within the first thirty (30) minutes, the Superintendent or ADO shall begin the evaluation of the youth for other alternatives.
- D. Post-restraint protocol shall include:
  - 1. Once the youth regains control of his behavior, it shall be the responsibility of the staff to assist the youth in the reintegration into the facility population and to identify follow-up services, if needed;
  - 2. Prompt medical attention shall be required for all injuries;
  - 3. The Superintendent shall conduct a thorough review of incidents involving injury during restraint to determine if such incidents may be avoided in the future; and
  - 4. The youth's counselor, ADO, or designee shall notify the juvenile service worker (JSW) and the youth's parents or caregiver within 24 hours of any of the following:
    - a. The use of mechanical restraints, other than shackling for transportation purposes;
    - b. The initiation of therapeutic restraints; or
    - c. The use of a physical restraint resulting in an injury to the child, except where the injury consists only of minor cuts, scratches, bruises or red marks.
- E. Documentation shall include:

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1. Youth observation logs of fifteen (15) minute checks for mechanical restraints;
  2. Post-restraint body identification (ID), including injuries and other medical documentation; and
  3. Incident reporting including photographs and any other relevant information.
- F. Mechanical Restraint Equipment Inventory
1. The availability, control, and use of mechanical restraint equipment shall be the responsibility of the Superintendent or designee.
  2. Mechanical restraints shall be marked in a way to identify them as DJJ property and shall be secured.
  3. Documentation shall be maintained in the form of an inventory and use log to provide accountability for their location and use.
  4. The Superintendent or designee shall review the mechanical restraint inventory and use records monthly, to ascertain that equipment listed is secured in the locations noted.
- G. Reusable restraint equipment shall not be used on another youth until it is properly cleaned and disinfected and noted on the mechanical restraint usage log. Commercial products, in accordance with DJJ policy, shall be available for disinfecting.
- H. DJJ shall not use any type of restraint on female youth during active labor and the delivery of a child. Any exception requires approval by, and guidance on, methodology from the Director of Medical Services and shall be based on documented serious security risks. The Director of Medical Services shall provide guidance on the use of restraints on pregnant youth prior to active labor and delivery.

## **V. MONITORING MECHANISM**

- A. The Superintendent or designee shall ensure that staff attend monthly restraint technique reviews, quarterly basic restraint technique reviews, and biannual mechanical restraint reviews.
- B. The Superintendent or designee shall review the maintenance and usage of restraint equipment and documentation.
- C. The facility based trainers shall review for competency in skills in compliance with review periods;
- D. The Division of Professional Development shall conduct recertification of skills and yearly training schedules.
- E. The Facilities Regional Administrator (FRA) or Regional Division Director shall review incident reports for compliance with this policy.
- F. The Quality Assurance (QA) Branch shall monitor annually for compliance.