	DIVISION OF CHILD AND FAMILY SERVICES Juvenile Justice Services STATEWIDE INSTITUTIONAL POLICY
SUBJECT:	Use of Force
POLICY NUMBER:	DCFS/JJ 300.2
EFFECTIVE DATE:	January 10, 2020
APPROVED BY: DATE:	Kathryn Roose, Deputy Administrator – Division of Child and Family Services
SUPERSEDES:	DCFS/JJ 300.2 Effective November 10, 2014
APPROVED BY: DATE:	Ross Armstrong, Administrator – Division of Child and Family Services
REFERENCES:	ACA (American Correction Association) -4-JCF-2A-29 (Use of Force) ACA-4-JCF-2A-27 (Use and Control of Chemical Agents) ACA-4-JCF-2A-30 (Critical Incident Debriefing) NAC 284.650, NRS 63.140, NRS 63.185, NRS 432B.220, NRS 62B.250 National Commission on Correctional Health Care, Standards for Health Services in Juvenile Detention and Confinement Facilities, 2015 Performance-based Standards
ATTACHMENTS:	Attachment A: Injury Body Chart Attachment B: Incident Investigation Summary Attachment C: Incident Review Team Attachment D: Shift Supervisor Report – Use of Force Information Sheet Attachment E: Isolation Log

#### I. SUMMARY

Staff in the Division of Child and Family Services (DCFS) shall utilize reasonable measures to guarantee the safety of youth in its custody and shall protect them from harm and the use of excessive force. To prevent serious injury to staff, youth, and others, only techniques that are approved by DCFS and in which the employees have received DCFS-approved training shall be used. These techniques shall be used only after attempts at de-escalation have failed and force is necessary to ensure safety in dangerous situations in which there may be harm to youth and/or others. When use of force is necessary, it will be measured and progressive in nature.

Use of force shall be used only as a last resort to ensure safety of youth, staff, or the public. Verbal de-escalation shall be utilized in every situation prior to use of force. Use of force may be necessary in situations related to:

- justifiable self-defense
- protection of youth from self-injury
- protection of others from injury (e.g. staff, other youth, visitors and vendors on property)
- prevention of significant property damage when that damage could cause a safety hazard
- prevention of escape or an escape in progress
- to subdue a riot or substantial disturbance
- to overcome the physical resistance of a youth for failing to comply with a reasonable directive by staff that results in substantial disruption of regular programming

DCFS recognizes three types of use of force: physical restraint, mechanical restraint, and chemical restraint.

No employee shall engage in spanking, shoving, pushing, kicking, striking, hitting, pinching, cuffing (hitting with an open hand), or corporal punishment of any kind. Under no circumstance is use of force justifiable as a punishment.

### II. DEFINITIONS:

- A. <u>Chemical Restraint:</u> The use of Oleoresin Capsicum aerosol spray (OC spray) which is derived from compounds found in plants in the Capsicum genus, such as chili peppers. This may include a spray bottle or a fogger that releases OC spray.
- B. <u>Child Welfare Agency</u>: The agency in the relevant jurisdiction to which reports of child abuse and neglect are made: Clark County Department of Family Services, Washoe County Human Services Agency, or DCFS Rural Region.
- C. <u>De-escalation</u>: Tactics or skills that are used during a potentially dangerous or threatening situation to prevent a youth from causing physical harm to themselves or others.
- D. <u>Excessive Force</u>: The amount of force, that when applied, is unreasonable and constitutes punishment.
- E. <u>Imminent Threat</u>: An immediate danger that must be instantly met, which cannot be guarded against by calling for assistance of others. The appearance of threatened or impending injury that would put a reasonable and prudent person to their instant defense.
- F. <u>Mandated Reporter</u>: DCFS staff are mandated reporters and must report to the appropriate child welfare agency or law enforcement agency when they know of or suspect child abuse or neglect. The report must be made within 24 hours of the suspected or witnessed abuse or neglect.
- G. <u>Mechanical Restraint</u>: The use of devices, including wrist restraints, leg restraints, or waist restraints used to limit a youth's movement or hold a youth immobile.
- H. <u>Shift Supervisor</u>: The Assistant Head Group Supervisor or the next highest ranking or most senior staff member on duty.
- I. <u>Physical Restraint</u>: The use of physical contact to limit a youth's movement or hold a youth immobile.
- J. <u>Property Damage</u>: The willful damage or destruction of property.
- K. <u>Reasonable Force</u>: The amount of force that when applied, is not excessive and is appropriate within the facts and circumstances known to the staff at the time and place, in order to defend oneself, or in the defense of others.
- L. <u>Security Equipment</u>: Equipment used in use of force/restraint including wrist restraints, waist restraints, leg restraints, OC spray.

