

**Commonwealth of Massachusetts
Department of Correction
Standard Operating Procedure**

**Attachment to 103 DOC 520, *Instruments of Restraint*
Four-Point Restraints**

I. Purpose

This Standard Operating Procedure (SOP) establishes guidelines for the application and use of Four-Point Restraints, consistent with 103 DOC 520, *Instruments of Restraint*. It is impossible to plan for every incident that may occur within a correctional environment, but a standardized response helps employees to do their jobs in a professional and safe manner, and This procedure applies to initially securing an inmate/patient in Four-Point Restraints, as well as administering Intra-Muscular (IM) medication to an inmate/patient already in Four-Point Restraints.

II. Required Resources

This SOP requires an eight (8) person security team trained in the process and application of Four-Point Restraint equipment and a Qualified Healthcare Professional. The eight (8) person security team consists of:

One (1) Team Leader;
Two (2) Upper Extremity Officers (Left/Right);
Two (2) Lower Extremity Officers (Left/Right);
One (1) Restraint Officer;
One (1) Shield Officer; and
One (1) Video Operator

III. Team Assignment Roles/Responsibilities

A. Team Leader – Receive prior authorization to place the inmate/patient into Four-Point Restraints. Authorization is as follows:

1. Placement into the Humane Restraint System, when used for therapeutic purposes, shall be ordered by the contractual psychiatrist in accordance with 103 DOC 650, *Mental Health Services*.
2. The Superintendent retains the authority to take whatever steps necessary to ensure employee and inmate/patient safety and can authorize the use of security Four-Point Restraints in accordance with 103 DOC 520, *Instruments of Restraint*.
3. The Shift Commander may authorize the use of a security Four-Point Restraints for up to two (2) hours, but must contact the Superintendent, or in the absence of the Superintendent, a designee, by normally acceptable means of communication as soon as possible to gain documented approval

for continued use of Four-Point Restraints beyond the two (2) hours in accordance with 103 DOC 520, *Instruments of Restraint*.

Supervises the team and Four-Point Restraint application process to include assignment of team member roles; ensures all necessary personnel are available and necessary equipment is available and functioning properly; pre-inspection of the restraint bed and Four-Point Restraints; pre-determination of when/where to apply transition restraint; controls actions of all team members through clear instructions; limits communication to that which is necessary between team members and the inmate/patient; ensures a medical inspection of Four-Point Restraints is completed; and instructs team members on removal of Four-Point Restraints and/or exiting the cell/secure area when complete.

- B. Upper Extremity Officers (Left/Right) – Controls upper extremities throughout the Four-Point Restraint application and removal process.
- C. Lower Extremity Officers (Left/Right) – Controls lower extremities throughout Four-Point Restraint application and removal process.
- D. Restraint Officer – Prepares the Humane Restraint Bed with Humane Restraints. Applies and removes all hard and soft restraints throughout the Four-Point Restraint process.
- E. Shield Officer – Controls the Poly Captor shield to provide a safety barrier between the inmate/patient and employees.
- F. Video Operator – Video records the entire Four-Point Restraint process, beginning with the Team Leader briefing, and ending only after:
 - 1. The inmate/patient is properly secured in Four-Point Restraints;
 - 2. All team members have exited the cell;
 - 3. The Team Leader and medical inspection of Four-Point Restraints has been completed; and
 - 4. When Intra-Muscular (IM) medication has been ordered, only after the IM procedure is complete.
- G. Qualified Healthcare Professional – Observes the entire Four-Point Restraint application process; conducts a physical inspection of all Four-Point Restraints; conducts a medical examination; and, when IM medication has been ordered, administers IM medication.

IV. Steps

- A. The Team Leader shall receive prior authorization to secure the inmate/patient in Four-Point Restraints.
 - 1. The Video Operator shall record the Four-Point Restraint procedure from this point forward, starting with a briefing from the Team Leader, which shall include, at a minimum:
 - a. Team Leader self-introduction (name/rank);
 - b. Date, time, and location;
 - c. Inmate/patient name and commitment number;
 - d. Who authorized the placement of the inmate/patient into Four-Point Restraints;
 - e. Reason for placement into Four-Point Restraints;
 - i. If for IM procedure, ensure the Qualified Healthcare Professional provides a briefing to the team of what medication has been ordered and by whom.
 - f. Instruct Team Members to introduce themselves and their assignments; and
 - g. Brief the Team Members as to where and how the inmate/patient will be transitioned into Four-Point Restraints.
- B. Instruct the Restraint Officer to prepare the Humane Restraint System (mattress and soft restraints). The Restraint Officer shall:
 - 1. Prepare the Four-Point Restraint Bed with soft restraints (anklets closest to the observation window/door). This may be reversed based on an inmate's gender identity and/or history of trauma, in which case the positioning of the anklets and wristlets may be reversed with the wristlets closest to the observation window/door.
 - 2. Inspect and prepare all Four-Point Restraint equipment (Transition Restraint and leg irons).
- C. The Restraint Officer shall apply hard restraints to the inmate/patient in a cell or other pre-determined secure area as designated by the Team Leader. The hard restraints shall be applied to ensure the key holes for both the handcuffs and leg irons are facing down.
- D. The Upper Extremity Officers shall then remove the inmate/patient from the cell/secure area while the Restraint Officer applies the Transition Restraint. The Transition Restraint shall be applied above the handcuffs with the key holes facing up/away from the handcuffs. Once the Transition Restraint have been applied, the Restraint Officer shall remove the handcuffs. The Upper Extremity Officers shall maintain control of the inmate's upper extremities throughout this process.

