
	PROBATION DEPARTMENT JUVENILE HALL	Part: 05	Section: 5.01
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PROCEDURES MANUAL		Revised:	
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SUBJECT: USE OF FORCE

I. Policy and Purpose

- A. Juvenile Hall staff shall only use that degree of force that is objectively reasonable (see below).
- B. Absent exigent circumstances, Group Counselors shall attempt to gain voluntary compliance through the use of crisis diffusion techniques before resorting to the use of physical force.
- C. Group Counselors who use physical force to retaliate against or punish a youth will be disciplined accordingly. Verbal abuse of a Group Counselor by a youth is not justification for use of physical force.
- D. Nothing in this section shall supersede what is outlined in Section 5.02, Use of Mechanical Restraints or Section 5.04, Room Removal.
- E. This section establishes uniform guidelines for the use of crisis diffusion techniques as well as physical force and restraints.

II. Definitions

- A. **Force** - The power to influence, direct or control another.
 - 1. **Non-Physical Force** - The use of verbal and non-verbal interpersonal skills to affect and influence persons, (e.g. "command presence" as well as the giving of commands and directions). These skills incorporate, among other things, voice tone, facial expression and body language.
 - 2. **Physical Force** - Any physical contact, coupled with exertion of strength, weight or power, deliberately made by one person toward another person in a confrontational situation to control that person's behavior or to enforce an order.
 - 3. **Use of Force** - The use of non-physical and/or physical force noted above, with physical force limited to departmentally approved defensive tactic techniques, (see below) absent exigent circumstances.
- B. **Command Presence** - The impact of one's presence on others.
- C. **Crisis Diffusion Techniques**
 - 1. The use of interpersonal communication skills, directions and commands to attempt

and psychological symptoms and signs which likely include some or all of the following:

- a. Clenched jaw,
 - b. Heavy, deep breathing,
 - c. Inability to sit or stand still,
 - d. Active adrenal glands,
 - e. Intense staring,
 - f. Sweating,
 - g. Inability to hear (youth will begin to "shut down" and is no longer listening).
3. Crisis - This is the fight/flight moment. A youth will fight or flee.
 4. Recovery - In this phase, the components of the escalation phase reverse. A youth begins to calm down and regain composure. This may take an indeterminate period of time.
 5. Post-Crisis Depression - In this phase, a youth is open to therapy and may commit to positive change (behavior modification). A youth may demonstrate the following characteristics:
 - a. Willingness to talk,
 - b. Remorse,
 - c. Crying,
 - d. Suicidal tendencies,
 - e. Visible tiredness/sleepiness.

B. Crisis Diffusion Techniques

1. Prevention - it is important for staff to identify a youth triggers early so as to better de-escalate the situation. They include, but are not limited to the following:
 - a. Group Counselors should provide an avenue for the youth to talk.
 - i. Group Counselors should talk to the youth while practicing active and effective listening skills.
 - ii. Group Counselors should speak in a calm voice, slowing down their speech and keeping the pitch and volume of their voice down to normal levels, modeling the behavior of speech they would like the youth to follow.
 - iii. Group Counselors should allow the youth to speak; don't tell them to "be quiet" or "shut up," or talk while they are speaking, instead allow them to feel heard.
 - iv. Group Counselors should refrain from becoming escalated themselves. If they find themselves becoming agitated they should try techniques like taking a deep breath or taking a time-out themselves and asking a co-worker to step in.
 - v. Sometimes a youth will ask for some small amount of time to regain their composure. Group Counselors should respect youth's need for more personal space in these crisis situations while still standing by for when they may be ready to talk.

acting aggressively or dangerously. Group Counselors should maintain both supportive and assertive postures.

a. Supportive Postures

- i. Eye contact - Group Counselors should focus on youth's face/eyes, natural blinking,
- ii. Physical size/proximity - Group Counselors should be conscious of their size relative to the youth's so as not to be too close (or far) nor intimidating,
- iii. Rate of speech - Group Counselors should slow down their rate of speech,
- iv. "Feeling Terms" - Group Counselors should use feeling terms, i.e. "You seem to be angry/upset/sad. What's going on?"
- v. Listen to and encourage minor - Group Counselors should encourage the youth (by nodding the head where appropriate and maintaining a concerned demeanor) and engaging in active listening.
- vi. Suggest positive alternatives - Group Counselors should let the youth know what they would like to see happen. They should not talk in terms of "Why."

b. Assertive Postures

- i. Ethical Presence - Group Counselors should maintain an authoritative demeanor (their command presence) without being mean, at all times. Group Counselors must be firm and fair.
- ii. Voice - Group Counselors should speak in a calm, firm, direct voice.
- iii. Consequences - Group Counselors should speak in terms of consequences, not threats. Group Counselors should be sure to follow through.
- iv. Stay on topic - Group Counselors should maintain a non-defensive posture on unrelated topics (as the youth will try to stray off-topic). Instead, Group Counselors should restate their behavioral expectations and stay on topic.
- v. Set limits - Group Counselors should set firm, enforceable limits. Group Counselors should be clear, direct and intentional with regard to steering youth's behavior/energy.
- vi. Act - Group Counselors should have a response plan of action to non-compliant behavior(s).

