

Emergency Use of Manual Restraints Policy and Procedure for Intensive and Basic Services

Policy

Lifeworks Services, Inc. does not allow the emergency use of manual restraints.

It is Lifeworks Services, Inc. policy to promote the rights of persons served and protect their health and safety without emergency use of a manual restraint by using appropriate and safe interventions when addressing behavioral situations as needed. This policy follows MN Statutes 245D and MN Rules 9544 regarding Positive Support.

Emergency use of manual restraint means using a manual restraint when a person poses an imminent risk of physical harm to self or others, and it is the least restrictive intervention that would achieve safety. Property damage, verbal aggression, or a person's refusal to receive or participate in treatment or programming on their own, do not constitute an emergency.

Procedure:

Lifeworks staff will be provided instructions on prohibited procedures prior to having unsupervised direct contact with the person served. Staff will have orientation and annual training on emergency use of manual restraint as required by MN Statutes 245D.09.



Positive Support Strategies and Techniques:

A. The following positive support strategies and techniques may be used in an attempt to de-escalate the person's behavior before it poses an imminent risk of physical harm to self or others:

- 1. Following the persons individualized strategies in a person's Support Plan (SP), Support Plan Addendum and positive support transition plan (if applicable).
- 2. Shift the focus by verbally redirecting the person to a desired alternative activity, offer other choices, simplify the task or routine or discontinue until the person is calm and agrees to participate, create a calm environment by reducing sound, lights, and other factors that may agitate a person, and/or respect the person's need for physical space and privacy; and/or
- **3.** Model desired behavior, reinforce appropriate behavior, actively listen to a person, and validate their feelings, use positive verbal guidance and feedback, speak calmly with reassuring words, consider volume, tone, and non-verbal communication, and/or use positive verbal guidance and feedback.

Permitted Actions and Procedures:

- 1. Use of the following instructional techniques and intervention procedures used on an intermittent or continuous basis are permitted. When used on a continuous basis, it must be addressed in a person's Support Plan Addendum.
- 2. Positive verbal correction that is specifically focused on the behavior being addressed.
- **3.** Temporary withholding or removal of objects being used to hurt self or others, the equipment or device must be returned to the person as soon as imminent risk of injury or serious damage has passed.
- **4.** Physical contact or instructional techniques must use the least restrictive alternative possible to meet the needs of the person and may be used to:



- i. Calm or comfort a person by holding that person with no resistance from that person;
- **ii.** protect a person known to be at risk or injury due to frequent falls as a result of a medical condition;
- **iii.** facilitate the person's completion of a task or response when the person does not resist, or the person's resistance is minimal in intensity and duration;
- **iv.** block or redirect a person's limbs or body without holding the person or limiting the person's movement to interrupt the person's behavior that may result in injury to self or others with less than 60 seconds of physical contact by staff; or
- v. re-direct a person's behavior when the behavior does not pose a serious threat to the person or others and the behavior is effectively redirected with less than 60 seconds of physical contact by staff.
- **5.** Voluntary time out or voluntary removal of or self-removal for the purposes of calming, prevention of escalation or de-escalation of a behavior is allowed. Voluntary time out or separation from the situation or social contact means without being forced, compelled, or coerced.
- **6.** Restraints may be used as an intervention procedure to:
 - i. Allow a licensed health care professional to safely conduct a medical examination or to provide medical treatment ordered by a licensed health care professional;
 - ii. assist in the safe evacuation or redirection of a person in the event of an emergency and the person is at imminent risk of harm; or
 - iii. position a person with physical disabilities in a manner specified in their Support Plan Addendum. All manual restraints allowed must comply with the section titled *Restrictions When Implementing Emergency Use of Manual Restraint* below



7. Use of adaptive aids or equipment, orthotic devices, or other medical equipment ordered by a licensed health professional to treat a diagnosed medical condition do not in and of themselves constitute the use of mechanical restraint.

Prohibited Actions and Procedures:

A. Prohibited Actions and Procedures:

- 1. Lifeworks Services, Inc. and its staff are prohibited from using chemical restraints, mechanical restraints, manual restraints, time out, seclusion, or any other aversive or deprivation procedures as a substitute for adequate staffing, for a behavioral or therapeutic program to reduce or eliminate behavior, as punishment, or for staff convenience.
 - following a response resulting in, or intended to result in, a decrease in the frequency, duration, or intensity of that response. Often the positive reinforcement available is goods, services, or activities to which the person is normally entitled. The removal is often in the form of a delay or postponement of the positive reinforcement; this does not include temporary withholding or removal of objects being used to hurt self or others.
 - ii. The following actions or procedures are also prohibited:
 - Using prone restraint, metal handcuffs, leg hobbles, using faradic shock;
 - speaking to a person in a manner that ridicules, demeans, threatens, or is abusive;
 - using physical intimidation or a show of force;



