

Mechanical restraints

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Part of the <u>'Use of Force'</u> chapter

Policy statement and principles

What

Mechanical restraints are one of several tactical options available for use by Police within the Tactical Options Framework.

Why

A key function of Police is to maintain public safety. At times this requires Police to use force, the degree of which is determined depending on the circumstances, from a wide range of tactical options available to them.

Mechanically restraining a person is the application of an approved device or devices designed to restrict the movements of the person to whom the devices are applied.

Police use of mechanical restraints is governed by sections <u>39</u>, <u>40</u>, <u>41</u>, <u>42</u>, <u>48</u>, and <u>62</u> of the Crimes Act 1961 - they set out the circumstances in which mechanical restraints or any use of force may be used, and section <u>23(5)</u> of the New Zealand Bill of Rights Act 1990 which sets out the respect required for the individual's rights, and the <u>UN Convention Against Torture</u> including the UN Optional Protocol for that Convention.

How

Police applying mechanical restraints must be aware of these key, critical points:

- Only approved mechanical restraints must be used.
- The use of mechanical restraints must be recorded and reported as detailed in this chapter.
- Employees and supervisors must ensure that mechanical restraints are used in a safe and humane manner, and not for the purpose of cruel, inhumane or degrading treatment or punishment.
- Employees must be appropriately trained before they can use mechanical restraints in situations other than controlled training sessions.
- TENR must be applied to assist in deciding whether it is necessary (or not) to apply mechanical restraints. You must consider this overriding question: In the particular circumstances what possible risks are posed by the person?
- Restraint chairs must only be used as a last resort to control a detainee who is violent and intent on harming themselves or others, where serious injury or death is a likely result, and where other available restraints would be ineffective.
- A clear and identified risk must be present to handcuff a person who is not arrested under no circumstances can there be any pre-determined decision.

Overview

Purpose of use

Mechanical restraints are used to reduce the risk of injuries to:

- Police employees
- the subject
- any other person

or when there is a risk of the subject escaping.

Mechanical restraints are a tactical option employed by Police to maintain control of a person at:

- a Police station
- during transport
- whilst secured in any other premise or place,

usually where the person has been detained or arrested. In addition there are provisions to restrain persons under the Mental Health (Compulsory Assessment and Treatment) Act 1992 - see '<u>Restraining people</u>' in the 'People with mental impairments' chapter of the Police Manual.

Purpose of chapter

This chapter:

- explains mechanical restraints and their purpose
- lists and describes the mechanical restraints approved for use by Police including:
 - handcuffs (metal and plastic)
 - waist restraint belts
 - vehicle leg restraint
 - restraint chairs
 - combinations of restraints
 - spitting hoods
- outlines the risks associated with the use of mechanical restraints and provides instruction on how these risks should be minimised
- provides instruction on:
 - the circumstances in which each restraint type may be used
 - the factors to consider before deciding to use a mechanical restraint and any authorisation required
 - monitoring requirements when mechanical restraints are used
 - when they must be removed, and where applicable, any time limits on use
- details when the use of restraints must be reported.

Control and restraint techniques

See <u>'Defence Tactics'</u> in the 'PITT training manual' on the Police intranet for information about control and restraint techniques.For Restraint Chair, see also '<u>Mechanical restraints resources</u>'.

TENR and the use of mechanical restraints

TENR (Threat, Exposure, Necessity, Response), Police's operational threat assessment tool, **must** be utilised when considering using, or when using mechanical restraints. TENR supports the timely and accurate assessment of information directly relevant to the safety of Police and others. Its overriding principle is **'safety is success'**.

TENR will assist you to decide whether to use a mechanical restraint to restrain a prisoner and to choose an appropriate mechanical restraint considering the threat posed. See the '<u>TENR - Operational threat assessment</u>' chapter for more information.

Necessity to use

Using the TENR model, follow the steps below to decide whether the use of mechanical restraints is necessary and proportionate to the threat faced, given all the circumstances known at the time, and if so, which mechanical restraint to use.