- E. The Upper Extremity Officers, while maintaining control of the inmate's upper extremities, shall escort the inmate/patient to the foot of the Humane Restraint Bed.
1. The Restraint Officer, Lower Extremity Officers, and Shield Officer shall follow and respond if necessary.
 2. The Team Leader shall be positioned to provide the best vantage point and instruction to the team.
 3. The Video Operator shall be positioned in a manner to record events without interfering with the restraint application throughout the entirety of the process.
 4. The Qualified Healthcare Professional shall be positioned at the best possible vantage point to observe the entire Four-Point Restraint process without interfering with the restraint application.
- F. The Team Leader shall direct the Upper Extremity and Lower Extremity Officers to lift and place the inmate/patient on the bed laying down in a face-up position and make adjustments as needed for proper application of restraints.
1. Upper Extremity Officers shall then secure the inmate's/patient's upper extremities by placing one hand on their wrist and the other on their upper bicep. Lower Extremity Officers shall simultaneously secure the inmate's/patient's lower extremities by placing one hand above their ankle on their shin and the other hand on their upper thigh.
 2. Upper and Lower Extremity Officers shall maintain control of their respective extremities until the Four-Point Restraint process is completed and the Team Leader gives the order to exit the cell/secure area.
 3. The Shield Officer shall place the Poly Captor shield above the inmate's/patient's upper body and head. Except to temporarily gain, regain, or maintain control of an inmate/patient who is resisting the application of restraints, do not intentionally apply downward pressure with the Poly Captor shield during the application of Four-Point Restraints.
 4. Except to temporarily gain, regain, or maintain control of an inmate/patient who is resisting the application of restraints, do not intentionally sit the inmate/patient up, and never intentionally sit on, or apply pressure to, the back, chest, or abdomen during the application of Four-Point Restraints. This is to prevent positional asphyxia.
- G. The Team Leader shall direct the Restraint Officer to begin transitioning the inmate/patient into Four-Point Restraints.
1. The Restraint Officer shall apply the Soft Restraint Anklets (green) above the leg irons.

2. The Restraint Officer shall then apply the Soft Restraint Wristlets (blue) above the Transition Restraints.
 3. The Restraint Officer shall then remove the leg irons, followed by the Transition Restraint, from the inmate/patient and re-inspect all restraints.
 4. The Team Leader has the discretion to determine if/when a fifth-point of restraint is to be utilized (e.g., wristlet/anklet restraints are not adequate in restricting the inmate's/patient's body from violently thrashing or possible self-injury). The fifth-point chest strap restraint shall be required for all IM procedures.
 - a. The Restraint Officer shall apply the fifth-point restraint chest strap (always for IM procedures) over the chest, but under the arms, OR the leg strap above the knees at the direction of the Team Leader.
 - b. Loop the tail of the strap under and around the bedframe.
 - c. Feed the tail through the roller buckle; and
 - d. Position the tongue of the roller buckle in the appropriate size adjustment for both sides.
 - e. Inspect the fifth-point restraint and adjust as needed.
- H. The Team Leader shall then inspect all Humane Restraints to ensure proper application. If IM medication has been ordered:
1. The Team Leader shall then instruct the Restraint Officer to apply the temporary immobilization strap (thigh area) and issue two (2) paddles to the Lower Extremity Officers for administration of the IM.
 2. The Lower Extremity Officers shall place the paddles around the injection area to limit mobility.
 3. The Qualified Healthcare Professional shall prepare the injection site by pulling down the inmate/patient's pants or folding up the bottom of the security smock (ensure genitals are covered as best as able).
 4. The Qualified Healthcare Professional shall administer the IM injection and dispose of any used sharps into an appropriate container.
 5. As soon as the IM procedure is completed, the Restraint Officer shall retrieve the paddles from the Lower Extremity Officers, who shall immediately resume controlling the inmate's/patient's lower extremities. The Restraint Officer shall then remove the temporary immobilization strap.
- I. The Qualified Healthcare Professional shall physically inspect all restraints and assess for proper circulation.
- J. If the inmate/patient is to remain in Four-Point Restraints, the Team Leader shall begin to order team members to exit the cell/secure area. The Shield Officer shall

be the last to exit the cell/secure area. Once all team members have exited and the cell/area is secured, the Team Leader shall state the Four-Point Restraint process has been completed and the Video Operator shall stop recording.

1. It shall be the responsibility of the Team Leader to ensure all medical examinations of the Humane Restraints, vital signs assessments, exercise periods, etc. are conducted in accordance with 103 DOC 520, *Instruments of Restraint*, and 103 DOC 650, *Mental Health Services*.
 2. The Video Operator shall record all events identified above, starting with a briefing when the video camera is turned on, which shall include, at a minimum:
 - a. Video Operator self-introduction (name/rank);
 - b. Date, time, and location;
 - c. Inmate/patient name and commitment number;
 - d. Statement regarding the continued use of Four-Point Restraints and the current event (e.g., vital signs assessment).
 3. In the event of a change of shift, the outgoing Team Leader shall brief the incoming Team Leader of all relevant information, to include but not limited to:
 - a. Inmate/patient name and commitment number;
 - b. Location;
 - c. Who authorized the placement of the inmate/patient into Four-Point Restraints;
 - d. Reason for placement into Four-Point Restraints;
 - e. Last event and time (e.g., last time a Qualified Healthcare Professional examined the inmate); and
 - f. The next time an event is due (e.g., vital signs assessment).
- K. If the inmate/patient is to be removed from Four-Point Restraints, the application procedure is to be done in reverse order. The Video Operator shall record the entire removal process until the inmate/patient is secure and the Team Leader states the restraint removal process has been completed.