

 <p style="text-align: center;">Massachusetts Department of Correction POLICY</p>	Effective Date	Responsible Division Deputy Commissioner, Prisons
	7/17/2024	
	Annual Review Date	
	11/22/2024	
Policy Name	M.G.L. Reference:	
103 DOC 520	M.G.L. Chapter 124, § 1 (a), (b), and (q);	
INSTRUMENTS OF RESTRAINT	M.G.L. Chapter 125, § 14 and M.G.L. Chapter 127, §§ 33 and 118.	
	DOC Policy Reference:	
	103 DOC 216; 103 DOC 501; 103 CMR 505;	
	103 DOC 507; 103 DOC 521; 103 DOC 530;	
	103 DOC 650	
	ACA/PREA Standards:	
	5-ACI-3A-18; 5-ACI-3A-31	
Attachments Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Inmate Library Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Applicability: Staff
Public Access Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Location: Department Central Office Policy File Each Institution's Policy File	
<p>PURPOSE: The purpose of 103 DOC 520 is to establish Department of Correction (Department) policy and procedure for the training and use of Instruments of Restraint.</p> <p>RESPONSIBLE STAFF FOR IMPLEMENTATION AND MONITORING OF POLICY: Deputy Commissioner, Prisons Director of Operational Services Superintendents Directors of Security</p> <p>CANCELLATION: 103 DOC 520 cancels all previous Department policy statements, bulletins, directives, orders, notices, rules, or regulations regarding security equipment which are inconsistent with this policy.</p> <p>SEVERABILITY CLAUSE: If any article, section, subsection, sentence, clause, or phrase of 103 DOC 520 is for any reason held to be unconstitutional, contrary to statute, in excess of the authority of the Commissioner, or otherwise inoperative, such decision shall not affect the validity of any other article, section, subsection, sentence, clause or phrase of these regulations.</p>		

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520.01

DEFINITIONS

Belly Chain: A type of restraint consisting of a chain around the waist, to which a restrained individual's hands may be chained or cuffed.

Black Box: A wrist restraint cover used in combination with a Belly Chain which protects the keyhole and prevents the restrained individual from picking or tampering with any parts of the lock.

Business Hours: Monday through Friday, 9:00 a.m. to 5:00 p.m., excluding holidays.

Chest Strap: A Fifth Point of restraint applied over an individual's chest used in combination with four-point restraints when four-points of restraint are deemed insufficient by the Officer in Charge/Team Leader.

Commissioner: The Commissioner of the Massachusetts Department of Correction.

Connector Chain: Restraint chain used to connect a maximum of three (3) incarcerated individuals together during transport.

Department: The Massachusetts Department of Correction.

Department Duty Officer Station: Designated site that assists in the processing of information for the Duty Officer System.

Deputy Commissioner of the Prison Division: The executive staff person who reports to the Commissioner, and whose duties include, but are not limited to, the overseeing of all institutions, and the management of the Assistant Deputy Commissioners of the Northern and Southern Sectors, Operational Services and Central Discipline Unit.

Director of Operational Services: The Department staff person responsible for the daily operations of the Special Operations Division, Central Transportation/Vehicle Maintenance Unit, and Central Community Work Crew.

Director of Security: A manager who reports to the institution Deputy Superintendent of Operations, and whose duties include, but are not limited to, the overall safety and security of an institution.

Director of Staff Development: The chief administrative officer of the Division of Staff Development (DSD).

Division Head: The administrative head of each of the following units:

- The Office of Investigative Services;
- The Division of Staff Development;
- The Central Transportation/Vehicle Maintenance Unit;

- The Special Operations Division;
- The Professional Standards Unit;
- The Central Disciplinary Unit; and
- The Central Community Work Crew Division.

Division of Staff Development: Department division responsible for employee training.

Emergency: Any situation where the failure of an individual to take immediate action would place that individual or another at imminent risk of death or serious bodily injury.

