



# Crisis Prevention, Response, and Restraint Curriculum Review Committee

# Information Sheet on the Use of Blocking Pads

# Purpose and Scope

This Information Sheet advises on the Department of Developmental Services' (Department) recognition of increased use of blocking pads and related requirements and prohibitions to their use.

Increases in the consideration and use of blocking pads as a possible less intrusive intervention to physical management and restraint have been generally observed across service providers in both school and residential settings. In response, the Department anticipates various providers of CPRR curricula to design and incorporate additional techniques that utilize blocking pads, to create a variety of options for service providers as they attempt to minimize more restrictive physical interventions required for safety.

Given the inherent right of individuals to freedom of movement, and given the variety of scenarios in which the use of blocking pads of all sizes, shapes, and functional designs are considered as options, the Department is requiring a review by the Crisis Prevention, Response, and Restraint Curriculum Review Committee

(CRC) of **any** use of blocking pads as emergency interventions or as part of a Behavior Safety Plan in conjunction with an Intensive Positive Behavior Support Plan. It is anticipated that the Department will issue changes and updates to this requirement as more data becomes available.

NB: Safety Care/QBS, SOLVE, and the DDS PABC are currently the only CPRR curricula certified by Massachusetts DDS to teach blocking pad techniques.

#### **General Requirements**

This section provides an overview of required standards and criteria for the use of blocking pads as an intervention with individuals receiving services from any DDS operated, certified, contracted or otherwise DDS funded programs.

#### Description of Allowable Uses

Blocking pads may be a used as a less restrictive alternative to restraints depending on individual needs and circumstances. Blocking pads may only be used for protection:

- To prevent injury to the individual from self-injurious behavior.
- To prevent harm or injury to staff and others by an individual.

The use of blocking pads may give the individual time to de-escalate without the need to implement more restrictive strategies. The use of pads should always be paired with deescalation and not used until other less restrictive strategies have been attempted and have not been successful in maintaining the health and safety of the individual or others.

Blocking pads should be removed immediately if, at any time, the individual appears physically or emotionally in distress. Furthermore, the individual should immediately receive any first aid if needed (including being assessed by medically trained personnel or being sent for medical treatment as needed).

While blocking pads may be useful to prevent injuries to individuals, staff, and others, negative impacts and possible harm to the individual being supported must be avoided.

- Blocking pads may only be used on an individualized basis with approval from the CRC.
- Blocking pad procedure(s) are used only after appropriate prevention, de-escalation, and alternative less restrictive physical interventions, as taught through the CPRR curriculum, are attempted.
- The use of blocking pads in community settings may contribute to creating a socially isolating environment and possible undermining of positive identity development. In order to minimize the risk of these consequences agencies should:
  - o Consider the type and size of blocking pads used.
  - Ensure the blocking pads are stored accessibly but inconspicuously.
  - Train staff to reassure the individual that they are there to help; best practice would include frequent review of alternatives to the use of blocking pads with the individual's input.

# Description of Prohibited Uses

Blocking pads may not be used:

• To exert force, move, corral, or push an individual, i.e., hit, shove, intimidate, restrain, pin, confine or contain the individual. Blocking pad containment is prohibited. For the purposes of this information sheet, "Blocking Pad Containment" is defined as any use of blocking pads where the staff person(s) initiates direct contact between the blocking pads and an individual thereby keeping the individual confined and limiting their freedom of movement or when a staff person(s) does not initiate direct contact while holding the blocking pad but surrounds the individual in such a way that it creates a barrier from which the individual cannot freely leave.

- To force an individual into an alternative position. When pads are in use, staff using them should accommodate an individual's movement for the purpose of interceding in the completion of actions that present a risk of injury to the individual or others.
- To intimidate or threaten.
- As an alternative to adequate staffing and support.
- Unless they are maintained and in good repair.

# Clinical Considerations and Requirements

If the PBS Qualified Clinician responsible for the Intensive Positive Behavior Support Plan for an individual is considering interventions which utilize blocking pads, all requirements for implementing plans containing restrictive procedures pursuant to 115 CMR 5.14 must be met prior to the CRC review of the proposed blocking pad technique, including a completed FBA, Behavior Safety Plan, Peer Review, and Human Rights review.

Per 115 CMR 5.14, the efficacy of Behavior Safety Plans containing the use of blocking pads will be monitored as part of a data driven review by the individual's ISP and treatment team, and as specified in the individual's Intensive Positive Behavior Support Plan.

#### **CRC Review**

All staff must be trained and certified in a DDS certified CPRR curriculum before being trained and deemed competent to execute any blocking pad procedure that is contained in an individual's Behavior Safety Plan. The CPRR provider will assess whether the physical technique and safe execution of blocking pad use has been reviewed with existing staff and taught appropriately in the curriculum PRIOR to the pads being used as part of a Behavior Safety Plan. Any use of blocking pads which is modified or individualized in some way will be reviewed by the CRC in accordance with its review of an Individualized Emergency Protocol.

If there are concerns about possible unapproved use of blocking pads or there are concerns as to whether a prohibited practice exists, the provider shall notify DDS. DDS clinical consultation and Statewide Peer Review are available to review these concerns and are required for all individuals for whom DDS prohibited practices are used as interventions.

To schedule a review with the CRC please contact Allyson Carter at <u>Allyson.A.Carter@mass.gov</u>. To schedule DDS clinical consultation or DDS Statewide Peer Review, please contact <u>Joacelis.Suero@mass.gov</u>. For general questions contact Barbara Peebles at <u>Barbara.Peebles@mass.gov</u>.