

Chapter: Internal Reporting and Incident Response	<b>Effective Date: 2/15/16</b>
<b>Title: Use of Force Implementation and Review Requirements</b>	Page: 1 of 6
ACA: 4-JCF-2A-16, 2A-27, 2A-29	Replaces: GAP.07.23, 10/15/14
Implements: GAP.380.9723	

(a) **Policy.**

Force is used only when authorized by [GAP.380.9723](#). When force is used, only approved techniques and equipment are used. Following each use of force, all required medical assessments, documentation, and supervisory reviews are completed.

(b) **Applicability.**

This policy applies to all residential facilities and parole services operated by the Texas Juvenile Justice Department (TJJD).

(c) **Approved Equipment.**

(1) **Mechanical Restraint Equipment.**

The following devices are the only agency-approved mechanical restraint equipment:

- (A) **Handcuffs** – metal devices fastened around the wrist to restrain free movement of the hands and arms.
- (B) **Wristlets** – a cloth or leather band fastened around the wrist or arm that may be secured to a waist belt.
- (C) **Plastic Flex Cuffs** – plastic devices fastened around the wrist to restrain free movement of the hands and arms and used only for riot control.
- (D) **Anklets** – a cloth or leather band fastened around the ankle or leg.
- (E) **Leg Irons** – a metal device with a length of chain fastened around the ankle to limit movement of the legs. Handcuffs may not be used to cuff the ankles.
- (F) **Transportation Belt/Chain and/or Belly Chain** – cloth, leather, or metal links that are fastened around the waist. The transportation belt is used to secure the arms to the sides or front of the body.
- (G) **Waist Band** – leather band fastened around the waist designed to be used with wristlets and to restrain free movement of the hands and arms.
- (H) **Transport Box** – a small metal box that may be used to secure handcuffs while using a transportation chain.
- (I) **Padlocks** – used to secure transport boxes.
- (J) **Mittens** – a cloth, plastic, foam rubber, or leather hand covering fastened around the wrist or lower arm. Acceptable fasteners include elastic, Velcro®, ties, paper tape, and pull strings.
- (K) **Helmets** – a plastic, foam rubber, or leather head covering. If appropriate, a face guard may be attached to the helmet. The device must be the proper size for the youth, and the chin strap must not be so tight as to interfere with circulation.
- (L) **Spit Mask** – a cloth, paper, or nylon covering that is designed to prevent spitting and to discourage biting.

- (M) **Transport Leg Brace** – a metal and nylon device that allows a person to walk but impedes running or kicking. This device can be worn under trousers.

(2) **Oleoresin Capsicum (OC) Delivery Equipment.**

OC is approved for use only in institutions. The following devices are the only agency-approved OC delivery equipment:

(A) **Aerosol Canisters.**

- (i) MK-3, MK-4, MK-9 are the only sizes approved as carry-on-person devices.
- (ii) MK-9 Cell Busters are authorized for use only in barricade situations.
- (iii) MK-21 and MK-46 sizes are authorized for use only in riot control situations.

(B) **Powder.**

Muzzle blast powder, delivered by a 37-mm gas gun, is authorized for use only in riot control situations.

(C) **Liquid.**

A pepper fogger is authorized for use only in riot control situations.

(3) **Personal Protective Equipment for Staff.**

Restraint-related personal protective equipment is authorized for use only during planned team restraints and during riot control situations. Restraint-related personal protective equipment includes, but is not limited to, the following:

- (A) protective helmet;
- (B) protective vest;
- (C) protective plastic shield;
- (D) protective elbow pads; and
- (E) protective knee pads.

(d) **Procedures.**

(1) **Documentation Requirements.**

(A) **Exceptions.**

Paragraphs (B)-(D) below apply to all uses of force **except**:

- (i) four-point restraints;
- (ii) physical escorts;
- (iii) routine use of mechanical restraints during transportation; and
- (iv) routine use of mechanical restraints in a security unit, crisis stabilization unit (CSU), or the Phoenix Unit.

(B) **Participants.**

- (i) The **staff member primarily responsible for initiating the use of force** completes:
  - (I) a Use of Force Report, [CCF-260](#); and
  - (II) one of the following:

- (-a-) an Incident Report form, [CCF-225](#), if he/she is also responsible for documenting the incident that caused the need to use force; or
- (-b-) a Continuation Sheet, [CCF-500](#), if another staff member is responsible for documenting on a CCF-225 the incident that caused the need to use force.

Note: If a youth was not the intended target of OC spray but was exposed to OC by cross-spray, the **staff member who used OC** must complete a CCF-225 for that youth.

- (ii) Any **other staff member who participated in the use of force** completes a CCF-500 to document his/her role in the use of force.

(C) **Supervisors.**

The **security dorm supervisor** (institutions), **assistant superintendent** (halfway houses), or **parole supervisor** (parole offices) or their designee:

- (i) reviews and signs each CCF-225 and [CCF-260](#), checking for completeness, accuracy, and policy compliance; and
- (ii) attaches any relevant CCF-500 forms.

(D) **Chief Local Administrator.**

The **chief local administrator (CLA) or designee**:

- (i) completes and submits an Initial Report of Serious Incident form ([CCF-350](#), [-351](#), or [-352](#)) as required by [GAP.07.03](#) if the use of force involved a serious or critical incident;
- (ii) completes and submits a Critical Incident Debriefing Review form, [CCF-355](#), as required by GAP.07.03 if the use of force involved OC spray; and
- (iii) signs all CCF-225 and CCF-260 forms documenting the use of force within:
  - (I) 21 calendar days at institutions; or
  - (II) seven calendar days at halfway houses and parole offices.