Employee: An employee/staff member of the Department of Correction. For the purposes of 103 DOC 520 only, employee shall also refer to individuals paid for services performed within a correctional institution for or through a contracted service or agency.

Exigent Circumstances: Circumstances that create an unacceptable risk to the safety of any person.

Fifth Point: A Fifth Point of restraint used in combination with four-point restraint, either a chest strap or thigh strap, when four-points of restraint are deemed insufficient by the Officer in Charge/Team Leader.

Flex Cuffs: A plastic strap that can be fastened as a restraint around an inmate's wrists.

Four-Point Restraints: Any combination of Instruments of Restraint such that the four limbs of an individual are restrained at any one time, in any manner, to an approved bed system.

Humane Restraint System: Restraint system designed to safely restrain aggressive and agitated inmates without inflicting harm while significantly limiting an inmate's mobility and to prevent self-injurious behavior.

Inmate: For the purposes of this policy, an individual confined at or committed to a correctional institution, excluding patients admitted to the Bridgewater State Hospital and Massachusetts Alcohol and Substance Abuse Center.

Institution Duty Officer: A rotating staff person assigned specific duties as institution duty officer by the Superintendent. The institution duty officer is usually assigned for a period of two (2) weeks at a time.

Leg Restraints: A metal band or chain placed around an individual's ankle(s) as a restraint.

Medical Director: Physician designated by the Contractual Medical Provider with supervisory authority for health services and medical judgments at each Department institution.

Officer-in-Charge: Senior ranking staff member who assumes control and supervisory responsibilities of all staff at a scene. If no supervisor is present, the correction officer with the most seniority shall be designated as the Officer in Charge.

Paddle Device: Rectangular piece of plexiglass used to apply temporary pressure to the thigh strap during an intra-muscular injection to help prevent injury.

Paddle Restraint/Hand Kuzi: A slip covering that covers an inmate's hand/wrist and may extend up to an inmate's elbow to prevent self-injurious behavior or tampering with locking mechanisms.

Restart Chair: A security chair that allows for the application of wrist and leg restraints to limit mobility for the increased safety of staff and inmates to the extent necessary to provide opportunities for participation in programming, recreation, assessments, and other individual or group activities.

Restart Table: A security table that allows for applied leg restraints to be secured to a fixed point on the table base which limits mobility for the increased safety of staff and inmates to the extent necessary to provide opportunities for participation in programming, recreation, assessments and other individual or group activities.

Retention Device: Restraint device that can be secured at either end, where one end is attached to a fixed object and the other is attached to wrist restraints to increase the safety of all involved while applying/removing restraints.

Shift Commander: The staff member responsible for the supervision of all security staff during a given tour of duty, ensuring that staff maintain the safety and security of the institution, and provide for the care and custody of all inmates housed within the institution, in accordance with all Department policy statements, bulletins, directives, orders, notices, rules, and/or regulations. The Shift Commander may also be responsible for institutional operations during the absence of higher-ranking staff.

Soft Restraints: An alternative to traditional metal restraints.

Spit Hood: Restraint device used to prevent an inmate from spitting or biting.

Superintendent: The chief executive officer of a Department of Correction institution.

Temporary Immobilization Strap: Restraint device used to temporarily immobilize an area for the purpose of safely administering medication by injection.

Thigh Strap: A Fifth Point of Restraint applied over an individual's thigh used in combination with Four-Point Restraint when four points of restraint are deemed insufficient by the Officer in Charge/Team Leader.

Transition Restraint: Restraint device used to transition an inmate from one (1) restraint system to another.

Waist Chains: Wrist restraints attached to a chain applied around an individual's waist used to increase officer and inmate safety in courtroom, transport, and other situations where greater security is required.

Wrist Restraints: A pair of lockable linked metal rings for securing an individual's wrist(s).

520.02

PHILOSOPHY

It is the Department's philosophy to train employees to use instruments of restraint in the performance of their daily duties, which may include but shall not be limited to routine movement, emergency situations, and transportation.