- containing, restricting, isolating, secluding, or otherwise removing a person from normal activities when it is medically contraindicated or without monitoring the person;
- denying or restricting a person's access to equipment and devices such as walkers, wheelchairs, hearing aids, and communication boards that facilitate the person's functioning; when the temporary removal of the equipment or device is necessary to prevent injury to the person or others or serious damage to the equipment or device, the equipment or device must be returned to the person as soon as imminent risk of injury or serious damage has passed;
- using painful techniques, including intentional infliction of pain or injury, intentional infliction of fear of pain or injury, dehumanization, and degradation;
- hyperextending or twisting a person's body parts, tripping or pushing a person;
- using punishment of any kind;
- requiring a person to assume and maintain a specified physical position or posture, using forced exercise, totally or partially restricting a person's senses;
- presenting intense sounds, lights, or other sensory stimuli;
- using a noxious smell, taste, substance, or spray, including water mist;
- depriving a person of or restricting access to normal goods and services, or requiring a person to earn normal goods and services;
- using token reinforcement programs or level programs that include a response cost or negative punishment component;
- using a person receiving services to discipline another person receiving services;
- using an action or procedure which is medically or psychologically contraindicated:



- using an action or procedure that might restrict or obstruct a person's airway or impair breathing, including techniques whereby individuals use their hands or body to place pressure on a person's head, neck, back, chest, abdomen, or joints;
- interfering with a person's legal rights, except as allowed by MN Statutes, section 245D.04(3)(c);
- mechanical & chemical restraints in accordance with MN Statutes 245D.06(5);
- manual restraints, except in an emergency in accordance with MN Statutes 245D.061; and
- using any other interventions or procedures that may constitute an aversive or deprivation procedure.

B. Lifeworks Services, Inc. does not allow the emergency use of manual

restraints. The following alternative measures must be used by staff to achieve safety when a person's conduct poses an imminent risk to self or others and less restrictive strategies have not achieved safety.

- 1. Continue to utilize the positive support strategies;
- 2. continue to follow individualized strategies in a person's support plan and support plan addendum;
- **3.** ask the person and/or others if they would like to move to another area where they may feel safer and calmer;
- **4.** remove objects from the person's immediate environment that they may use to harm self or others; and/or
- 5. call 911 and/or a crisis mental health professional for law enforcement assistance if the alternative measures listed above are ineffective in order to achieve safety for the person and/or others. While waiting for law enforcement to arrive staff will continue to offer the alternative measures



listed above if doing so does not pose a risk of harm to the person and/or others.

- **C**. Lifeworks Services Inc. will not allow the use of a manual restraint or an alternative safety procedure when it has been determined by the person's physician or mental health provider to be medically or psychologically contraindicated. An assessment of whether the allowed procedures are contraindicated for each person receiving services as part of the initial service planning are required under section 245D.071, subdivision
- **D**. The program will develop a positive support transition plan on the forms and in manner prescribed by the Commissioner and within the required timelines for each person served when required in order to:
 - 1. Eliminate the use of prohibited procedures as identified in this policy;
 - 2. Avoid the emergency use of manual restraint as identified in this policy;
 - 3. Prevent the person from physically harming self or others; or
 - **4.** Phase out any existing plans for the emergency or programmatic use of restrictive intervention procedures.

Reporting Emergency Use of Manual Restraint:

As stated in **prohibited procedures** above, this program does not allow the emergency use of manual restraint. Any staff person who believes or knows that a manual restraint was implemented during an emergency must report the incident as follows:

A. Reporting Emergency Use of Manual Restraint:

1. Within 24 hours of an emergency use of manual restraint, a Lifeworks incident form needs to be filled out and the service coordinator (for Basic Services) needs to be notified within 24 hours of the incident. The legal representative and the case manager must receive verbal notification of the



- occurrence as required under the incident response and reporting requirements in the MN Statute 245D.06, subdivision 1 within 24 hours of an emergency use of a manual restraint.
- 2. When the emergency use of manual restraint involves more than one person receiving services, the incident report made to the legal representative and the case manager must not disclose personally identifiable information about any other person unless the program has the consent of the person.
- **3.** When an incident tracking form is set to complete:
 - **a.** *For Basic Services*: The Service Coordinator will notify the compliance committee by sending an email to the Incident Review Committee.
 - **b.** For Intensive Services: an automatic email will be sent to the designated coordinator to notify them of the incident as well as the compliance committee.
- **4.** A copy of the report will be maintained in the record of the person served in CRM or file.
- **5.** Each single incident of emergency use of manual restraint must be reported separately.
- **6.** Emergency use of manual restraints are reviewed by a Lifeworks Health and Safety committee member and follow reporting requirements