- M. <u>Substantial Disruption of Program</u>: Occurs when a youth engages in loud, aggressive, or significantly disruptive behavior over an extended period of time despite appropriate deescalation attempts, to the extent that resources of the staff are focused on the disruptive youth which prevents the delivery of programming services to other youth, or which directs an excessive amount of supervision to that youth at the expense of adequately supervising other youth.
- N. <u>Use of Force</u>: Physical, mechanical, or chemical restraint used in instances of justifiable self-defense, protection of others, protection of property, prevention of escapes, or substantial disruption of programming. Includes physical contact or the use of equipment to control the movement of the youth. Use of force includes:
  - 1. <u>Planned Use of Force:</u> Utilized in situations that do not warrant immediate action although a response is still required. In these instances, the Superintendent or designee shall be notified for further instructions and appointed staff members may take action.
  - 2. <u>Spontaneous Use of Force</u>: Force utilized because there is an immediate threat to self and/or others which necessitates immediate action.

### III. PROCEDURES

### A. Availability:

- 1. The availability, control, and use of restraint equipment shall be the responsibility of the Superintendent or designee.
- 2. Type and quantity of restraint equipment shall be based on the needs of the facility and youth population profile and at the discretion of the facility Superintendent.

# B. Storage and accountability of security equipment:

- 1. Restraint equipment shall be stored in areas designated by the Superintendent.
- 2. The Head Group Supervisor or designee is responsible for inventory, maintenance and replacement of all restraint equipment.
- 3. At shift change, the Shift Supervisor or designee shall inventory all restraint equipment. This count shall be documented electronically or on paper.

## C. Authority:

- 1. Designated and trained staff may be authorized by the Superintendent to carry a set of wrist restraints and/or OC spray.
- 2. In an emergency, where authorization for the use of restraint is not immediately possible, staff shall use the appropriate force and document that action prior to the end of their shift.

### D. Notification:

- 1. When use of force techniques are used, the Shift Supervisor shall be immediately notified of the nature of force used, why it was used, and if any youth or staff injuries resulted.
- 2. The Shift Supervisor is responsible for notifying the Superintendent or designee as soon as practical following the receipt of the information.
- 3. The Shift Supervisor is responsible for notifying the nurse on duty.

## E. Preventing Use of Force:

- 1. Use of force shall be used as the last resort and only when necessary, after pre-emptive measures and attempts at de-escalation have failed, as outlined by this policy.
- 2. All facility staff shall be trained within 90 days of hire, and annually throughout their employment, on pre-emptive measures to avoid use of force (NRS 62B.250).

- 3. Staff will use a positive approach to build healthy relationships with youth, including trauma-informed care, effective communication, and establishing a structured, consistent environment.
- 4. Staff may prevent use of force by maintaining a professional presence at all times including:
  - a. defensive stance
  - b. dynamic movement
  - c. constant visual contact with youth
- 5. When maintaining a professional presence is insufficient, additional prevention methods shall be used including:
  - a. Verbal requests for compliance.
  - b. Reminders regarding the positive consequences for compliance.
  - c. Reminders regarding the negative consequences for noncompliance.
  - d. Requesting and providing the physical presence of the Shift Supervisor.
  - e. Using verbal de-escalation techniques aimed at assisting the youth in re-gaining self control and complying voluntarily with expectations.
  - f. Re-directing the youth away from the inappropriate behavior, moving their energy and attention towards more pro-social behavior/activity.
  - g. Using other members of the team to shift the youth's focus. This may include enlisting a staff member who may have a strong or positive relationship with the youth.