520.03

AUTHORIZATION & APPROVALS

- A. Only Instruments of Restraint approved by the Commissioner and issued by the Department shall be used.
- B. Gags are not authorized as Instruments of Restraint and their use is in violation of 103 CMR 505, *Use of Force*.
- C. Pregnancy
 - 1. The use of restraints on pregnant and post-partum inmates shall be governed by M.G.L., c. 127, §118, 103 DOC 521, *Outside Hospital Security Procedures* and 103 DOC 530, *Inmate Transportation*. Leg Restraints, Four-Point Restraints, and Waist Chains shall not be used on an inmate who is pregnant or in post-partum recuperation, as determined by a licensed health care professional. Wrist Restraints may be applied in front during transport back to the institution.
 - 2. During the first, second and third trimester, only Wrist Restraints in the front may be applied.
 - 3. If the attending licensed health care professional treating a pregnant inmate, requests that restraints be removed for medical reasons, Department employees shall immediately remove all restraints. The Superintendent shall be notified via the Shift Commander via the fastest means available.

4. An inmate who is in any stage of labor or delivery as determined by a licensed health care professional shall not be restrained at any time, including during transportation.
- D. An inmate in post-delivery recuperation shall not be placed in restraints, except under extraordinary circumstances as set forth in M.G.L. c. 127 § 118.
 - E. The Shift Commander may authorize the use of Instruments of Restraint for up to two (2) hours but must contact the Superintendent/designee as soon as possible to gain documented approval for continued use of Instruments of Restraint beyond two (2) hours. This section shall not apply when transporting inmates outside of the institution.
 - F. The Superintendent/designee may authorize the use of Instruments of Restraint for up to eight (8) hours but must contact the responsible Assistant Deputy Commissioner of the Northern or Southern Sector/designee before the expiration of the initial eight (8) hour interval and obtain written documented approval for continued use of Instruments of Restraint beyond the initial eight (8) hours.
 1. The Superintendent/designee shall be required to obtain written documented approval for the continued use of Instruments of Restraint before each subsequent eight (8) hour interval. This section shall not apply when transporting inmates outside of the institution.
 - G. Spit hoods are permitted and may be applied at the direction of a Team Leader/OIC based upon an inmate's prior documented behavior, threats to assault staff with bodily fluids, and/or present behavior.
 - H. Inmates in the Lemuel Shattuck Hospital Holding Area for outpatient appointments shall remain in Instruments of Restraint (waist chains and leg restraints) while in the holding cells and shall not require any additional approvals/authorizations/examinations to remain in Instruments of Restraint beyond two (2) hours. Security staff shall conduct and document 15-minute checks of these inmates.
 1. These Instruments of Restraint may be adjusted or removed if medically necessary and approved by the Superintendent/designee.
 2. During feeding times, all inmates shall have one (1) arm unrestrained to eat.
 3. All inmates shall remain restrained during medical appointments regardless of security level unless approved by the Superintendent/designee.

520.04

USE OF INSTRUMENTS OF RESTRAINT

- A. Instruments of Restraint shall not be used as punishment.
- B. Inmates shall never be instructed to kneel by Department employees, except when necessary to apply/remove Instruments of Restraint, and only for such time as is needed to apply/remove said Instruments of Restraint.
- C. Instruments of Restraint shall only be used by employees trained in their proper use. Such training shall be documented in the employee's training file as maintained by the Division of Staff Development (DSD).
- D. Inmates in Department-issued Instruments of Restraint shall remain under constant observation by Department employees.
- E. The application and type(s) of Instruments of Restraint shall be based upon the totality of the circumstances.
- F. The use of Instruments of Restraint shall be limited to five (5) points of restraint or fewer, except in circumstances where intra-muscular medication is being administered, in which case a temporary immobilization strap applied to a thigh is required.
- G. At no time shall wrist restraints, flex cuffs, soft restraints, black box, connector chains, paddle restraints, or waist chains be connected to leg restraints.
- H. Instruments of Restraint shall only be used until the restrained inmate has exhibited through actions or statements that the inmate will not resume the conduct which resulted in the decision to use Instruments of Restraint unless an Emergency exists requiring the continued use of restraints. This includes inmates who voluntarily comply with being restrained.
 - 1. The Superintendent/designee shall review all inmates in continuous Instruments of Restraint every twenty-four (24) hours to determine if the continued use of Instruments of Restraint is necessary. Such reviews shall be documented in writing.

