

Solano County Health & Social Services Department



Mental Health Services
Public Health Services
Substance Abuse Services
Older & Disabled Adult Services

Eligibility Services
Employment Services
Children's Services
Administrative Services

Patrick O. Duterte, Director

EMERGENCY MEDICAL SERVICES AGENCY

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POLICY MEMORANDUM 6143

DATE: 9/1/2005

REVIEWED/APPROVED BY:

Handwritten signature of Steven P. Whiteley in black ink.

STEVEN P. WHITELEY, MD, EMS AGENCY MEDICAL DIRECTOR

Handwritten signature of Michael A. Frenn in black ink.

MICHAEL A. FRENN, EMS AGENCY ADMINISTRATOR

SUBJECT: PATIENT RESTRAINT POLICY

AUTHORITY: CALIFORNIA HEALTH & SAFETY CODE, SECTION 1798.220.

PURPOSE:

Provide guidance in the use of restraints in the field or during transport for patients who are violent, may become violent, or may potentially harm themselves or others. Restraints are used to ensure the protection and safety of both rescuers and patients

I. DEFINITIONS:

- A. Restraint: refers to the process of the physical hindrance of a violent or combative patient from harming himself/herself or others when verbal means of control have failed
- B. Control Devices or Restraints: The type of limb-holding device used to prevent the patient from harming himself/herself. The limb-holding device used on the patient shall be made of leather or cloth. Handcuffs will not be used by field care personnel.

II. TYPES OF RESTRAINTS

- A. Authorized types of restraints for EMS Personnel:
 - 1. Commercially manufactured soft restraints.
 - 2. Commercially manufactured leather/Velcro-type
 - 3. Sheets
 - 4. Seat belt type restraints.
- B. Unauthorized types of restraints for EMS Personnel:
 - 1. Choke holds.
 - 2. Plastic ties
 - 3. Handcuffs
 - 4. "Hobbles" or "Hog-tied" restraints.

III. PROCEDURE

- A. Scene safety is the first priority for the rescuers. If law enforcement presence is needed, then the rescuers should wait until law enforcement arrives before patient contact is initiated, if possible.
- B. Always attempt to verbally de-escalate a patient's aggressive or assaultive behavior with a calm and reassuring approach to patient care.
- C. There are a number of medical conditions that can cause a patient to act in a dangerous or assaultive manner. Obtain a detailed medical history, including drug and alcohol use, from any family members, bystanders or law enforcement personnel in the vicinity.
- D. Restraints should only be used as a last resort and should be placed on the patient in a non-antagonistic manner.
- E. Once the decision is made to use restraints on a patient, use the minimum number of EMS personnel required, the minimum amount/type of restraint necessary and the minimum amount of force.
- F. The restraints shall not be placed in such a way to preclude evaluation of the patient's medical status (e.g., airway, breathing, circulation), necessary patient care activities, or in any manner that will jeopardize the patient medically.
- G. Unless there is an urgent medical indication for the immediate removal of the restraint, they should not be removed until sufficient personnel are available to maintain control of the patient.
- H. If the patient has been handcuffed, placed in plastic ties or "hogtied", the patient should be accompanied by a law enforcement officer in the back of the ambulance, possible. If it is not possible then law enforcement will directly follow the ambulance in their patrol car.
- I. Notify the Base Hospital of the use restraints to control a violent patient.

IV. CONTINUOUS QUALITY IMPROVEMENT

- A. The following information will be annotated on the PCR:
 - 1. Time of Base Physician contact.
 - 2. Type of restraint used on the patient.
 - 3. Specific reason(s) for the application of restraints.
 - 4. Annotate the "Airway, Breathing, Circulation Assessment" before and after the patient is placed into restraints, at a minimum. This assessment will be completed frequently on the restrained patient.
 - 5. Monitor restrained extremities for circulation, motor and sensory functions every fifteen (15) minutes and annotate on the PCR.

- B. Any situation that falls outside "Normal Operations" will have an "Unusual Occurrence" form completed and filed, per Solano County Policy 2300.