



## ROI Use of Personal Restraint in Emergency Situations

**Rationale:** ROI complies with the Michigan Mental Health Code (MMHC), Adult Foster Care Licensing (AFC), Child Care Institution Licensing (CCI – to include Public Act 116, rule 722.112), Kalamazoo Community Health and Substance Abuse (KCMHSAS) and other funding source mandates, policies, and procedures regarding behavior management and personal restraint. We utilize the entities' policies as our own. We support the philosophies of a proactive and positive approach to challenging behaviors. This policy compliments the relevant mandates and provides conditions under which ROI staff may need to act to protect themselves or others. It is recognized that when this occurs, the staff member is no longer operating under a positive behavior support plan – but rather responding in an emergency situation.

**Policy:** Only in the presence of an emergency safety situation (see definition #1) are ROI staff authorized to utilize approved personal restraint (see definition #2) techniques to protect the individuals, the staff, or the community at large. ROI program staff may not impose personal restraint as a means of coercion, discipline, convenience, or retaliation.

### **Procedures:**

1. ROI employees will adhere to all mandates regarding behavior treatment and management.
  - ROI staff will utilize proactive and positive approaches to improve the social, behavioral, and emotional functioning of the individuals served by ROI's programs and services.
  - If procedures are required that are restrictive or intrusive, ROI will follow all federal, state and local regulation, policies and procedures related to behavior plan development, approval, and implementation.
2. ROI staff will receive training regarding individual behavior plans.
  - Staff will be expected to implement the plans as written
  - Staff will provide documentation as required by the plan, the funder, or relevant regulation.
  - Staff will provide feedback through appropriate means.
3. Staff working in locations and programs where personal restraint may be necessary will be trained in approved non-physical intervention and personal restraint techniques. Programs and/or staff exempt from this training will be approved by the Chief Operating Officer in consultation with the Clinical and Program Directors.
  - Staff retraining will occur as needed and/or required.
4. Staff may utilize only the amount of personal restraint necessary to manage the emergency safety situation.
5. Staff may utilize personal restraint only for the duration necessary to prevent harm during an emergency safety situation.
6. Staff is not authorized to utilize personal restraint to punish behavior or in the absence of an emergency safety situation.
  - Staff will receive training regarding the definitions of violence, serious injury, and imminent danger during their physical and non-physical intervention and personal restraint training or more often as relevant.



7. ROI staff members are responsible for communicating their concerns regarding behavior management to their supervisors. While not an inclusive list, this may include such communication as
  - a. Completion of an Incident/Accident Report
  - b. Verbal Notification of new or unusual observations
  - c. Suggestions for improvement
  - d. Concerns regarding the integrity of implementation of the plan by other staff members

### ***Definition of an Emergency:***

An emergency situation exists under any one or more of the following circumstances:

- The existing behavior plan is not effective,
- There is no current behavior plan that addresses the behavior occurring
- The individual displays a novel or new behavior for which there is no identified approach
- The target behavior(s) identified in the behavior plan escalates beyond the scope of the behavior plan
- There is a real or assumed fire emergency

**AND** any one or more of the follow **ALSO** exists:

- There is an imminent danger, health, harm, or safety risk to the individual
- There is an imminent risk of danger, health, harm, or safety risk to others (including staff and community)
- The individual refuses to cooperate with assistance to exit or move to safety during a real fire, tornado, bomb, weapon, chemical or other environmental or societal emergency.

### ***Post Physical Intervention Activities\*\*:***

1. Staff will complete an incident report and a physical intervention report each time personal restraint is utilized.
2. Staff will assess the individual for injury or harm and seek medical attention as necessary.
3. The Program Coordinator and Program Director will be notified, and when appropriate, the ROI on-call staff will be contacted.
4. The Program Coordinator will inform the Support Team of the incident and a determination for follow up will be made.

**As a program of ROI, staff of the Great Lakes Center is to fully comply with all of the inter-program procedures identified by that specific location; as well as all provisions of this policy**

Definition #1

“Emergency safety situation” means the onset of an unanticipated, severely aggressive, or destructive behavior that places the minor child or others at serious threat of violence or injury if no intervention occurs and that calls for an emergency safety intervention.

Definition #2

"Personal restraint" means the application of physical force without the use of a device, for the purpose of restraining the free movement of an individual's body. Personal restraint does not include:

- (i) The use of a protective or adaptive device.
- (ii) Briefly holding an individual without undue force in order to calm or comfort him or her.
- (iii) Holding an individual's hand, wrist, shoulder, or arm to safely escort him or her from 1 area to another.
- (iv) The use of a protective or adaptive device or a device primarily intended to provide anatomical support.
- (v) The assistive use of physical prompting during a positive approach to teaching skill acquisition.

**I have received and reviewed a written copy of the Great Lakes Center (GLC) Restraint and Seclusion Policies and Procedures. GLC provided any and all reasonable assistance that I requested during my review of these policies. I fully understand the policies and process as outlined in the document.**

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Printed name of recipient of policies

Signature and date

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Printed name of Witness

Signature and date