Instruments of Restraint approved beyond twenty-four (24) hours shall require a written notification to the respective Assistant Deputy Commissioner of the Northern or Southern Sector.

520.05

INVENTORY AND INSPECTION

Inventory and inspection of Instruments of Restraint equipment shall be conducted in accordance with 103 DOC 507, *Security Equipment*.

520.06

SUPERVISORY INVENTORIES

Supervisory inventories and inspections of Instruments of Restraint equipment shall be conducted in accordance with 103 DOC 507, *Security Equipment*.

520.07

AUTHORIZED USE AND TYPES OF RESTRAINT EQUIPMENT

The following types of Instruments of Restraint equipment are most suited for the needs of the Department, any other types or styles of Instruments of Restraint not mentioned in this policy shall require the written approval of the Commissioner. All Instruments of Restraint shall be used in accordance with 103 DOC 520.04 and as trained by the Department:

- A. Wrist Restraints
- B. Leg Restraints
- C. Waist Chains
- D. Connector Chains
 - 1. Connector chains may be used under the following conditions:
 - a. A maximum of six (6) inmates can be connected at one (1) time;
 - b. The trip must originate from the same location; and
 - c. The final destination of the trip is the same for all inmates connected together.
- E. Retention Devices
 - 1. A retention device shall be used whenever employees are applying/removing Wrist Restraints through a solid/gated door or wicket, unless Exigent Circumstances exist (e.g., door is not equipped with a wicket). In the event written reports are required, such Exigent Circumstances shall be documented.
- F. Black Box System (Black Box, Wrist Restraints, Belly Chain)
 - 1. The Black Box shall be secured in front of an inmate.
 - 2. The Black Box shall be used when transporting Level A Department inmates and Federal inmates.
- G. Soft Restraints
- H. Flex Cuffs
- I. Four-Point/Humane Restraint System

NOTE: This section shall not apply to patients housed at the Bridgewater State Hospital (BSH), or patients housed in BSH Units at the Old Colony Correctional Center (OCCC). The use of Four-Point Restraints for these patients shall be governed by 103 DOC 651, *Use of Seclusion and Restraint for Bridgewater State Hospital*.

1. When the use of Four-Point Restraints has been determined clinically necessary and ordered by a Psychiatrist, the guidelines pertaining to mental health restraints set forth in 103 DOC 650, *Mental Health Services* and the Standard Operating Procedure attached to this policy shall be followed.
2. When the use of Four-Point Restraints has been authorized by the Superintendent/designee, or the Shift Commander, as allowed by 103 DOC 520.04, the respective Assistant Deputy Commissioner of the Northern or Southern Sector shall be notified by the fastest means available. In addition, the guidelines pertaining to Mental Health restraints set forth in 103 DOC 650, *Mental Health Services* and the Standard Operating Procedure attached to this policy shall be followed, with the following stipulations:
 - a. Prior to placing the inmate in Four-Point Restraints, a Qualified Mental Health/Medical Professional shall complete the Restraint Mental Health Contraindications Form (Attachment #1). This form shall also be completed by a Qualified Mental Health/Medical Professional every eight (8) hours as long as the inmate remains in four-point restraints. This form may also be completed and submitted electronically where available.
 - b. Prior to placing the inmate in Four-Point Restraints, the Medical Provider/designee shall complete the Four-Point Restraint Medical Contraindications Form (Attachment #2). This form may also be completed and submitted electronically where available.
 - c. The Medical Provider/designee shall be responsible for completing the Four-Point Restraint Medical Examination Checklist (Attachment #3) as long as the inmate remains in Four-Point Restraints.
 - d. An employee, as designated by the Shift Commander, shall complete the Observation Check Sheet, Attachment #8 to the 103 DOC 650, *Mental Health Services policy*, as long as the inmate remains in Four-Point Restraints.
 - e. The Superintendent/designee shall be responsible for reviewing/renewing the authorization for continued use of

Four-Point Restraints every two (2) hours. Such reviews/renewals shall be documented in writing.

