

## Procedures for Four and Five Point Restraints

- A.** The following procedures will be followed in the application of four/five point restraints:
1. The camera operator will videotape the disruptive behavior of the offender prior to the cell entry and throughout the entire process. Care will be taken to protect the safety of the camera operator. \_\_\_\_\_  
(Initials)
  2. When the use of four/five point restraints is necessary for medical or psychological reasons, their use will be approved in advance by the facility head and the division manager, staff physician, duty nurse or qualified health care professional (QHCP), who will review the offender's record for any medical condition that may affect the use of four/five point restraints. \_\_\_\_\_  
(Initials)
  3. Use of four/five point restraints will be used only when an offender is destroying state property, to prevent self-injury or injury to others, or for medical or psychological reasons. \_\_\_\_\_  
(Initials)
  4. Placement of an offender in four/five point restraints will be accomplished by the use of force team, as specified in facility policy. \_\_\_\_\_  
(Initials)
  5. At least one of the following listed personnel will be present for the application of four/five point restraints, unless a life-threatening situation necessitates immediate action. If the situation is life threatening, the shift supervisor will determine the need for immediate action prior to the arrival of at least one of the following personnel:
    - a. Facility Head \_\_\_\_\_
    - b. Asst. Facility Head \_\_\_\_\_
    - c. Chief of Security \_\_\_\_\_
    - d. Duty Officer \_\_\_\_\_
- B.** Applications of four/five point restraints will include the following progressive steps:
1. A "Use of Force Checklist" will be completed by the shift supervisor in charge prior to forced cell entry. The QHCP will complete a "Restraint Medical Flowsheet" (DOC 140141B) prior to restraining an offender. \_\_\_\_\_  
(Initials)
  2. The shift supervisor will give the offender a direct order to submit to handcuffs prior to any cell entry by the use of force team. \_\_\_\_\_  
(Initials)
  3. The offender will be removed from the cell and searched while the cell is prepared for the application of four/five point restraints. \_\_\_\_\_  
(Initials)
  4. The offender, stripped to underwear or safety smock, will be placed on the bunk mattress in a supine (face up) position. Should bedsores or other injuries to the offender's backside prevent placing the offender in a face up position, the offender may be restrained face down upon approval from the supervising physician. Leather or nylon restraints will be used to secure the offender, unless such restraints are clearly inadequate to restrain the offender. \_\_\_\_\_  
(Initials)
- C.** After restraints are applied, the health care provider will examine the offender to ascertain if restraints are too tight. The QHCP will also examine the offender to check for injuries incurred during the restraining application. The QHCP will review the offender's medical record immediately after the initial assessment is complete, to identify any pre-existing medical condition that might affect the use of such restraints. Such medical conditions will be logged on the individual Restricted Housing Unit (RHU) custody log or the unit activity log and will be documented in the medical/clinical record.
1. All cell entry officers will be examined by the QHCP for injuries. \_\_\_\_\_  
(Initials)

2. The restrained offender will be checked every fifteen minutes, to include a circulation check, by the trained, designated RHU officer/QHCP, who will immediately report any unusual medical problems to medical services staff.

The unit manager, duty officer, or shift supervisor will check on the restrained offender at least once per shift.

If an offender is placed in a stripped cell, unit staff will check the offender at a minimum of every 15 minutes. These checks will be documented in the log.

3. If an offender is placed in ambulatory restraints, security staff will perform a security check on the offender at a minimum of every 15 minutes and the QHCP will conduct a circulatory check every two hours. These checks will be documented in the log.

- D. The offender will not be left in four/five point restraints longer than 72 hours. A determination will be made at 24 hours to determine whether additional restraint is necessary. Any period of restraint in excess of 24 hours will require review of the offender's behavior, and determination by the facility head and the health care provider for removal/continued restraint. If further restraint is necessary, the offender's status must be reviewed again at 48 hours and an additional determination made at that time by the facility head and the QHCP or highest ranking medical provider/professional on duty. All continued use of restraint must be documented in the RHU custody log or unit activity log.

\_\_\_\_\_  
(Initials)

The facility head will review the offender every 24 hours to ensure that the offender is receiving proper treatment, and if a need exists, continued use of restraints.

- E. All relevant information concerning the restrained offender will be entered in the individual RHU custody log of the unit's activity log. Every event, both verbal and physical, will be considered relevant and entered in the logs. Each log entry will contain the date, time, details, of the event or visit from staff, and initials of the reporting officer

- F. The restrained offender will receive three meals per day, in conjunction with the master sack lunch menu (or master menu items, if they are finger-type foods). No forks, knives, or spoons will be authorized, and plates and cups will be made of paper or Styrofoam. Water will be offered with every meal and every two hours. All meals issued will be logged in the individual RHU or unit activity log.

- G. The restrained offender will be given an opportunity to use the restroom or bedpan at a minimum of every (two hours. All restroom use will be logged in the individual RHU or unit activity log.

- H. Use of Force Report Requirements

If the restrained offender resists feeding, water, restroom use or any other activity, it will be logged in the individual RHU or unit activity log.

If the restrained offender resists feeding, water, restroom use, or any other activity, and force is used, a written report will be submitted by all involved staff before the end of the shift.

(R 8/14)