Step	Action
1 - Assess the threat	Assess the threat, taking into account: - the nature of the charge - the person's behaviour, and your perceived cumulative assessment (PCA) based on this - the extent to which the person is under the influence of alcohol or other drugs, if at all - the likelihood of the person attempting to escape.
2 - Assess the exposure	Assess the exposure, taking into account: - the safety of the person and Police employees - factors that may elevate or reduce the risk to the person or Police employees, e.g., the person's age - children and elderly are vulnerable - whether the person has mental health issues, is overweight or underweight, pregnant, a refugee, or under the influence of alcohol or other drugs. See 'Factors affecting subject vulnerability' in the 'Use of force overview' chapter.
	Assess the threat and exposure to determine whether a mechanical restraint is necessary now, later or not at all; and if a mechanical restraint is necessary, what type is reasonable, necessary and proportionate.
	Develop a response ensuring use of a mechanical restraint is necessary and proportionate, given all the circumstances known at the time.

Approved mechanical restraints and training

Director: Capability approves Police mechanical restraints

The Director: Capability may approve mechanical restraints for use by Police employees who are authorised to use force, including during training.

Assessing or testing new equipment

The Director: Capability may temporarily approve a new type of mechanical restraint for the purpose of an assessment or trial/pilot.

Only approved mechanical restraints to be used

Police employees authorised to use force and use a mechanical restraint must when required, carry and use**only** mechanical restraints which have been approved by the Director: Capability. Note the exception provided for in the '<u>Use of force overview</u>' chapter.

Table of approved mechanical restraints

This table details the approved mechanical restraints available through the Police distribution warehouse.

Type of Mechanical restraint	Approved model	Date of Approval
Handcuffs - metal	- Chain link (Smith and Wesson)	19 August 2009
Handcuffs - plastic	- Plastic, known as 'ties'	19 August 2009 28 January 2010
Waist restraint belt	- Monadnock double cuff disposable handcuffs - Black Scorpion H212P	19 August 2009
<u>/ehicle leg restraint</u>	- Humane Restraint NT42 - Black Scorpion H207P	01 July 1998 19 August 2009
	- NCS300 Nylon Control Strap	15 February 2011
Restraint chairs	- Safety Restraint Chair, Incorporated	3 March 2014
Spitting hoods	- TranZport Hood 8320-0-2	19 August 2009

Approved techniques and training

The Training Service Centre conducts training courses in applying some mechanical restraints. For detailed training instructions, see <u>Defence Tactics</u> in the 'PITT training manual' on the Police intranet. See <u>training guides</u> for the Restraint Chair.

Reporting use of mechanical restraints

The '<u>Use of force overview</u>' Police Manual chapter outlines when using force/tactical options must be reported in a Tactical Options Reporting (TOR) form (i.e. reportable force).

When must a TOR form be submitted?

You must submit a TOR form if you use:

- metal or plastic handcuffs, a waist restraint belt, and a vehicle leg restraint:
 - with pain compliance

- **without** pain compliance, but **only** when handcuffs, waist restraint belt, and/or vehicle leg restraint are used with another reportable tactical option

- a spitting hood

- a combination of either a rear wrist and ankle restraint, or a waist restraint belt and ankle restraint, whether linked by plastic ties or not

- a restraint chair.

See the 'Use of Force overview' part of this chapter for more details on reporting tactical options.

Pain compliance

Pain compliance means the direct and intentional use of the minimum force necessary by a constable to gain compliance of an actively resistant subject. The subject's reaction to the pain compliance techniques usually causes the subject to comply with instructions.

Recording restraint times in your notebook

You must record in your notebook, and in the custody module, the time a person is put in any of the following restraints, and the time it is removed:

- a spitting hood
- a combination of either a rear wrist and ankle restraint, or a waist restraint belt and ankle restraint, linked by plastic ties
- a restraint chair.