3. The Humane Restraint System shall only be used with the approved mattress and bed combination system in accordance with 103 DOC 507, *Security Equipment*.
4. A Transition Restraint is authorized for use during placement into any Four-Point Restraint system that is authorized by the Commissioner.
5. When the Humane Restraint System is used to administer intramuscular medication, the temporary immobilization strap shall be used.
6. When the use of Four-Point Restraints is ordered as medically necessary by outside hospital personnel, all determinations of care are the responsibility of the ordering provider as delineated in the policies of the hospital. Department employees assigned to the detail shall notify the Shift Commander of their respective institution as soon as possible and make appropriate entries in the outside hospital detail log. The Shift Commander shall notify their respective Superintendent/Division Head or designee, who shall then notify the responsible Assistant Deputy Commissioner of the Northern or Southern Sector/designee. Such notifications shall be made within two (2) hours of an inmate being placed in Four-Point Restraints and shall be documented in incident report(s) by Department employees. Provided the inmate is compliant, such incidents shall not be considered a use of force; however, any resistance to the application of Four-Point Restraints by Department employees, medically necessary or otherwise, shall be considered a use of force and reported as such in accordance with 103 CMR 505, *Use of Force*, specifically 505.18.
7. All applications of Four-Point Restraints by Department employees when a use of force has not occurred shall be reviewed by the Superintendent/designee. This review shall include but not be limited to the OIC/Team Leader's incident report; notification documentation; applicable attachments; and recorded video.
 - a. The video review shall be completed within three (3) calendar days from the application of Four-Point Restraints.
 - b. The complete review of the application of Four-Point Restraints shall be completed within ten (10) calendar days.
 - c. All reviews shall be documented in writing and a copy sent to the respective Assistant Deputy Commissioner of the Northern or Southern Sector.

- J. Paddle Restraints/Hand Kuzis
- K. Spit Hoods
- L. Restart Chair
- M. Restart Table

520.08 **SANITATION OF RESTRAINT EQUIPMENT**

Sanitation of Instruments of Restraint equipment shall be conducted in accordance with 103 DOC 507, *Security Equipment*.

520.09 **USE OF FORCE, ESCORTS, AND RESTRAINT EQUIPMENT**

- A. The use of Instruments of Restraint shall not be considered a use of force, unless force is required by an employee to apply said restraints, in which case the application of restraints shall be reported as such in accordance with 103 CMR 505, *Use of Force*.
- B. After a use of force, employees shall escort restrained inmates in the following manner as trained by the Department; unless Exigent Circumstances exist (such circumstances shall be documented in accordance with 103 CMR 505, *Use of Force*):
 - 1. Inmates who voluntarily comply with an escort shall be placed in Instruments of Restraint and escorted via hands on escort by two (2) employees each securing the inmate’s elbows and hands/wrists in a “C-clamp.”
 - 2. Inmates who refuse to voluntarily comply with an escort (e.g., refuses to stand, refuses to walk) shall be transported via a four-person carry (one (1) employee per limb), wheelchair, stair chair, or gurney. It is noted the use of a gurney is the preferred method of transport for a non-compliant inmate to increase safety for all involved.
 - a. A four-person carry shall be considered a use of force and shall be reported as such in accordance with 103 CMR 505, *Use of Force*.
 - b. The act of lifting an inmate, four-person or otherwise, onto a wheelchair, stair chair, gurney, or bed shall not be considered a use of force, unless the inmate physically resists.
 - 3. Inmates shall never be dragged unless there is an emergency in which failing to remove an inmate from an area would reasonably result in significant injury or loss of life. Such circumstances shall

be documented via an incident report. A drag for the purpose of life saving measures shall not be considered a use of force.

