

Handcuffing and Restraints

706.1 PURPOSE AND SCOPE

This policy provides guidelines for the use of handcuffs and other restraints during detentions and arrests.

706.2 POLICY

The University of Colorado Anschutz Medical Campus Police Department authorizes the use of restraint devices in accordance with this policy, the Use of Force Policy, the Transporting Persons in Custody Policy, and department training. Restraint devices shall not be used to punish, to display authority, or as a show of force.

706.3 DEFINITIONS

Prone Position: A position in which a person is lying on a solid surface with the person's chest and abdomen positioned downward, even if the face is turned to one side or the person has one shoulder lifted.

Prone Restraint: A use of physical force, including but not limited to the use of a mechanical restraint, in which the person who is being restrained is in a prone position.

Recovery Position: A position other than a prone position that allows a person to breathe normally

Mechanical Restraint: A physical device used to involuntarily restrict the movement of a person or the movement or normal function of a portion of a person's body

Medical-Behavior Emergencies: An incident in which a medical situation (often drug-induced or drug-enhanced) is generally misinterpreted as a behavioral issue.

706.4 USE OF RESTRAINTS

Only Officers who have successfully completed University of Colorado Anschutz Medical Campus Police Department approved training on the use of restraint devices described in this policy are authorized to use these devices.

- (a) When deciding whether to use any restraint, officers should carefully balance officer safety concerns with factors that include, but are not limited to:
 - The circumstances or crime leading to the arrest.
 - The demeanor and behavior of the arrested person.
 - The age and health of the person.
 - Whether the person is known to be pregnant.
 - Whether the person has a hearing or speaking disability. In such cases, consideration should be given, safety permitting, to handcuffing to the front in order to allow the person to sign or write notes.

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- Whether the person has any other apparent disability.

706.4.1 RESTRAINT OF DETAINEES

Situations may arise where it may be reasonable to restrain an individual who may, after brief investigation, be released without arrest. Unless arrested, the use of restraints on detainees should continue only for as long as is reasonably necessary to assure the safety of officers and others. When deciding whether to remove restraints from a detainee, officers should continuously weigh the safety interests at hand against the continuing intrusion upon the detainee.

706.4.2 RESTRAINT OF PREGNANT PERSONS

Persons who are known to be pregnant should be restrained in the least restrictive manner that is effective for officer safety. Leg restraints, waist chains, or handcuffs behind the body should not be used unless the officer has a reasonable suspicion that the person may resist, attempt escape, injure themselves or others, or damage property.

No person who is in labor, delivery, or recovery after delivery shall be handcuffed or restrained except in extraordinary circumstances, and only when a supervisor makes an individualized determination that such restraints are necessary for the safety of the detainee, officers, or others. See the Transporting Persons in Custody Policy for guidelines relating to transporting pregnant persons.

706.4.3 RESTRAINT OF JUVENILES

A juvenile under 14 years of age should not be restrained unless the juvenile is suspected of a dangerous felony or when the officer has a reasonable suspicion that the juvenile may resist, attempt escape, injure themselves, injure the officer, or damage property.

Officer working as a school resource officer or responding to a public or charter school or its property, vehicles, or school-sanctioned events shall not restrain a juvenile unless allowed by law and only for the following reasons (CRS § 22-15.5-103):

- (a) The juvenile openly displays a deadly weapon.
- (b) The juvenile poses a danger to themselves or others during an arrest that requires transport.
- (c) There is an emergency, and less restrictive measures either would be ineffective or have failed (CRS § 22-15.5-102).

706.5 APPLICATION OF HANDCUFFS OR PLASTIC CUFFS

Handcuffs, including temporary nylon or plastic cuffs, may be used only to restrain a person's hands to ensure officer safety.

- (a) Although recommended for most arrest situations, handcuffing is discretionary and not an absolute requirement of the Department. Officers should consider handcuffing any person they reasonably believe warrants that degree of restraint. However, officers should not conclude that in order to avoid risk every person should be handcuffed, regardless of the circumstances.

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- (b) In most situations handcuffs should be applied with the hands behind the person's back. When feasible, handcuffs should be double-locked to prevent tightening, which may cause undue discomfort or injury to the hands or wrists.
- (c) In situations where one pair of handcuffs does not appear sufficient to restrain the individual or may cause unreasonable discomfort due to the person's size, officers should consider alternatives, such as using an additional set of handcuffs or multiple plastic cuffs.
- (d) Officers will follow the policy or directions of Detention Center personnel regarding the removal of handcuffs while at the facility.