General guidelines and requirements for all mechanical restraints

Humane use of mechanical restraints

Employees and supervisors must ensure that mechanical restraints are used in a safe and humane manner, and not for the purpose of cruel, inhumane or degrading treatment or punishment.

Legal authority

See the '<u>Use of force overview</u>' chapter and '<u>Restraining people</u>' in the 'People with mental impairments' chapter of the Police Manual.

Overriding principle

When deciding whether to use mechanical restraints, you must consider this overriding question: In the particular circumstances what possible risks are posed by the person?

TENR and mechanical restraints

See <u>'TENR and the use of mechanical restraints'</u>in this chapter.

Use of a mechanical restraint in non-arrest situations

While there is no statutory basis for handcuffing anyone prior to arrest, the courts have held that operational requirements may sometimes justify the extreme step of handcuffing a non-arrested person. Decisions to handcuff in non-arrest situations require careful assessment and balancing in each case and consideration of all the facts available. A **clear and identified risk** must be present to handcuff a person who is not arrested - **under no circumstances can there be any pre-determined decision**

In *R v Paythe* judge stated:

"I am also concerned by the use of handcuffs. I am unaware of any statutory basis for the use of handcuffs prior to arrest. On that basis the use of handcuffs may be unlawful."

However, after careful reflection the judge concluded that operational requirements justified the use of handcuffs, in that Police had not made a pre-determined decision to handcuff but that it had been done at the discretion of the detaining officer at the scene taking into account all the facts and circumstances, for example the detainee being a patched gang member with numerous convictions for violence and drug offences.

The judge concluded:

"On the authority of Dunlea¹, operational requirements may sometimes justify the extreme step of handcuffing a citizen, and here there was a lawful basis for detention in order to conduct a search."

Caution: Handcuffing a detained person (not arrested), as commented on in *R v Pay* above, should only be considered **where a clear risk to a person is evident**. There can be no pre-determination that risk may develop!

Using restraints during transport or at cellblocks

You can use mechanical restraints in a custodial cellblock or a Police vehicle whilst moving prisoners, if your<u>TENR</u> risk assessment indicates that they are required in the circumstances. Employee numbers in comparison with prisoner numbers and a history of previous escape are valid risk identifiers.

Your decision should be recorded in your notebook if time allows. See also '<u>TENR and mechanical restraints</u>' in this chapter.

You should consider restraining arrested or detained persons in your custody when you transport them in a Police vehicle. This is to prevent interference with the driver or escape from custody by exiting the moving vehicle. Due to extreme risk of <u>positional asphyxia</u> you must **not** transport anyone in a Police vehicle who is restrained by a combination of either a rear wrist and ankle restraint, or a waist restraint belt and ankle restraint, **linked** by a plastic tie.

Managing the person in mechanical restraints

General risk factors for all types of mechanical restraint

As the level of intervention increases, the level of risk to Police employees, the subject and the public increases. In these situations the management of these risks becomes paramount to all involved. To manage the risks you must:

- ensure restraints are applied in accordance with training
- ensure, if possible, there is a support officer(s) present and that each officer understands their role in applying the mechanical restraint
- assess and frequently re-assess any risk during and after the restraint has been applied.

Monitoring requirements when in restraints

A person must be subject to	while restrained by one or more of the following:
care and frequent monitoring (Means to watch or observe at least five times per hour at varying intervals. This definition does not include <u>CCTV</u> as a method of frequent monitoring).	 - a waist restraint belt - an ankle restraint (by plastic ties) - a vehicle leg restraint when not linked to another restraint by plastic ties.
care and constant monitoring (Means to watch or directly observe without interruption. This definition does not include CCTV as a method of constant monitoring).	 - a spitting hood - a combination of either a rear wrist and ankle restraint, or a waist restraint belt and ankle restraint, linked by plastic ties - a restraint chair.

See the '<u>People in Police custody</u>' chapter for the procedures relating to persons assessed as requiring care and either frequent or constant monitoring. Note in particular:

- the requirement for a medical examination as soon as practicable after the person's assessment

- that once confirmed, a monitoring level cannot be reduced without the authority of the Police Medical Officer (PMO) or health professional who made the assessment.