520.10

EXTRA RESTRAINT STATUS FOR POTENTIALLY VIOLENT/ ASSAULTIVE BAU/SAU INMATES

- A. In the event an inmate is deemed a risk to the unit, staff, and/or themselves due to the inmate's behavior, extra restraints may be authorized by the Superintendent or designee (Attachment #4). Authorized extra restraints shall be noted in the "Other Restrictions" field on the BAU/SAU Inmate Information screen.
 - 1. Any movement outside of the cell by an inmate placed on extra restraint status shall be in waist chains and leg restraints.
 - 2. An inmate on extra restraint status shall exercise alone and remain in restraints for the entire exercise period.
 - 3. The status of any inmate placed on extra restraints shall be reviewed every three (3) days by the Superintendent or designee for the continued need to utilize extra restraints. Each Superintendent shall develop a mechanism to document (e.g., Disciplinary Report, Incident Report, etc.) the approval of extra restraint status and any subsequent reviews thereafter.

520.11

POSITIONAL ASPHYXIATION

To reduce the risk of positional asphyxiation and possible death of an inmate, the following shall be adhered to:

- A. Staff shall always maintain observation of a restrained inmate to recognize breathing difficulties or loss of consciousness.
- B. Staff shall be alert to issues such as obesity, alcohol and drug use, psychotic behavior, asthma, seizures, bronchitis, communication-related disabilities, and risk of vomiting involving a restrained inmate.
- C. In situations involving an unrestrained inmate who is resisting efforts of staff to regain control of the inmate, staff members may use their weight for only such period of time as is necessary to gain control of and/or restrain the inmate.
- D. Staff members shall never sit or put their weight on an inmate's back, chest, or abdomen once an inmate is secured in restraints.
- E. If, as a result of a use of force it becomes necessary to restrain an inmate to the ground, bed, floor, etc., the inmate, once secured in Wrist Restraints, shall, as soon as possible, be placed on their side. The inmate shall never be

kept face down on their stomach. Staff members shall make all possible efforts to avoid prolonged compression of an inmate's abdomen.

- F. Inmates shall never be transported face down on their stomach (e.g., while using a stretcher, gurney, backboard, or vehicle), unless medically indicated due to injury.
- G. Qualified Medical Professionals shall regularly monitor vital signs, breathing and circulation, hydration, mental status, oxygen saturation level, skin integrity, signs and symptoms of blood clots or aspiration, and any physical injury to the inmate in restraints.

520.12 **MENTAL HEALTH REVIEWS**

All restrained inmates shall be reviewed by Qualified Mental Health Professionals at regular intervals. Except for Four-Point Restraint as governed by 103 DOC 520.07(I), and except in Exigent Circumstances, intervals shall not be greater than eight (8) hours in duration. All mental health reviews, as well as any Exigent Circumstances pursuant to this section shall be documented in incident reports as well as via the Restraint Mental Health Contraindications Form (Attachment #1) by Qualified Mental Health/Medical Professionals. This form may also be completed and submitted electronically where available. This section also applies to inmates who willingly agreed to be restrained. This section shall not apply when transporting inmates outside of the institution.

520.13 **MEDICAL SERVICES**

- A. All restrained inmates shall be examined by Qualified Medical Professionals at regular and frequent intervals. Apart from Four-Point Restraints as governed by 103 DOC 520.07(I), and except in Exigent Circumstances, intervals shall not be greater than two (2) hours in duration. Any medical examination, as well as any Exigent Circumstances pursuant to this section shall be documented in incident report(s) by Qualified Medical Professionals, as well as in the inmate's medical file. This section shall not apply when transporting inmates outside of the institution.
- B. Inmates in Instruments of Restraint shall have access to medication unless Exigent Circumstances exist or unless clinically contraindicated. Such Exigent Circumstances shall require the Superintendent/designee to notify the respective Assistant Deputy Commissioner of the Northern or Southern Sector/designee via the fastest means available and document via an incident report prior to the end of the shift.
 - 1. The Qualified Medical Professional shall document any denied medications and reason(s) for denial via an incident report prior to the end of their shift.

