

## **Crisis Prevention, Response, and Restraint Curriculum Review Committee (CRC)**

### **Information Sheet on the Use of Blocking Pads**

#### **Purpose:**

This Information Sheet advises on the use of blocking pads within the Department of Developmental Services (the Department) certified restraint curricula.

#### **Scope and Definition:**

Blocking pads are defined as a specialized type of cushioned, freestanding protective equipment that are actively held by staff to protect staff and individuals from harm resulting from physical aggression (e.g., punching, kicking, throwing or destroying objects when there is concern for sustaining serious physical injury). Blocking pads, which are typically foam filled, vinyl covered protective tools, may serve as a less intrusive or restrictive measure of physical intervention to ensure safety. Blocking pads have been observed across school and residential settings as a strategy to reduce the need for hands-on physical intervention.

Blocking pads are not pillows, mattresses, permanently installed wall padding, or other soft padding that may be used to protect against exclusively self-injurious behavior (such as when used as a protective barrier to reduce risk for injury associated with headbanging). In the case of preventing self-injury exclusively, these protective items are considered Health-Related Supports and Protective Equipment, subject to DDS Regulations 115 CMR 5.12.

Given that blocking pads are actively held and used by staff to reduce the likelihood of physical restraint in response to aggressive behavior, blocking pads may *only* be used when taught in coordination through a Department certified Crisis Prevention, Response, and Restraint (CPRR) curriculum. At the present, only *Safety Care/QBS, SOLVE, and PABC* are certified by the Department to teach blocking pad techniques.

#### **General Requirements:**

Standards and criteria for the use of blocking pads apply to individuals receiving services from any Department operated, certified, contracted, or otherwise funded program. Blocking pad use may be approved by the Department's Curriculum Review Committee (CRC) on an individual basis dependent upon need and circumstance. Blocking pads may be used as means of protection and safety only to prevent injury or harm to the individual served or another (i.e., staff), either by self-injurious or aggressive behaviors.

The use of blocking pads may also give an individual time to de-escalate without the need to implement more restrictive strategies. As such, the use of blocking pads should always be paired with de-escalation techniques to support the health and safety of the individual.

Blocking pads are *not* to be used in any manner that restricts freedom of movement over an individual's active resistance, or otherwise traps, pins, or confines movement. Limitation of movement that is achieved by means of a physical device, including a blocking pad, may be defined as a mechanical restraint which is prohibited per 115 CMR 5.14. Blocking pads may also *not* be used in any manner to

push or move an individual.

**Implementation:**

Upon CRC approval, individual application of the use of blocking pads must be documented in conjunction with a corresponding positive behavior support plan, with relevant data relating to behavioral concerns and safety collected.

All staff must be trained and certified in a DDS certified CPRR curriculum as well as trained and deemed competent to execute a blocking pad procedure as identified in that person's positive behavior support plan.

Agencies are responsible for ensuring that blocking pads are appropriately sized for the individual and environment, as well as that they are stored in a manner that is accessible, inconspicuous, and maintained in safe working condition.

Concerns about unapproved use of blocking pads, adverse experiences, or related injuries shall be reported to the Department's CRC for review and consultation.

**Schedule Consultation:**

All inquiries, questions, or requests relating to blocking pads or other individual modifications for physical interventions should be directed to: [PBS-DDS@mass.gov](mailto:PBS-DDS@mass.gov)