Note also the requirement below for a medical assessment by a PMO before certain restraints can be used beyond two hours.

Removal of mechanical restraints

All mechanical restraints must be removed from a person as soon as it is believed that the need for using them ceases, and in some instances, <u>time limits on their use</u> apply.

The fact that a person is in a custodial cellblock does not by itself constitute grounds for removal of a mechanical restraint. Carefully consider the risk of escape, the risks of the person harming themselves, and the risks and requirements involved in searching and processing the person before you remove mechanical restraints.

Time limits for removal of certain mechanical restraints

A person must not be restrained for more than two hours in:

- a spitting hood
- a combination of either a rear wrist and ankle restraint, or a waist restraint belt and ankle restraint, linked by plastic ties
- a restraint chair

unless they have been assessed by a Police Medical Officer (PMO) before the two-hour time limit expires and an extension of the two

hours is granted. The person must be re-assessed before any subsequent two-hour period has been reached.

Anyone in these restraints must be subject to constant monitoring.

Extending the initial restraint period on medical assessment

Where there are justifiable reasons for restraining a person in any of the above restraints for more than two hours, the Police Medical Officer (PMO) or registered health professional must assess their wellbeing **before** reaching the two hour time limit, or any subsequent two hour period. (A PMO or registered health professional rather than a DAO or Community Assessment Team member must undertake this assessment because of the medical risks associated with prolonged use of these restraints)

It is accepted that there will be smaller rural or semi-rural stations that may utilise these restraints, but there is not a Police Medical Officer available or on call. Where a Police Medical Officer is not available, it is acceptable for an assessment to be conducted by a duty General Practitioner or local hospital doctor, or if not available, a registered nurse, or if not available, an ambulance officer. In all situations, the Custody Module must clearly document the actions taken to have a registered health professional or ambulance officer conduct an assessment.

The PMO (or registered health professional or ambulance officer) must:

- advise whether the person can continue to be safely restrained for more than two hours, and the type of restraint to be used; and
- if they cannot be safely restrained for more than two hours, provide advice on a safe alternative course of action, e.g. sedation.

Observation and care of persons in mechanical restraints

During the constant monitoring of someone in a mechanical restraint, you must give particular attention to:

- airway clearance
- respiration rate
- skin colour, circulation
- range of movement/discomfort, e.g. muscular cramps
- pressure areas
- hydration
- changes in the person's state which could indicate a need to review their status
- swelling of the body area adjacent to the mechanical restraint
- statements by the person in respect of their condition (e.g. "I cannot breathe").

Caution - positional asphyxia

Be aware that a person whose legs and wrists are restrained has an increased risk of asphyxiation. Positional asphyxia is a clear and material risk and the person must be kept under <u>constant monitoring</u> and never allowed to lie face down.

Positional asphyxia arises when a restrained person is unable to obtain sufficient oxygen to meet physiological requirements. This is likely to occur as a result of a number of risk factors, such as:

- increased oxygen requirement in a highly stressed or agitated person
- pressure on abdomen and chest will restrict the mechanics of breathing
- restriction of the airway (facial covering or pressed against a surface)
- alcohol or drugs may inhibit respiration even if the person is not obviously sedated.

You must be acutely aware of these risk factors and avoid, as best you can, creating breathing restrictions when you use any technique, but particularly where you use one or more of the following:

- a spitting hood
- a combination of either a rear wrist and ankle restraint, or a waist restraint belt and ankle restraint, linked by plastic ties
- a restraint chair.

In a situation of risk, you must constantly monitor to ensure adequate breathing is maintained.

For more detail see the '<u>Positional asphyxia</u>' Police Manual chapter.

Segregation during transport in Police van

Anyone restrained by an approved mechanical restraint must**not** be transported in the same compartment of a Police van as someone who is not restrained.