- C. Inmates in restraints shall have access to meals unless Exigent Circumstances exist or unless clinically contraindicated. Such Exigent Circumstances shall require the Superintendent/designee to notify the respective Assistant Deputy Commissioner of the Northern or Southern Sector/designee via the fastest means available and document via an incident report prior to the end of the shift.
1. The Team Leader/OIC shall be responsible for documenting, via an incident, each missed meal prior to the end of their shift.
- D. Inmates in Instruments of Restraint shall have access to bathroom facilities unless Exigent Circumstances exist. Such Exigent Circumstances shall require the Superintendent/designee to notify the respective Assistant Deputy Commissioner of the Northern or Southern Sector/designee via the fastest means available and document via an incident report prior to the end of the shift. This section shall not apply to inmates in Instruments of Restraint on a constant observation for ingesting a foreign substance, in which case procedures outlined in 103 DOC 501, *Institution Security Procedures* shall be adhered to.
1. Inmates in Instruments of Restraint shall be offered an opportunity to use bathroom facilities every two (2) hours.
 - a. Staff shall be observant of inmates who have continued to refuse to use bathroom facilities and look for signs of urination or defecation.
 - b. In the event the inmate has urinated/defecated, the inmate shall be removed from Four-Point Restraints in accordance with 103 DOC 520.12(D)(2), moved to a secure location and the cell/area cleaned. The inmate shall also be offered an opportunity for a ten (10) minute shower and be provided with clean, approved attire.
 2. Inmates shall be transitioned to Waist-Chains and Leg restraints for the purpose of using bathroom facilities. At no time shall an inmate be completely unrestrained while using bathroom facilities.
 3. Inmates shall be afforded the use of bathroom facilities as determined by the Superintendent/designee (e.g., toilet, bed pan, etc.).
 4. Once the inmate has finished using bathroom facilities, the Shift Commander shall examine the need to continue the use of Instruments of Restraint. The Shift Commander shall notify the Superintendent/designee or Psychiatrist if it is determined the use of Instruments of Restraint is no longer necessary. The Superintendent/designee or Psychiatrist shall make the final determination to discontinue the use of Instruments of Restraint.

5. If the inmate becomes non-compliant at any time throughout the process to use bathroom facilities, their non-compliance shall constitute a refusal to use bathroom facilities until the next two (2) hour interval. The Shift Commander shall be notified and the Team Leader/OIC shall document the refusal of bathroom facilities via an incident report prior to the end of the shift.

520.14 **MAINTAINING RECORDS**

- A. Maintenance of records pertaining to Instruments of Restraint equipment shall be conducted in accordance with 103 DOC 507, *Security Equipment*.
- B. All uses of Instruments of Restraint involving a use of force shall be reported in accordance with 103 CMR 505, *Use of Force*.

520.15 **ARMORY OPERATIONS**

Armory operations pertaining to Instruments of Restraint equipment shall be conducted in accordance with 103 DOC 507, *Security Equipment*.

520.16 **DAMAGED/INOPERABLE EQUIPMENT**

Damaged/inoperable Instruments of Restraint shall be handled in accordance with 103 DOC 507, *Security Equipment*.

520.17 **TRAINING**

- A. Employees who attend the recruit training program in accordance with 103 DOC 216, *Training and Staff Development* shall receive standardized restraint training. Such training shall be documented in each employee's training record as maintained by the Division of Staff Development.
- B. Employees shall receive refresher Instruments of Restraint training as determined by the Director of Staff Development.

520.18 **EMERGENCIES**

Whenever, in the opinion of the Commissioner, the Deputy Commissioner or the Superintendent of a state correctional institution, an emergency exists which requires the suspension of all or parts of this policy, the Superintendent may order such a suspension except that any such suspension lasting beyond forty-eight (48) hours shall be authorized by the Commissioner.

