



TED STRICKLAND
GOVERNOR
STATE OF OHIO

Executive Order 2009 – 13S

Establishing Restraint Policies Including a Ban on Prone Restraints

- 1. Ohio Has Taken Steps to Address the Risks Posed By the Use of Restraints.** Upon my direction, seven state departments joined together to create a work group dedicated to researching issues related to the use of physical restraints when providing their respective services. The work group focused on prone restraint, defined as all items or measures used to limit or control the movement or normal functioning of any portion, or all, of an individual's body while the individual is in a face-down position for an extended period of time, and transitional hold, defined as a brief physical or manual positioning of an individual face-down for the purpose of quickly and effectively gaining physical control of that individual in order to prevent harm to self or others, or prior to transport to enable the person to be transported safely. The seven state departments that joined together are: the Ohio Departments of Mental Retardation and Developmental Disabilities, Mental Health, Alcohol and Drug Addiction Services, Youth Services, Education, Job and Family Services, and Health.
- 2. Ohio is Committed to Providing Services in a Safe, Caring, and Therapeutic Manner.** Each of the departments listed above serve our citizens in different ways. There are occasions where they must all respond to situations where our citizens receiving services engage in behavior that is potentially harmful to themselves and others. Ohio is committed to having these and other state departments respond to such situations in a manner that focuses on assisting citizens to live meaningful lives that are free of coercion or violence of all kinds. Services are provided by a caring and competent workforce in the safest and least intrusive or restrictive method available. The use of restraint is a method of last resort and the exception rather than the norm for daily delivery of services. The focus of these state service providers should be on using a positive approach and reducing the need for physical intervention.

3. **Research Has Shown That the Prone Position is a Hazardous and Potentially Lethal Restraint Position.** Accepted research has shown that there is a risk of sudden death when restraining an individual in a prone position. The prone position occurs when an individual is face-down. This research has led other states to prohibit the use of this restraint technique.
4. **Ohio Adopts the Following Policy on the Use of Prone Restraint, Transitional Hold, and Other Types of Physical Restraint.**

I hereby order the Ohio Departments of Mental Retardation and Developmental Disabilities, Mental Health, Alcohol and Drug Addiction Services, Youth Services, Education, Job and Family Services, Health, Aging, Commerce, Natural Resources, Public Safety, Rehabilitation and Correction, and Veterans Services, and the Ohio Board of Regents to immediately adopt the following Policy on the Use of Prone Restraint, Transitional Hold, and Other Types of Physical Restraint. This policy may be incorporated into pre-existing policies to the extent that the pre-existing policies do not conflict with the policy below. The safeguards contained within this policy should be seen as the minimum acceptable standards. Each department retains the right to adopt safeguards which are more restrictive (meaning they permit even less physical restraint) than those in the policy, as it deems appropriate for its delivery of services. In addition, law enforcement will ensure that their related, internal policies are consistent with the policy below.

Policy on the Use of Prone Restraint, Transitional Hold, and Other Types of Physical Restraint

- A. **PRONE RESTRAINT:** The use of the prone restraint is prohibited across all state systems. Prone restraint is defined as all items or measures used to limit or control the movement or normal functioning of any portion, or all, of an individual's body while the individual is in a face-down position for an extended period of time. Prone restraint includes physical or mechanical restraints.
- B. **TRANSITIONAL HOLD:** Transitional hold is defined as a brief physical positioning of an individual face-down for the purpose of quickly and effectively gaining physical control of that individual in order to prevent harm to self and others, or prior to transport to enable the individual to be transported safely. Transitional hold may include the use of handcuffs or other restraints incident to arrest or temporary detention by law enforcement consistent with departmental policy.

The use of transitional hold may be permitted only when all of the following conditions are met and as determined by departmental policy:

1. Transitional hold may be applied only by staff with current training on the safe use of this procedure, including how to recognize and respond to signs of distress in the individual;
2. Transitional hold may be applied only in a manner that does not compromise breathing, including the compromise that occurs with the use of: (1) pressure or weight bearing on the back; (2) soft devices such as pillows under an individual's face or upper body; or (3) the placing of an individual's or staff's arms under the individual's head, face, or upper body;
3. Transitional hold may be applied only for the reasonable amount of time necessary to safely bring the person or situation under control and to ensure the safety of the individuals involved; and
4. Transitional hold may be applied only with consistent and frequent monitoring during and after the intervention with every intent to assure that the person is safe and suffers no harm.

C. **LIMITATIONS ON THE USE OF OTHER TYPES OF PHYSICAL RESTRAINT:** Because physical restraint, in general, is not viewed as a therapeutic or beneficial intervention, other types of physical restraint are to be used only when there is risk of escape or harm to the individual or others, or by personnel within the specific guidelines of a secured facility. A secured facility is defined as any site that is designed and operated to ensure that all of its entrances and exits are locked and under the exclusive control of its staff and to ensure that, because of that exclusive control, no person who is institutionalized or confined in the facility may leave the facility without permission or supervision. Physical restraint may only be used by trained staff and under the approval, guidance, and restrictions as outlined within each department's policies.

5. **Ohio Will Take Steps To Address the Use of Restraint and Seclusion By Establishing the Ohio Policy Committee on Restraint and Seclusion.** The use of restraint and seclusion can have a lasting impact on both individuals receiving care and the caregivers themselves. In order to ensure that Ohio is establishing best practices in regard to the use of such interventions, I am hereby establishing the Ohio Policy Committee on Restraint and Seclusion, which will be an extension of the work done to date by the seven state departments identified above.

A. This Committee will be comprised of members appointed by the directors of the following departments:

1. Ohio Department of Mental Retardation and Developmental Disabilities
2. Ohio Department of Mental Health
3. Ohio Department of Alcohol and Drug Addiction Services
4. Ohio Department of Youth Services
5. Ohio Department of Education
6. Ohio Department of Job and Family Services
7. Ohio Department of Health
8. Ohio Department of Aging
9. Ohio Department of Commerce
10. Ohio Department of Natural Resources
11. Ohio Department of Public Safety
12. Ohio Department of Rehabilitation and Correction
13. Ohio Department of Veterans Services
14. Ohio Board of Regents

B. The Committee is charged with creating a single state policy on the use of restraint and seclusion founded on the principle that individuals served by these departments should be treated with dignity, respect, and the utmost regard for physical safety, and emotional and psychological well-being. The policy will include: identification of the risks associated with restraint and seclusion, outlining of required training components, tracking and reporting the policy's requirements, and performance improvement.

6. I signed this Executive Order on August 3, 2009, in Columbus, Ohio, and it will not expire unless it is rescinded.



Ted Strickland

Ted Strickland, Governor

ATTEST:

Jennifer Brunner, Secretary of State