The fact that someone must be restrained during transport is sufficient to allow for the restraint of all other persons carried in the same van compartment. This is to reduce the risk of harm being caused by others if no other safer method of transport is available or practicable.

Metal handcuffs

Туре

The approved steel handcuffs are shown in these pictures.



Take care when applying metal handcuffs

Metal handcuffs must be double locked so that the person is not injured when the ratchet arm is closed. Don't apply them too tightly, because they can cut off blood circulation and cause injury. Remove them as soon as practical.

Important: See requirements for monitoring handcuffed people in some situations.

See the RNZPC training material on handcuffing for detail on risk factors and tactical considerations.

Plastic handcuffs

Introduction

These two types of plastic handcuffs are approved Police equipment:

- plastic ties (3 required)
- Monadnock double cuff (do not require assembly and are designed for immediate use).

Plastic handcuffs are:

- made of nylon
- generally black in colour (but other colours available also)
- about 10g in weight
- configured to link both wrists securely.

Note: They can withstand a strain of more than 140 kg.

Diagram

This is what the different types of plastic handcuffs look like.

Plastic tie type





Monadnock double cuff





When should plastic handcuffs be used?

Mechanical restraints

Released under the Official Information Act 1982

Plastic handcuffs should be used in situations when:

- no metal handcuffs are available
- there are more people to be restrained than metal handcuffs available
- in mass arrest situations
- the person's wrists are of a size that the metal handcuffs would injure them or would not fit
- the officer is not accompanying the arrested person and wants to prevent the loss or misplacement of their metal handcuffs.

Plastic ties may be used, a minimum of one on each wrist, with the third creating a joining link between the first two.

Plastic handcuffs may be used to secure the feet, ankles and legs of a highly agitated or aggressive person. This option would be used to prevent injury to Police employees, members of the public and the subject, and to prevent damage to property.

Note: An <u>ASP scarab restraint cutter</u> will be required to remove plastic handcuffs. If unavailable, use side cutters, pliers or other pliers with a cutting ability. For safety reasons do **not** use knives except in an emergency.

Risk factors

Consider these risk factors before applying plastic handcuffs:

- The plastic handcuff system takes time to set up.
- Plastic handcuffs cannot be:
 - used in a pain compliance technique
 - prevented from being tightened by another person.
- The person may be able to break or cut plastic handcuffs if left unsupervised.
- The officer must have access to a tool to cut the handcuffs off the person when the handcuffs are no longer required.
- The potential risk of injury to Police and the person from using a cutting tool other than an ASP scarab restraint (or similar safety) cutter.

Carriage

Plastic handcuffs can be carried loosely inside the banding of the forage cap, around the duty belt, secured around the belt keepers and equipment pouches, or inside the baton or torch pocket of the trousers.

Plastic handcuff cutter

ASP has a standard cutter that safely cuts the plastic handcuffs without inflicting injuries to Police or the person wearing the cuffs. The ASP scarab restraint cutter is recommended for use by Police.

Diagram

This is what the ASP scarab restraint cutter looks like (open and closed).



Waist restraint belts

Introduction

The restraint belt is approved Police equipment consisting of an adjustable belt that is put around a person's waist and buckled at the back. Handcuffs are fed through a keeper ring in the front of the belt, and when attached to the person's wrists, keeps the wrists and hands at waist level at the front of the waist.

Waist restraint belts with handcuffs may also be used in combination with ankle restraints, with or without being linked by plastic ties. (There is less risk of positional asphyxia with unlinked combinations, and they are more comfortable than other methods)

Diagram

This is what a waist restraint belt looks like when used in conjunction with metal handcuffs.



When can waist restraint belts be used?

A waist restraint belt can be used in conjunction with handcuffs:

- if a person is violent or potentially violent, and just using handcuffs would be ineffective or inappropriate
- where a spitting hood is applied to avoid the person interfering with the hood (although handcuffs alone may be the preferred option).

Note: A supervisor should be notified whenever a waist restraint belt is used. However, a supervisor's authority is not required to use a waist restraint belt.

