

Jeffrey A. Meyers Commissioner

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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

OFFICE OF HUMAN SERVICES

DIVISION FOR CHILDREN, YOUTH & FAMILIES

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2019 NOTICE REGARDING THE USE OF PRONE RESTRAINTS

Dear Program Director:

This guidance is being sent to you because you operate a facility defined in RSA 126-U:1. This guidance contains important information regarding the use of restraint that you should promptly incorporate into your policies and procedures.

RSA 126-U:4 prohibits the use of dangerous restraints described as: I. Any physical restraint or containment technique that:

- (a) Obstructs a child's respiratory airway or impairs the child's breathing or respiratory capacity or restricts the movement required for normal breathing;
- (b) Places pressure or weight on, or causes the compression of, the chest, lungs, sternum, diaphragm, back, or abdomen of a child;
- (c) Obstructs the circulation of blood;
- (d) Involves pushing on or into the child's mouth, nose, eyes, or any part of the face or involves covering the face or body with anything, including soft objects such as pillows, blankets, or washcloths; or
- (e) Endangers a child's life or significantly exacerbates a child's medical condition.

The Department recommends against the use of prone restraints and we encourage you to update your policies and procedures accordingly. This position is discouraged because it may impair normal breathing and/or circulation, particularly if the youth is agitated, on certain medications or has a medical condition that may be exacerbated by the prone position.

The term "prone restraint" describes when a youth is face-down on the floor, bed, or other surface and held there by one or more staff so the youth is unable to rise. This does not include the use of a transitional hold for the purpose of quickly and effectively gaining physical control of an individual in order to prevent harm to himself or others, or prior to transport to enable the individual to be transported safely. If a physical intervention inadvertently results in a youth being placed in a prone position, facility staff should reposition the youth to a safer non-prone position.

Thank you for your prompt attention to this guidance.