

COLUMBIA POLICE DEPARTMENT

Policy and Procedure Manual

HANDCUFFING AND RESTRAINTS

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CALEA 6th Edition Standard: 4.1.5; 70.2.1

306 HANDCUFFING AND RESTRAINTS

306.1 PURPOSE AND SCOPE

This policy describes the various restraining devices used by members of this department and provides guidelines for their use during detentions, arrests, and transportation of detainees.

306.2 POLICY

The Columbia Police Department authorizes the use of restraint devices in accordance with this policy, the Response to resistance Policy and department training. Restraint devices shall not be used to punish, to display authority or as a show of force.

306.3 AUTHORIZED RESTRAINTS

Only department-authorized devices may be used by members trained in the specific device. The following is a list of restraint devices authorized for use by members of this department:

- a. Handcuffs (chain and hinged);
- b. Leg restraints;
- c. Plastic handcuffs;
- d. Transport belts, waist or belly chains, transportation chains or other similar devices;
- e. Spit hood/Masks/Socks; and
- f. Restraint chair.

The department realizes that exigent and/or other unforeseen circumstances may dictate the use of other materials or devices available at the time for the temporary detention of individuals to enable officers to perform necessary law enforcement functions. In such instances the temporary unauthorized restraints should be replaced with authorized devices as soon as practical and safe to do so.

306.4 USE OF RESTRAINTS

Only members who have successfully completed Columbia Police Department-approved training on the use of restraint devices described in this policy are authorized to use these devices.

When deciding whether to use any restraint, officers should carefully balance officer safety concerns with factors that include, but are not limited to:

- a. The circumstances or crime leading to the detention/arrest;
- b. The demeanor and behavior of the detained/arrested person;
- c. The age and health of the person;

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- d. Whether the person is known to be pregnant;
- e. 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; and
- f. Whether the person has any other apparent disability that would factor into restraining decisions.

306.4.1 RESTRAINT OF DETAINEES

The use of restraints on detainees should continue only for as long as is reasonably necessary to assure the safety of officers, others and any articulable flight risk and/or severity of the crime investigated. 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.

306.4.2 RESTRAINT OF PREGNANT PERSONS

Persons who are known to be pregnant should be restrained in the least restrictive manner that is effective for the purposes of the restraint.

No person who is in labor shall be handcuffed or restrained except in extraordinary circumstances and only when a supervisor makes an individualized determination that such restraints are necessary to prevent escape or injury.

306.4.3 RESTRAINT OF JUVENILES

A juvenile under 14 years of age should not be restrained unless he/she is suspected of a dangerous felony or when the officer has a reasonable suspicion that the juvenile may resist, attempt escape, injure him/herself, injure the officer, others or damage property. Additional information regarding the temporary custody of juveniles is located in Policy 324.

306.4.4 RESTRAINT OF COMBATIVE/RESISTING DETAINEES

Often we have to detain/arrest/transport individuals who are combative or actively resisting being restrained. In all instances where a subject has been restrained, employees will be mindful and watch for signs of distress from the detainee. Positional restraint asphyxia and excited delirium may contribute to serious physical injury or death of a detainee. Chances for these conditions increase when the detainee's normal breathing is affected, such as:

- a. When the detainee is restrained face-up or face down with pressure on the back or chest;
- b. The restrained detainee violently struggles against restraint attempts;
- c. The detainee is intoxicated; and
- d. Chemical agents are deployed and affect normal breathing.

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For these reasons every effort should be taken to prevent the transport of a restrained individual who is laying down on either their back or front side.

The term/method commonly referred to as “hog tying” is not an approved use of a control device/method/technique and is prohibited.

Medical assistance/evaluation shall be sought for any detainee who violently resisted being restrained, continued resistance once in restraints, shows signs of physical distress, labored breathing, sustained or complains of injury as described in Policy 300. Any individual exhibiting signs of physical distress after an encounter should be continuously monitored until he/she can be medically assessed (300.5)

306.4.5 RESTRAINING DISABLED/INJURED OR SICK DETAINEES

At times we may need to restrain disabled/injured or sick persons who are being detained, arrested or transported as such. It should not be assumed that restraining devices are unnecessary for disabled/injured or sick detainees. Likewise, based on the situation and circumstances, not all disabled/injured or sick detainees will require restraints. Each situation will be unique and decisions should be based on reasonable articulable circumstances with consideration for the safety of all involved. If time allows, a supervisor may be consulted if needed.