(E) **Four-Point Restraints.**

For uses of force involving four-point restraints, see [HSP.04.11](#) for documentation requirements.

(2) **Medical Follow Up and Documentation.**

(A) **Institutions.**

- (i) As required by [GAP.380.9723](#), the facility staff ensures each youth involved in a manual restraint or exposed to OC spray is seen by a nurse for a medical assessment as soon as reasonably possible under the totality of the circumstances. The results of the medical examination are documented in the Electronic Medical Record.
- (ii) If the youth is seen in the security unit, the **nurse** also completes the Security Unit: Nurse's Log form, [INS-217](#), in accordance with [HSP.04.14](#).

- (iii) To ensure medical assessments are occurring following OC exposure, the **security dorm supervisor**:
  - (I) checks with infirmary staff at least once per week to get a list of youths who have received a medical assessment after decontamination from OC exposure;
  - (II) compares that list against [CCF-225](#) and [CCF-352](#) reports involving use of OC during the same time period; and
  - (III) documents any discrepancies and corrective actions on the monthly OC report submitted to Compliance and Accountability staff in the State Programs and Facilities Division.
- (B) **Halfway Houses.**
  - (i) As required by [GAP.380.9723](#), the halfway house staff consults with medical staff at the designated institution's infirmary after each use of force as soon as possible. Halfway house staff members describe any suspected injuries and follow any instructions provided by infirmary staff.
  - (ii) Results of the consultation are documented on the [CCF-260hwh](#).
- (3) **Medical Alert Lists (Institutions Only).**

The **facility health services administrator** maintains a list of youth who have been identified as having health conditions that direct care staff members need to be aware of, including any conditions the TJJJD medical director has identified as contraindicating the use of OC spray. This list is updated and distributed in accordance with [HSP.10.04](#).
- (4) **Use of Mechanical Restraints in the Security Unit, CSU, or Phoenix Unit (Institutions Only).**
  - (A) *Routine use* of mechanical restraints in a security unit, CSU, or Phoenix Unit includes moving youth to/from shower routine, between cells/pods, to/from a hearing room, and other similar situations. If the youth becomes non-compliant during the movement, the situation is no longer considered routine and the documentation requirements below will apply.
  - (B) The **administrative duty officer (ADO)** ensures that each non-routine use of mechanical restraints in the security unit and justification for the restraint are documented on the Security Unit: Daily Log form, [INS-211](#) (in addition to the CCF-225 and [CCF-260](#)).
  - (C) The **ADO** ensures the 15-minute breathing and circulation checks are documented on the Mechanical Restraint Supervision Log form, [INS-250](#).
  - (D) If the youth continues to display behavior that meets criteria for restraint, the **ADO** ensures approval for an extension beyond the first 30 minutes and every two hours after that is:
    - (i) obtained from the superintendent or designee; and
    - (ii) documented on the INS-250.
  - (E) The **ADO** ensures:
    - (i) restraints are removed when the purpose for the restraint has been achieved; and
    - (ii) the release from mechanical restraints is documented on the CCF-260 and INS-250.

(5) **Use of Force Reviews.**

(A) **Reviews by State Programs and Facilities Staff.**

- (i) The **security dorm supervisor, chairperson of the Use of Force Review Board, and either the superintendent or assistant superintendent** review and sign each completed [INS-250](#) and [CCF-260](#). In the absence of any of the preceding staff positions, a designee of the superintendent may review and sign the forms.
- (ii) **Designated State Programs and Facilities staff members** review use of force incidents on a monthly basis to identify causes, contributing factors, system-wide trends, and potential training needs.

(B) **Reviews by the Office of Inspector General.**

The **Office of Inspector General (OIG)** reviews each use of force and takes appropriate action with regard to any violations of law or policy.

(C) **Use of Force Review Boards.**

Each TJJJ-operated institution and halfway house must have a Use of Force Review Board.

(i) **Members.**

Each Use of Force Review Board includes at least the following members:

<b>Institutions</b>	<b>Halfway Houses</b>
<ul style="list-style-type: none"> <li>• assistant superintendent (chair)</li> <li>• manager of operations and security</li> <li>• security dorm supervisor</li> <li>• at least two other dorm supervisors or program specialists</li> </ul>	<ul style="list-style-type: none"> <li>• superintendent (chair)</li> <li>• assistant superintendent</li> <li>• JCO VI</li> </ul>

(ii) **Meetings.**

Meetings must be held as follows:

<b>Institutions</b>	<b>Halfway Houses</b>
At least twice per month (but can be held more frequently if directed by the superintendent)	Within 14 calendar days after each incident involving use of force

(iii) **Responsibilities.**

- (I) In institutions, the **Use of Force Review Board** must review each use of force incident involving OC spray or an injury to youth or staff and any other use of force incidents selected by the chairperson.

Note: The chairperson also reviews findings from use of force investigations completed by the OIG or Administrative Investigations Division to determine whether the Use of Force Review Board should review the incident in light of the investigative findings.

- (II) In halfway houses, the **Use of Force Review Board** must review each use of force.
  - (III) The **Use of Force Review Board** reviews all applicable documents/sources of information to:
    - determine whether TJJD policies were properly applied;
    - determine whether documentation was accurate and complete;
    - identify training needs; and
    - identify ways to expand prevention efforts.
  - (IV) The **chairperson** ensures minutes are taken during each Use of Force Review Board meeting. At a minimum, the minutes must include a listing of each incident reviewed and any corrective actions recommended. The chairperson also ensures the minutes are maintained in accordance with the agency's records retention schedule.
  - (V) The **chairperson** may distribute the minutes to appropriate facility staff to develop corrective action plans as appropriate.
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