# F. <u>Determining the Need for Force</u>:

- 1. In situations <u>not</u> requiring immediate intervention, staff should consider the following:
  - a. Is it likely that the youth's inappropriate behavior will occur, continue, or escalate if the use of force is not undertaken immediately?
    - 1. How imminent is the risk?
    - 2. To what extent has the youth voluntarily ceased the behavior?
    - 3. How effective have de-escalation techniques been?
  - b. Under the circumstances existing at the time, is use of force justified and a prudent course of action?
    - 1. What might be the extent of harm that could result if the youth is not subject to a use of force now and the behavior continues or escalates?
    - 2. What is the extent of potential risk of harm to both the youth and staff by implementing use of force at this time?

## G. General Guidelines for Use of Force:

- 1. Prior authorization from the Superintendent shall be obtained to use force unless there is an emergency situation that requires immediate and decisive action, such as:
  - a. justifiable self-defense
  - b. protection of youth from self-injury
  - c. protection of others from injury (e.g. staff, other youth, visitors and vendors on property)
  - d. prevention of significant property damage when that damage could cause a safety hazard
  - e. prevention of escape or an escape in progress
  - f. to quell a riot or substantial disturbance
  - g. to overcome the physical resistance of a youth for failing to comply with a reasonable directive by staff that results in substantial disruption of regular programming

- 2. When prior authorization cannot be obtained before initiating a use of force, the incident must be reported to the Superintendent or designee no later than the end of the shift.
- 3. The amount of force used shall only be as much as is reasonably necessary to regain control of the situation and assure the safety of the youth and others. Staff will consider the age, size, gender, level of physical skill and/or disability, and other significant differences between the staff and the youth that should influence the use of force necessary.
- 4. Staff shall recognize that threat levels may escalate and de-escalate suddenly and modify the level of force appropriately for the changing situation.
- 5. Once the objective of control is achieved, staff must de-escalate to a level sufficient to maintain control.
- 6. Under no circumstance shall any staff member utilize any of the following as a means of restraining any youth:
  - a. Restricting respiration/breathing in any way. This includes using a chokehold or applying any pressure to a youth's back or chest or by physically placing a youth in a position that may cause asphyxia/suffocation. This includes placing a knee on the youth's back or chest.
  - b. Using any method that has the potential to result in a loss of consciousness or cause harm to the neck.
  - c. Use methods that result in the youth being pinned down with knees and/or ankles to their torso, head and/or neck.
  - d. Use methods of fastening together the hands and feet (i.e., hog-tie)
  - e. Slap, punch, kick, pinch or hit a youth.
  - f. Drag or lift a youth by their hair or by any type of mechanical restraint.
  - g. Enlist the assistance of a youth to help with a restraint.
  - h. Secure a youth to a fixed object.
- 7. Restraint may not be used as a punishment, to inflict pain, as a disciplinary measure or as a convenience for the staff. Neither shall staff use restraints as a means to harass or intimidate youth or gain their compliance (NRS 62B.510).
- 8. No restraint of any kind shall be allowed on a youth who is pregnant or in labor, delivering a baby or recuperating from delivery. Exceptions to this include:
  - a. If the youth presents a serious and immediate threat of self-harm -or harm to staff or others.
  - b. If the youth is determined to be a serious flight risk and the youth cannot be reasonably confined by other means.
  - c. If a youth is restrained who is in labor, delivering and recuperating from delivery, only the least restrictive restraints which are necessary for safety and security may be used.
- 9. Facility staff shall wear a body camera to record all planned and spontaneous use of force incidents continuously until the restraint is ended.
- 10. All video footage shall be noted in the Shift Supervisor Report Use of Force Information Sheet (Attachment A) and sent to the facility-designated Use of Force Investigator and Superintendent for review.
- 11. The Use of Force Investigator will complete the Incident Investigation Summary (Attachment C) to be submitted to the IRT.
- 12. All use of force video footage shall be uploaded to Alfresco or Investigations Network folder on a monthly basis for review by the State Review Team (SRT).
- 13. Video footage shall not be altered, edited or erased at any time.