Safety rules

These safety rules apply at all times:

- Belts must be applied in accordance with training.
- A person on whom a waist restraint belt has been applied must befrequently monitored.
- A person on whom a waist restraint belt linked to an ankle restraint has been applied must beconstantly monitored.

Risk factors

As the level of intervention increases, the level of risk to Police employees and the public increases. To manage the risks you must:

- be trained in the safe application of the Police-approved waist restraint belt
- ensure there is a support officer(s) present, where available
- ensure that each officer understands their role in applying the waist restraint belt
- assess and reassess any risk frequently during and after the waist restraint belt has been applied
- consider the increased risk of positional asphyxia if a combination of a waist restraint belt **linked** to an ankle restraint is used. (See 'Rear wrist and ankle, and waist and ankle restraints' in this chapter for more information about the risks associated with using combinations of restraints)

Vehicle leg restraint

Introduction

A vehicle leg restraint can be used during the transport of persons in a Police vehicle.

They are used if a person is violent or potentially violent, and in addition (but **not linked**) to handcuffs or a waist restraint to prevent the person:

- interfering with the safe operation of the vehicle
- assaulting Police employees
- escaping from the vehicle whilst the vehicle is stationary or mobile.

Note: A supervisor should be notified whenever a vehicle leg restraint is used. However, a supervisor's authority is**not** required to use a vehicle leg restraint.

Diagram

This is what a vehicle leg restraint looks like.



About the vehicle leg restraint

The vehicle leg restraint is approved Police equipment consisting of an adjustable belt that is put around a person's ankles and secured by Velcro. A section of belt with a plastic clip is secured by closing the door on the mechanical restraint securing the clip outside the door (on the bottom of the door) and preventing the movement of the person's legs.

Safety rules

These safety rules apply at all times:

- The belt must be applied in accordance with approved training.
- A person on whom a vehicle leg restraint has been applied must befrequently monitored.

Risk factors

As the level of intervention increases, the level of risk to Police employees and the public increases. To manage the risks you must:

- be trained in the safe application of the Police-approved vehicle leg restraint
- ensure there is a support officer(s) present, where available
- ensure that each officer understands their role in applying the vehicle leg restraint
- assess and reassess any risk frequently during and after the vehicle leg restraint has been applied.

Restraint chairs

Introduction

The restraint chair is approved Police equipment consisting of an inclined chair that uses leg, wrist, waist and chest mechanical restraints to immobilise a person. The chair has wheels that allow for the safe movement of prisoners in and around custodial areas.

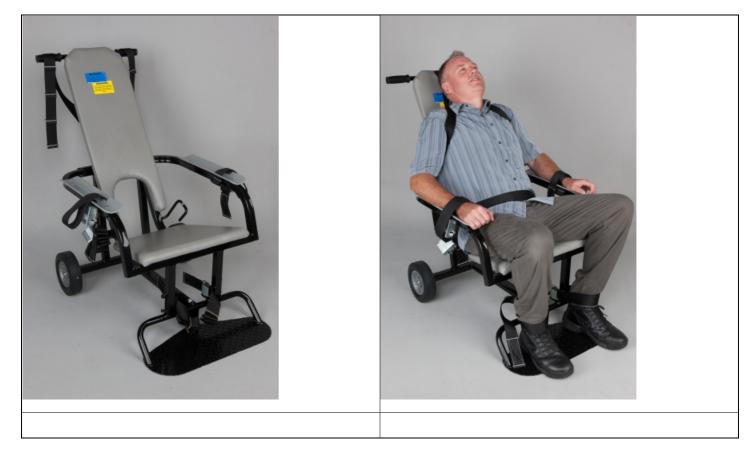
Restraint chairs may be used to control a detainee who is violent and intent on harming themselves and/or others and where serious injury or death is a likely result and where other available mechanical restraints would be ineffective.

Examples of such behaviour are the person striking doors, walls and other objects with their body or head. In such circumstances the use of handcuffs and other mechanical restraints would be ineffective or unable to secure the person in a manner where they cannot harm themselves or others.