C. Identifying Dangerous Behavior - Once it has become clear the youth will not respond to any of the crisis diffusion techniques noted above, they may engage in any one or combination of the following behaviors:

1. Focused verbal attack,
2. Deliberate/blatant defiance,
3. Invading the personal space of a Group Counselor (or another youth),
4. Getting up without permission,
5. Clenching fists,

2. Absent exigent circumstances, Group Counselors shall not initiate defensive tactic techniques without another Group Counselors present, (i.e. next to them). (See Section 5.04, Room Removal).
 - a. In cases when emergency response is needed due to a life-threatening situation, support Group Counselors must still be alerted prior to physical intervention.
 - b. Exception: With regard to self-defense, Group Counselors may use the reasonable force necessary to protect themselves under the circumstances, which may include restraint, yet must also alert support Group Counselors as soon as physically possible.
3. Group Counselors must continue to attempt to de-escalate the situation if possible and in any case, must refrain from any verbal comments or other actions that may escalate the situation or otherwise prevent it from being controlled.
4. **Absent exigent circumstances, Group Counselors must offer the youth the opportunity to be handcuffed and escorted to Receiving.**
5. No covering may be placed over the head or mouth of a person, with the exception of medically prescribed surgical masks to prevent the spread of airborne diseases and spit guards for persons who spit.
6. Alternatively, Juvenile Hall Group Counselors shall use the personal protective equipment provided by the Department for protection against a youth who is spitting or biting.
7. Absent exigent circumstances, a youth shall not be physically restrained into their housing unit room.
 - a. Instead, when removing a youth from a housing unit, Group Counselors shall initiate a "Hold All Movements" call to the Control Desk and the youth shall be escorted in mechanical restraints to the Receiving area.
 - b. This policy shall be followed unless exigent circumstances exist, such as a major fight or disturbance in a housing unit that requires more separation rooms than are available.
8. If a youth is non-compliant, the youth will remain in the unit, prone until they becomes compliant or until the On-Duty SGC decides a youth may be removed from the unit.
9. Chemical agents are only permissible for use by Group Counselors when conducting transports of the youth. See Section 9.11, Transportation of Minors.
10. If a youth is known to be pregnant, Group Counselors shall take the youth's condition into account when utilizing reasonable force, considering legitimate safety needs of the youth, Group Counselors, and the facility. Under no circumstances should chemical agents be used on a pregnant youth. Should a pregnant youth's behavior escalate to such levels that require physical intervention, Group Counselors should use a standing control hold when possible. Youth known to be pregnant shall be handcuffed with their hands to the front.

C. **Departmentally Approved Force Techniques**

1. Physical presence
2. Non-verbal indicators or directives
3. Verbal commands

- b. Evaluate for prevention of positional asphyxia:
 - i. If at any time a youth must be taken to the ground and placed in a prone position, as soon as the youth is compliant, they are to be turned on their side.
 - ii. Avoid placing pressure with a knee or any other body part below the minor's shoulder blade for any sustained period.
 - iii. A youth who exhibits any signs of breathing difficulty or other signs of distress shall be immediately assessed by medical staff.
 - c. Medical clinic staff must see all youth after the use of physical force.
 - i. Group Counselors must ensure that any youth who was injured receives medical attention immediately.
 - ii. Further, if a Group Counselors is injured during an incident, they must also seek medical attention as soon as practical.
 - iii. These injuries shall be reported to the SGC.
2. If, due to exigent circumstances, use of physical force is necessary prior to the arrival of a Supervisor or another Group Counselor:
- a. They shall defend themselves if attacked;
 - b. If the attack continues, the Group Counselor shall evade attack and maintain their safety, securing their position until assistance arrives.
 - c. If the Group Counselor is able to defuse the situation and is able to secure the youth in a control hold until assistance arrives, the Group Counselor should use only the appropriate level of force based on circumstances;
 - d. Thereafter, Group Counselors shall maintain control of the person until assistance arrives at the scene;
 - f. Group Counselors shall verbally notify the On-Duty SGC about the incident and circumstances as soon as practical.

B. Documenting Use of Physical Force

When physical force has been used, all Group Counselors involved shall be responsible for documenting the force used on an Incident Report that shall be submitted to the On-Duty SGC no later than the end of shift, absent exigent circumstances, or as otherwise authorized by the On-Duty SGC.

- 1. Accurately document on an Incident Report the use of physical force.
 - a. Group Counselors shall describe the specific circumstances leading up to the use of physical force, (i.e. the verbal and/or physical behavior of the youth immediately prior to the incident).
 - b. Group Counselors shall describe the names of involved Group Counselors, (i.e. all Group Counselors witnesses and participants in the incident).
 - c. Group Counselors will include all commands given by Group Counselors to the youth that they heard.
 - d. Group Counselors will describe all physical control holds that they used to control the youth. Group Counselors will also describe other Group Counselors actions observed. Include the level of resistance exhibited by the

evaluate the youth before they are cleared to return to the unit.

D. Manager Responsibilities

When physical force has been used, the Manager shall:

1. Review all completed reports of the incident.
2. Verify compliance with existing policy and procedure.
3. Review any video documentation made of the incident.
4. Identify any apparent inconsistencies that appear between the reports, and other evidence.
5. Notify the Deputy Chief of Juvenile Institutions in cases where major injuries occurred to youth and/or Group Counselors.

VI. Medical Attention

- A. Whenever physical or mechanical restraints are used, medical staff is to examine the youth.
- B. Medical staff shall immediately be notified should any injury occur to a Group Counselor, or other person, as a result of the use of physical force or mechanical restraints.

VII. Discipline For Improper Use Of Physical Force

- A. Employees who violate these procedures are subject to disciplinary action.
- B. Employees who observe a violation shall take immediate action to verbally stop the incident, and report it to an SGC or Juvenile Hall Probation Manager.
- C. Employees who fail to report such violations are subject to disciplinary action.
- D. Violations will be investigated, and reported to the Chief of Probation.