## H. Physical Use of Force:

- 1. Only DCFS approved methods of physical intervention and crisis management shall be used in state facilities as outlined in the model chosen by DCFS.
- 2. While the youth is restrained:
  - a. Staff shall determine whether the restraint also qualifies as room confinement per DCFS/JJS 300.13, and if so, follow the Confinement Policy at the same time as this policy.
  - b. The head must be able to rotate freely, the airway must be unobstructed at all times, and the lungs must not be restricted by excessive pressure on the back or chest.
  - c. The situation shall be visually supervised by at least one staff other than the staff physically restraining the youth (by live video is acceptable).
  - d. Staff shall verbally and visually assess the safety of the youth being restrained including consciousness and breathing.
  - e. Once the staff has regained control, the restraint shall be ended.
- 3. The Shift Supervisor or designee shall re-assess the situation every 10 minutes to determine if the youth is ready to be released from the restraint; these checks shall be documented on the Confinement Observation and Check Form (Attachment G) per the Confinement Policy (DCFS/JJS 300.013).

### I. Mechanical Restraints:

- 1. Mechanical restraints may only be applied by staff designated by the Superintendent and properly trained in their use.
- 2. While mechanical restraints are applied:
  - a. Staff shall determine whether the restraint also qualifies as room confinement per DCFS/JJS 300.13, and if so, follow the Confinement Policy at the same time as this policy.
  - b. The staff shall check the mechanical restraints for the appropriate fit.
  - c. The situation shall be visually supervised by at least one staff other than the staff who placed the mechanical restraints (by live video is acceptable).
  - d. Staff shall verbally and visually assess the safety of the youth being restrained including consciousness and breathing.
  - e. Once the staff has ensured the safety of the youth and the situation, the restraint equipment shall be removed.
- 3. The Shift Supervisor or designee shall re-assess the situation every 10 minutes to assess continued appropriate fit, and to determine if the youth is ready to be removed from the restraints; these checks shall be documented on the Confinement Observation and Check Form (Attachment G) per the Confinement Policy (DCFS/JJS 300.013).
- 4. Staff are not authorized to leave the facility, off-duty, with any mechanical restraint equipment. All mechanical restraint equipment must be returned and logged in a designed space at the DCFS facility.

## J. Chemical Restraints/Oleoresin Capscicum (OC Spray/OC Fogger [MK9]):

- 1. Only facilities certified to use OC are permitted to have it on campus.
  - a. The Deputy Administrator of Residential Services shall provide certification for the use of OC.
  - b. Certification shall be renewed annually, and the Deputy Administrators shall consider at least the following in determining certification and/or recertification:
    - 1. Appropriate use of OC
    - 2. Appropriate response using OC
    - 3. Sufficient training on OC

- 2. Only staff that have successfully completed the an DCFS approved course of instruction for Chemical Restraint/Oleoresin Capsicum spray (OC certified) are authorized to carry and dispense OC.
- 3. OC certified staff must complete an annual refresher training regarding OC in order to continue to carry and dispense this chemical agent.
- 4. OC certified staff are authorized to carry and dispense only the OC foggers and spray issued by the DCFS facility.
- 5. OC may be used to gain and maintain control of an unsafe or potentially unsafe situation when verbal de-escalation and physical restraint techniques are not working or would be unsafe to apply.
- 6. Staff may not use OC spray or foggers in the following situations:
  - a. When a youth is already in a physical restraint and/or mechanical restraint; or
  - b. Inside a closed vehicle.
- 7. In addition to the restrictions in #6, staff may not use an OC fogger in the following situations:
  - a. To subdue one youth; or
  - b. In a youth's bedroom.
- 8. If a staff member has deployed OC, that staff member may not carry or use OC again until the SRT and IRT are complete.
- 9. Staff are not authorized to leave the facility, off-duty, with any OC spray container or fogger. Any chemical agents must be returned, weighed, and logged in a designated space at the DCFS facility.
- 10. Once order has been regained, decontamination procedures shall occur immediately.

#### K. Medical Treatment:

- 1. The Shift Supervisor shall notify the nurse on duty that a use of force has occurred.
- 2. If the use of force occurs after hours, such as in the middle of the night, and no immediate medical intervention is needed, the Shift Supervisor on the morning shift shall be responsible for notifying the nurse.
- 3. Immediate medical attention shall be given to both youth and staff if injuries were sustained in a use of force, up to and including calling medical professionals to the facility, and/or transport to the hospital or via ambulance.
- 4. Appropriate referrals by the nursing staff shall be made for youth or staff sustaining an injury.
  - a. The nurse shall provide necessary medical treatment and make referrals based on the need in every case.
  - b. The nurse shall complete an Injury Body Chart (Attachment B) on every youth involved in a use of force.
  - c. The nurse shall provide information to the youth's living unit in writing regarding any follow up care the youth may need after a use of force.