The restraint chair must never be used as a form of punishment.

Diagram

This is what a restraint chair looks like.



Supervisor's authority required

The restraint chair is one of the most intrusive of approved mechanical restraints. A supervisor's authority must be obtained before using the restraint chair unless a supervisor is not available and immediate action is required to prevent the person harming themselves and/or others and where serious injury or death is a likely result.

Considerable force by a number of employees may be required to secure the person, so planning and a clear understanding of each employee's role in applying the restraint is paramount.

Note: If you have to take immediate action, advise a supervisor as soon as practicable.

Safety rules

These safety rules apply at all times:

- TENR (Threat, Exposure, Necessity, Response), Police's operational threat assessment tool, supports the timely and accurate assessment of information directly relevant to the safety of Police and others. Its overriding principle is 'safety is success'. Use TENR when deciding if the restraint chair is an appropriate tool to help resolve a situation. Regularly reassess the safety and security risk to both staff and the prisoner.
- The use of the restraint chair must be in accordance with approved training.
- A person secured in a restraint chair must be constantly monitored to ensure their safety.

Note: You must record in your notebook and the Electronic Custody Module, the time a person is put in a restraint chair, and the time they are removed. During the monitoring, the ongoing use of the chair should be reassessed regularly. Total time in the restraint chair must not exceed two hours, unless the person has been assessed by a Police Medical Officer (PMO) or registered health professional **before** the two hour time limit expires, and before any subsequent two hour period has been reached. See <u>'Time limits for removal of mechanical restraints'</u>.

It is accepted that there will be smaller rural or semi rural stations that may utilise these restraints, but there is not a Police Medical Officer available or on call. Where a Police Medical Officer is not available, it is acceptable for an assessment to be conducted by a duty General Practitioner or local hospital doctor, or if not available, a registered nurse, or if not available, an ambulance officer. In all situations, the Custody Module must clearly document the actions taken to have a registered health professional or ambulance officer conduct an assessment.

Using a restraint chair

When you intend to place a person onto, or remove from a restraint chair, it is recommended that a 4-person team is assembled to:

- take control of the person to be put onto the chair
- minimise the likelihood of any injuries or harm to the person or employees.

One Police employee who is trained and currently certified in the use of the restraint chair must take charge on each occasion a person is to be restrained in a restraint chair. Prior to restraining the person, that employee must fully brief each of those assisting on their individual roles ensuring they understand. During the restraint process the employee in charge must take personal control of the person's head and provide advice, assistance and direction to the other employees as required.

Training is available from district trainers, and a training package specific to restraint chairs for the use of district trainers, obtained from the School of Response, RNZPC. See also 'Mechanical restraint resources'.

Rear wrist and ankle, and waist and ankle restraints

Combination options

Combination option	Supervisors authority
handcuffing the person (by metal or plastic handcuffs) and restraining their ankles by plastic ties	Not required, but should be notified
As above, and linking these restraints by a plastic tie	Must be obtained before doing this, unless impractical (then advise supervisor as soon as practicable)
putting the person in a waist restraint belt (with handcuffs) and restraining their ankles by plastic ties	Not required, but should be notified
As above, and linking these restraints by a plastic tie	Must be obtained before doing this, unless impractical (then advise supervisor as soon as practicable)

Using a combination of restraints

Using combinations of either a rear wrist and ankle restraint, or a waist restraint belt and ankle restraint, **linked** by plastic ties, pose a significant risk to the person and they should only be used in exceptional situations, for example:

- when no other way of calming or controlling that person is readily available; and/or
- where a restraint chair would otherwise be used, but is not available.

Positional asphyxia is a clear and material risk and the person must be continuously monitored and never allowed to lie face down. For more detail see '<u>Positional asphyxia</u>' and '<u>Restraint chairs</u>'.

Unlinked combinations should be used to prevent injury to Police employees, members of the public and the subject, and to prevent damage to property.