306.5 APPLICATION OF HANDCUFFS OR PLASTIC CUFFS

Handcuffs, including specifically designed temporary nylon or plastic cuffs that have been department approved, may be used only to restrain a person's hands to ensure officer safety. Improvised restraints (e.g. zip ties) shall not be used except in the most extreme circumstances that outweigh the injury potential of using such items.

Although recommended for most arrest and transport 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.

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 and/or injury to the hands and/or wrists. If a detainee complains that the restraint has been applied incorrectly or too tight, the restraint should be checked for proper fit and application as soon as is practical.

Handcuffs should be removed as soon as it is reasonable or after the person has been searched and is safely confined within a detention facility.

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306.5.1 TRANSPORTS OF EXTENDED DURATION

For situations where the transport of a detainee/prisoner is expected to be of an extended duration, and the situation reasonably allows for a lower level of restraint, the use of belly chains, leg restraints, and handcuffing to the front may be considered for detainee comfort.

306.5.2 RESTRAINING LARGER PERSONS/SPECIAL CIRCUMSTANCES

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.

306.5.3 HANDCUFFING TO FIXED OBJECTS

Generally, officers should not handcuff a person to a fixed object unless exigent circumstances exist making the action reasonably necessary to prevent serious physical injury to the officer, another or prevent the detainee from causing property damage. Officers may handcuff a person to a restraint ring in an interview room whenever the person is lawfully in police custody

306.6 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.

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. They are generally used during application of a physical restraint, while the person is restrained, or during or after transport.

Officers utilizing spit hoods should ensure that the 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. 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. In such cases, prompt medical care should be obtained. If the person vomits while wearing a spit hood, the spit hood should be promptly removed and discarded. 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.

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.

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306.7 APPLICATION OF AUXILIARY RESTRAINT DEVICES

Auxiliary restraint devices include transport belts, waist or belly chains, transportation chains, leg irons 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.

Only department-authorized devices may be used by members trained in the specific device. Any person in auxiliary restraints should be monitored as reasonably appears necessary.

306.8 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.

In determining whether to use the leg restraint, officers should consider:

- a. Whether the officer or others could be exposed to injury due to the assaultive or resistant behavior of an arrestee;
- b. Whether it is reasonably necessary to protect the arrestee 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);
- c. Whether it is reasonably necessary to avoid damage to property (e.g., kicking at windows of the patrol unit); and
- d. Whether there is a reasonable belief based on articulable facts that the arrestee poses a flight risk.

306.8.1 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;
- 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 his/her stomach for an extended period of time;
- d. The restrained person should be monitored by an officer while in the leg restraint. The officer should ensure that the person does not roll onto and remain on his/her 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; and
- f. When transported by ambulance/paramedic unit, the restrained person shall be accompanied by an officer. The transporting officer should describe to medical personnel any unusual behaviors or other

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circumstances the officer reasonably believes would be potential safety or medical risks to the subject (e.g., prolonged struggle, extreme agitation, impaired respiration).

306.9 RESTRAINT CHAIR

The restraint chair may be used when a person is an immediate threat to him/herself, an officer, or others, or when a person is actively resisting an officer. Officers should obtain approval from a supervisor before utilizing the restraint chair whenever possible. A person should be released as soon as it appears reasonably likely that the person will no longer be a threat and is no longer likely to resist.

A subject who is placed in the restraint chair shall be constantly monitored for indications of distress and labored breathing until they can be medically assessed.

No person should be held in the restraint chair for longer than two (2) hours unless extreme conditions exist regarding the actions of the person being detained. In such cases a supervisor shall be notified.

Any use of the restraint chair, other than for training purposes, requires at a minimum a Blue Team report/entry in addition to documentation in other appropriate reports.

Officers shall never use the restraint chair to punish, display authority, or as a show of force.

306.10 REQUIRED DOCUMENTATION

If an individual is restrained and released without an arrest, use of the restraints shall be documented in the CAD system using disposition code "Handcuff/Restraint Without Arrest". The officer shall document the details of the detention and the need for handcuffs or other restraints in any report deemed necessary by the situation.

If an individual is arrested, the use of restraints other than handcuffs shall be documented in the related report. The officer should include, as appropriate:

- a. The amount of time the suspect was restrained;
- b. How the suspect was transported and the position of the suspect;
- c. Observations of the suspect's behavior and any signs of physiological problems; and
- d. Any known or suspected drug use or other medical problems.

306.11 TRAINING

Only members who have successfully completed Columbia Police Department-approved training on the use of restraint devices described in this policy are authorized to use these devices.

At least biennially, in-service training on the use of restraint devices and weaponless control techniques will be provided from a certified instructor. The Training and Recruitment Unit will maintain training records for all employees.