### L. Reporting and Documentation:

- 1. The Shift Supervisor shall be notified immediately when any type of force is used.
- 2. The Superintendent shall be notified by the Shift Supervisor immediately.
- 3. The family of all youth involved in the incident shall be notified within 24 hours.
- 4. The Deputy Administrator of Residential Services shall be notified within 24 hours.
- 5. All staff who witnessed the incident shall complete an Incident Report in Tyler Supervision before the end of their shift.
  - a. The Shift Supervisor or designee shall document the use of force in the Incidents section by creating a New Incident.

- b. In the Incident Characteristics, staff shall note all restraints used (physical, mechanical, chemical) along with any other characteristics.
- 6. The nursing staff shall complete an exam on each youth whenever force is used and shall complete an Injury Body Chart (Attachment B) on each youth involved as soon as possible or on their next assigned shift.
- 7. The Shift Supervisor shall review and approve all Incident Reports in Tyler Supervision as soon as possible after they are received (before the end of their shift) and shall be shared with the Superintendent.
- 8. The Shift Supervisor shall complete the Shift Supervisor Report Use of Force Information Sheet (Attachment A) before the end of their shift. That report should contain at least the following:
  - a. Date:
  - b. Name of primary youth;
  - c. Name(s) of other youth involved;
  - d. Name of staff who initiated the use of force;
  - e. Name of any other staff involved;
  - f. An account of the events that led up to the use of force;
  - g. A description of any means of de-escalation employed;
  - h. A detailed explanation of the incident and the reasons for employing force;
  - i. A description of the restraint devices used and the manner in which they were used;
  - j. An explanation of why the particular type of use of force (e.g., physical, mechanical, chemical) was used;
  - k. A description of any injuries sustained and if treatment was provided;
  - 1. A list of all of the participants in the incident, including youth and staff;
  - m. A description of the youth's behavior, as either witnessed or gathered from reports throughout the incident.
- 9. The Superintendent/designee shall review the Shift Supervisor Report Use of Force Information Sheet (Attachment A).
- 10. Staff are mandated reporters and therefore responsible for reporting any excessive use of force as potential child abuse (NRS 432B.220/DCFS/JJ policy 300.06) to the relevant child welfare agency and/or law enforcement.
- 11. Facilities shall report all incidents involving use of physical, mechanical and chemical restraints during the Performance-*based* Standards (PbS) data collection period each April and October.
- 12. Facilities shall complete the Superintendent Report monthly to document the aggregate number of use of force events.
  - a. Use of force reporting shall be broken down by:
    - 1. Physical, mechanical, and chemical; and
    - 2. Appropriate/inappropriate use.

### M. Review:

- 1. The Superintendent shall complete an initial review every use of force within 12 hours of the incident to including, but not limited to:
  - a. Review of all video of the incident and surrounding areas
  - b. Review of all reports in Tyler Supervision
- 2. All instances of any type of use of force shall be reviewed within 30 days at two levels: Incident Review Team (IRT) (Attachment F), and State Review Team (SRT).
- 3. The IRT shall include, at a minimum, the:
  - a. Facility Superintendent or Assistant Superintendent

- b. Head Group Supervisor
- c. Nursing/medical staff representative
- d. Investigative Officer
- e. Facility Mental Health Counselor
- 4. The SRT shall include, at a minimum, the:
  - a. Facility Superintendent
  - b. Deputy Administrator of Residential Services
  - c. Planning and Evaluation Unit Psychologist or designee
  - d. Director of Nursing
  - e. Parole Unit Manager or designee
- 5. If the IRT or SRT determines an improper or excessive use of force, action may be taken against the staff member such as re-training or disciplinary action (NAC 284.650).
- 6. IRTs and SRTs shall complete a report for each incident reviewed. The report shall be submitted to the Administrator within 7 days of the review.
- 7. The SRT, in collaboration with the JJ Programs Office, shall complete a biannual report summarizing use of force division-wide to include:
  - a. Number of incidents by facility
  - b. Types of incidents by facility (e.g., physical, mechanical, chemical)
  - c. Demographics of youth affected by use of force (e.g., gender, age, race/ethnicity)
  - d. Determination of IRT/SRT (e.g., justified, unjustified)
  - e. Number of staff trained in each type of restraint by facility