706.6 APPLICATION OF SPIT HOODS/MASKS/SOCKS

Spit hoods/masks/socks are temporary protective devices designed to prevent the wearer from biting and/or transferring or transmitting fluids (saliva and mucous) to others.

- (a) Spit hoods may be placed upon persons in custody when the officer reasonably believes the person will bite or spit, either on a person or in an inappropriate place.
 - 1. They are generally used during application of a physical restraint, while the person is restrained, or during or after transport.
- (b) Officers utilizing spit hoods should ensure that the spit hood is fastened properly to allow for adequate ventilation and that the restrained person can breathe normally. Officers should provide assistance during the movement of restrained individuals due to the potential for impaired or distorted vision on the part of the individual.
 - 1. Officers should avoid comingling individuals wearing spit hoods with other detainees.
- (c) Spit hoods should not be used in situations where the restrained person is bleeding profusely from the area around the mouth or nose, or if there are indications that the person has a medical condition, such as difficulty breathing or vomiting.
 - 1. In such cases, prompt medical care should be obtained.
 - 2. If the person vomits while wearing a spit hood, the spit hood should be promptly removed and discarded.
 - 3. Persons who have been sprayed with oleoresin capsicum (OC) spray should be thoroughly decontaminated including hair, head and clothing prior to application of a spit hood.
- (d) Those who have been placed in a spit hood should be continually monitored and shall not be left unattended until the spit hood is removed. Spit hoods shall be discarded after each use.

706.7 APPLICATION OF AUXILIARY RESTRAINT DEVICES

Auxiliary restraint devices include transport belts, waist or belly chains, transportation chains, leg restraints and other similar devices. Auxiliary restraint devices are intended for use during long-term restraint or transportation. They provide additional security and safety without impeding breathing, while permitting adequate movement, comfort, and mobility.

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Only department-authorized devices may be used. Any person in auxiliary restraints should be monitored as reasonably appears necessary.

706.8 APPLICATION OF LEG RESTRAINT DEVICES

Leg restraints may be used to restrain the legs of a violent or potentially violent person when it is reasonable to do so during the course of detention, arrest or transportation. Only restraint devices approved by the Department shall be used.

- (a) In determining whether to use the leg restraint, officers should consider:
 - 1. Whether the officer or others could be exposed to injury due to the assaultive or resistant behavior of a suspect.
 - 2. Whether it is reasonably necessary to protect the suspect from his/her own actions (e.g., hitting his/her head against the interior of the patrol unit, running away from the arresting officer while handcuffed, kicking at objects or officers).
 - 3. Whether it is reasonably necessary to avoid damage to property (e.g., kicking at windows of the patrol unit).

706.8.1 GUIDELINES FOR USE OF LEG RESTRAINTS

When applying leg restraints the following guidelines should be followed:

- (a) If practicable, officers should notify a supervisor of the intent to apply the leg restraint device. In all cases, a supervisor shall be notified as soon as practicable after the application of the leg restraint device.
- (b) Once applied, absent a medical or other emergency, restraints should remain in place until the officer arrives at the jail or other facility or the person no longer reasonably appears to pose a threat.
- (c) Once secured, the person should be placed in a seated or upright position, secured with a seat belt, and shall not be placed on their stomach for an extended period, as this could reduce the person's ability to breathe.
- (d) The restrained person should be continually monitored by Officer while in the leg restraint. The officer should ensure that the person does not roll onto and remain on their stomach.
- (e) The officer should look for signs of labored breathing and take appropriate steps to relieve and minimize any obvious factors contributing to this condition.

706.9 REQUIRED DOCUMENTATION

If a person is restrained and released without an arrest, the officer shall document the details of the detention and the need for handcuffs or other restraints.

- (a) If a person is arrested, the use of handcuffs or other restraints shall be documented in the related report:
 - 1. The factors that led to the decision to use restraints.
 - 2. Supervisor notification and approval of restraint use.

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3. The types of restraint used.
4. The amount of time the person was restrained.
5. How the person was transported and the position of the person during transport.
6. Observations of the person's behavior and any signs of physiological problems.
7. Any known or suspected drug use or other medical problems.