Restraint Mental Health Contraindications Form

Institution: _____ **UOF # (if applicable):** _____

Inmate Name: _____

Commitment #: _____

CHECK ONE:

- Initial review PRIOR to placement in Four-Point Restraint.
- Eight (8) hour review AFTER placement in Instrument of Restraint.

A Qualified Mental Health Professional has reviewed the current mental health status of the above referenced inmate.

CHECK ONE:

- This Qualified Mental Health Professional has found no apparent contraindication(s) for the continued use of Instruments of Restraint.
- This Qualified Mental Health Professional has found contraindication(s) for the use/continued use of Instruments of Restraint (Must explain in "Comments" section below).

Comments: _____

Reviewing Qualified Mental Health Professional Name (PRINT) **Title**

Signature **Date** **Time**

*****If a Qualified Mental Health Professional is unavailable, an onsite Qualified Medical Professional shall consult with the on-call Qualified Mental Health Professional regarding possible contraindications*****

Contacted Qualified Mental Health Professional's Name (PRINT) **Title** **Date** **Time**

Qualified Medical Professional Completing Form Name (PRINT) **Title**

Qualified Medical Professional Completing Form Signature **Date** **Time**

Four-Point Restraints Medical Contraindications Form

Institution: _____ **UOF # (if applicable):** _____

Inmate Name: _____

Commitment #: _____

The following is to be completed by the Medical Provider prior to securing an inmate in Four-Point Restraints. **All questions MUST be answered with a “√.”** Answering “Yes” to any of the following may constitute a contraindication for the use of Four-Point Restraints:

Yes___	No___	Does the inmate have an extremity injury, fracture, or wounds that would preclude the use of a restraint on that extremity?
Yes___	No___	Does the inmate have documentation of significant peripheral vascular disease that would preclude the use of a restraint on that extremity?
Yes___	No___	Has the inmate had a recent surgery/hospitalization that would preclude the use of restraints?
Yes___	No___	Does the inmate have significant heart disease manifested by frequent angina?
Yes___	No___	Does the inmate have recent Myocardial Infarction?
Yes___	No___	Other, please specify: _____ _____
Yes___	No___	Are there contraindications for the use of Four-Point Restraint? If “No,” and any line above has been answered “Yes,” please explain: _____ _____

Qualified Medical Professional Completing Form Name (PRINT) (If MD/NP/PA, Leave Blank)

Reviewing Qualified Medical Professional’s Name (MD/NP/PA) (PRINT)

Qualified Medical Professional Signature (MD/NP/PA) **Date** **Time**

Four-Point Restraints Medical Examination Checklist

Institution: _____ **UOF # (if applicable):** _____

Inmate Name: _____

Commitment #: _____

Ordered By (Print Name): _____

Date Restraints Applied: _____ **Time Restraints Applied:** _____

Date Restraints Removed: _____ **Time Restraints Removed:** _____

Time	Qualified Medical Professional Conducting Check	Extremity Circulation Checked, Pulse Present, Movement Adequate	Medical Professional Initials

***** Except in unusual circumstances, the first restraint check shall occur within fifteen (15) minutes of the inmate being secured in Four-Point Restraints. All subsequent restraint checks shall be conducted at intervals not to exceed fifteen (15) minutes in duration. Vital signs shall be taken at each thirty (30) minute interval. *****

**Commonwealth of Massachusetts
Department of Correction
Extra Restraint Status Request**

Institution: _____

Inmate Name	Number	Date	Time

Requested By: _____

Shift Commander Review: _____

Reason for Request: _____

Approved: _____

Superintendent/Designee

Date

Denied: _____

Superintendent/Designee

Date

Day	Date	Comments on Behavior	OIC Review
1			
2			
3			

If after three (3) days the inmate’s behavior does not improve an additional three (3) day request must be submitted.

Authorization for Removal:

Approved: _____

Superintendent/Designee

Date

Uploaded to IMS and retained upon completion.