Risk factors

As the level of intervention increases, the level of risk to Police employees and the public increases. To manage the risks you must:

- be competent in the safe application of combined restraints, whether linked or not
- ensure there is a support officer(s) present, where available
- ensure that each officer understands their role in applying these restraints
- assess and reassess any risk frequently during and after the restraint has been applied.

Safety rules

These safety rules apply at all times:

Any person restrained by a <u>combination</u> of restraints **linked** by plastic ties:

- must not be restrained for more than two hours, unless they have been assessed by a Police Medical Officer (PMO) before the two hour time limit expires. See Time limits for removal of mechanical restraints
- must never be allowed to lie face down
- must be constantly monitored
- should, where possible, be left on a mattress.

Note: You must record in your notebook the time a person is put in a combination of restraints**linked** by plastic ties and the time the restraints are removed. Total time in the restraint must not exceed two hours, unless the person has been assessed by a Police Medical Officer (PMO) **before** the two hour time limit expires, and re-assessed before any subsequent two hour period is reached. See '<u>Time</u> <u>limits for removal of mechanical restraints</u>'.

Spitting hoods

About the spitting hood

The spitting hood is approved Police equipment. It is a one size unit that slips over the person's head. The spitting hood uses a dark mesh to view the person whilst the lower part of the hood prevents spitting and reduces the risk to others.

For the best fit, the centre elastic is placed under the nose and over the ears. However, for better protection, the elastic may be placed above the nostrils. Both fits are acceptable.

Diagram



When can spitting hoods be used?

Police approved spitting hoods may be used in conjunction with other approved mechanical restraints for restraining people who are prone to spitting or have threatened to spit. Only use spitting hoods after a risk assessment has identified a risk of spitting or a person has spat at Police.

Supervisor's authority required

The spitting hood is an intrusive mechanical restraint. A supervisor's authority must be obtained before using the spitting hood unless a supervisor is not available and immediate action is required to prevent the person spitting. More than one employee may be required to put the hood on, so planning and a clear understanding of each employee's role in applying the hood is paramount.

Note: If you have to take immediate action, you must advise a supervisor as soon as practicable.

Safety rules

These safety rules apply at all times:

- Spitting hoods must be applied in accordance with approved training.
- A person on whom a spitting hood has been applied must beconstantly monitored.
- If OC spray has been used, aftercare must be in line with the 'Oleoresin Capsicum (OC) Spray' chapter.
- **Do not use** the spitting hood on anyone who is vomiting, having difficulty breathing or bleeding profusely from the mouth and nose area.

Note: You must record in your notebook the time a person is put in a spitting hood, and the time the hood is removed. Total time in the hood must not exceed two hours, unless the person has been assessed by a Police Medical Officer (PMO) **before** the two-hour time

limit expires, and re-assessed before any subsequent two hour period is reached. See 'Time Limits for removal of mechanical restraints

It is accepted that there will be smaller rural or semi-rural stations that may utilise these restraints, but where there is not a Police Medical Officer available or on call. Where a Police Medical Officer is not available, it is acceptable for an assessment to be conducted by a duty General Practitioner or local hospital doctor, or if not available, a registered nurse, or if not available, an ambulance officer. In all situations, the Custody Module should clearly document the actions taken to have a registered health professional conduct or ambulance officer an assessment.

Risk factors

As the level of intervention increases, the level of risk to Police employees and the public increases. To manage the risks you must:

- be trained in the safe application of the Police-approved spitting hood
- assess and reassess any risk frequently during and after the spitting hood has been applied
- **not use** the spitting hood on anyone who is vomiting, having difficulty breathing or bleeding profusely from the mouth and nose area.

<u>1</u> Dunlea concerned an Armed Offenders Squad evacuation of a two unit flat where flat 1 contained armed robbers and flat 2 innocent citizens. Police handcuffed two of the innocent citizens when they exited their flat just as the AOS prepared to begin their raid. Although upholding the complaint on other grounds, the Court of Appeal found that the initial handcuffing was operationally justified.