## N. Body-Worn Cameras:

- 1. All direct-care staff shall wear a body-worn camera while on official duty.
- 2. All direct-care staff shall activate their body camera, when safe to do so, when a use of force event appears imminent. The body camera shall stay activated during the entirety of the use of force event.
- 3. All direct-care staff shall deactivate their camera once the use of force event has concluded.
- 4. No direct-care staff shall activate their body cameras to record activity other than use of force events, except in exigent circumstances that are approved by a supervisor and/or during events specifically approved in facility procedures.
- 5. Direct-care staff shall be prohibited from deleting any video footage. If direct-care staff have reason to believe video footage was taken that would not comply with policy or procedure, they shall notify their direct supervisor.
- 6. Video footage shall be viewed only by approved internal staff per facility procedures and members of the IRT and SRT.
- 7. Facility staff shall secure and upload all use of force video footage to the Alfresco platform, per the Use of Force Review Procedure SOP # 300.02(0), for review by the IRT and SRT. All video footage shall be stored for a minimum of 3 years.
- 8. All video footage shall be used for internal review only, unless criminal conduct is suspected, in which this footage may be shared with local law enforcement.
- 9. Staff not turning their body camera on for use of force events they have involvement in may be disciplined on a case-by-case basis.

## O. <u>Training</u>:

- 1. Untrained staff will only physically intervene in a life-threatening event when no other trained staff are available to respond, or in non-life-threatening events when trained staff require that level of assistance. Untrained staff will use the minimum level of intervention necessary to safely manage the situation.
- 2. All staff designated by the Superintendent shall be trained in an evidence-based physical restraint model and shall maintain certification as required by the facility, annually, at minimum
  - a. The Superintendent, Assistant Superintendent, Head Group Supervisor, Correctional Lieutenant (if applicable), and Training Officer of each facility must all be trained.
- 3. All staff designated by the Superintendent shall be trained in CPR and First Aid and shall maintain certification as required by the facility.
  - a. The Superintendent, Assistant Superintendent, Head Group Supervisor, Correctional Lieutenant (if applicable), and Training Officer of each facility must all be trained.
- 4. All staff designated by the Superintendent shall be trained in the use of mechanical restraints.
  - a. The Superintendent, Assistant Superintendent, Head Group Supervisor, Correctional Lieutenant (if applicable), and Training Officer of each facility must all be trained.
- 5. In facilities that use OC, all staff (including administration) will complete the OC Spray classroom training.
- 6. All staff designated by the Superintendent shall be fully trained in the use of OC spray and OC foggers such that they are certified to carry and use OC spray/foggers.
- 7. All staff designated by the Superintendent shall be trained in OC Spray Decontamination procedures.
- 8. Additional staff trainings shall focus on helping staff develop the skills needed to assess risk and trauma, identify escalating behaviors and effectively help youth learn safer ways of dealing with, but not limited to anger, stress, fears and frustrations.
- 9. All Group Supervisors and appropriate staff shall be trained in the proper and expected use of camera/body camera equipment and storage of video footage upon hire.
- 10. All staff shall attend annual training on appropriate documentation for the purpose of report writing.

## P. Standard Operating Procedures:

- 1. All facilities shall create Standard Operating Procedures consistent with this policy including but not limited to:
  - a. Training on use of force;
  - b. Training on body-camera use;
  - c. Additional privacy issues related to body-camera usage, including which facility staff are authorized to view video footage;
  - d. Parameters of usage related to body-camera customizability (e.g., automatic turn-on under certain circumstances, remote access functionality);
  - e. Storage of body camera equipment for security and sustainability purposes;
  - f. Availability of various restraint equipment;
  - g. Use of verbal de-escalation; and
  - h. Documentation.