706.10 USE OF PRONE RESTRAINT

706.10.1 USE AND RESPONSIBILITIES FOR PRONE POSITION APPLICATION

- (a) Officers should only use the prone restraint techniques when it is necessary to safely control a subject who is actively resisting arrest or presents a danger to themselves or others, and no other alternative is feasible.
- (b) As soon as possible, after an individual has been handcuffed or otherwise secured and is no longer an imminent threat to the safety of the officer or others, the individual should be turned onto their side or allowed to sit up, or placed in any other reasonable position other than prone. Officers will make all reasonable efforts to ensure that the individual is not left in a prone position for longer than necessary.
- (c) When body weight is used as an attempt to control an individual who is resisting, it may not be used in a manner that intentionally interferes with the person's breathing. Officers will immediately cease applying body weight to an individual's back, head, or abdomen once the individual is restrained, and other control tactics may be reasonably utilized, except for body weight.
- (d) Officers will document the use of the prone position in their report, and supervisors will make an entry into the department's use of force tracking software program.

706.10.2 MONITORING/OFFICER ASSIGNED TO SUBJECT (OATS)

- (a) A critical asset of using the prone restraint is close and vigilant monitoring of the subject's condition. Constant monitoring of the subjects' physical condition should be a priority during and after the restraint to assess for signs of distress.
- (b) The arresting officer, or, if staffing allows, another officer, will be assigned to assess and reassess the subject's condition constantly. This function is otherwise known as the 'Officer Assigned to Subject' or OATS. The arresting officer is responsible for monitoring the subject's condition and will do so until another officer is assigned to the role of the OATS. Any officer assigned as OATS will have sole responsibility to monitor the subject until the arrest is completed or medical personnel have arrived on scene. The officer assigned as OATS will constantly be assessing and re-assessing the condition of the subject. If the officer observes any signs of distress or deteriorating condition of the subject, medical aid will be summoned to the scene. If staffing doesn't allow for OATS, all officers on scene must stay alert to signs of distress in the subject's condition.
- (c) Indications of a subject experiencing a medical behavioral event may include, but are not limited to;

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1. Extreme agitation
 2. Elevated heart rate
 3. Rapid breathing, shallow breathing or not breathing at all,
 4. Altered mentation or confusion
 5. Inappropriate or excessive sweating,
 6. Temperature extremes (subject feels very cold or hot to the touch),
 7. Erratic or irrational behavior,
 8. Publicly naked or insufficiently attired for the weather conditions,
 9. High pain tolerance,
 10. Actual law enforcement knowledge of the consumption of alcohol, drugs, or both. Especially stimulants (Cocaine, PCP, Methamphetamines)
- (d) Officers must be cognizant of other factors that may affect "breathing normally". Just because someone isn't prone and in handcuffs does not in and of itself mean they will breathe normally. One's own physical limitation, large body size, weight distribution, position of the body as it relates to the diaphragm and its movement, as well as outside influences all dictate how one breathes normally. This re-enforces the importance of constant observation, assessing the status of the subject, and Officer's actions to signs of distress.
- (e) Medical assistance will be called to the scene if:
1. The OATS or any other officer on scene sees signs of distress or an obvious decline in the physical condition of the subject,
 2. If the subject was rendered unconscious,
 3. Any sign of injury or complaint of injury, or difficulty breathing,
- (f) If necessary, Officers will render emergency first aid measures that may include: basic first aid, tourniquet, CPR, AED, or Narcan (Naloxone)

706.11 TRAINING

The Professional Standards Sergeant should ensure that officers receive periodic training on the proper use of handcuffs and other restraints, including:

- (a) Proper placement and fit of handcuffs and other restraint devices approved for use by the Department.
- (b) Response to complaints of pain by restrained persons.
- (c) Options for restraining those who may be pregnant without the use of leg restraints, waist chains, or handcuffs behind the body.
- (d) Options for restraining amputees or those with medical conditions or other physical conditions that may be aggravated by being restrained.

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- (e) Proper placement of safely secured persons into an upright or seated position to avoid placement on the stomach for an extended period, as this could reduce the person's ability to breathe.
- (f) All officers will receive annual training on the requirements and duties related to the use of the prone position.