

## Use of Force Recommendation 66

Policy Creation for use of RIPP Restraints



## Agenda

- Recommendation Highlights
- Current Policy
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- Industry Trends
- Pros and Cons
- Committee Input
- Final Guidance
- Discussion



## Recommendation Highlights

- MPD policy DPM 2.4.65 Restraining Prisoners, describes positional asphyxia and procedures when handling subjects who have been restrained (handcuffed).
- Department policy does not specifically outline the use of RIPP restraints [hobbles], nor does it describe special considerations that must be taken when RIPP restraints are used on a prisoner.
- Create a policy the addresses the use of RIPP restraints

#### **Current Policy**

- Restraining Prisoners DPM 2.4.65
- Avoiding Positional Asphyxia
- Anytime maximum restraint is used, or anytime a suspect exhibits bizarre behavior before, during or after control is applied, watch the suspect closely for breathing difficulties.
- Sometimes multiple officers are necessary to overcome the strength of a suspect.
- It may be necessary to use the weight of several officers to hold a subject down while handcuffs or other restraints are applied.
- Once the individual is controlled, quickly remove the weight to allow the subject to breathe freely.
- Roll subject onto side or into a sitting position as soon as possible.
- Transport in an upright/seated position.
- Obtain medical care immediately if subject has any breathing difficulties or if requested by the subject.



## Gap Analysis

#### **Current Policy**

 The current policy on restraining prisoners does not address the use of RIPP restraints/hobbles

#### Recommendation

 Add additional language to address the use of RIPP restraints/hobbles to the current policy (DPM 2.4.65 Restraining Prisoners)



#### Language to be added

#### Insert in current policy between "General Guidelines for Restraints" and "Head Nets"

- Description of RIPP/Hobble restraints
  - · Permanent loop made of nylon webbing with a bronze snap and a one-way jawed alligator clip
  - Self locking clip holds the permanent loop into place
- Proper application guidelines (1<sup>st</sup> level and 2<sup>nd</sup> level)
  - Allows for the transport of prisoners in vehicles in an upright, seated position, but removes the ability to kick doors and windows
  - Can be used at 2<sup>nd</sup> level as a restraining tool of a handcuffed prisoner.
    - This is for extremely combative prisoners
    - the prisoner should immediately be placed on their side and avoid leaving them in a face down position.
    - Monitor the prisoner closely for signs of labored breathing
    - Advise a supervisor via radio as soon as practicable
    - As soon as possible, the restraint should be removed from around the handcuffs and the prisoner secured in a patrol vehicle in a seated position.
- Safety concerns when using and guidelines for care of prisoners being restrained
  - · Positional Asphyxia
  - · Nerve damage to wrists
  - Sternum cartilage

## Industry Trends

- Phoenix PD Leg restraints RIPP
- Scottsdale PD Handcuffing RIPP restraints
- Gilbert PD Restraint devices (handcuffing)
  - Leg restraints



#### Pros and Cons

Reasons **for** adopting the recommendation

- Clarifies guidelines for RIPP restraint procedures and use.
- Limits confusion on having a separate policy from other restraints

List the reasons **against** adopting the recommendation

• Not having a separate policy for RIPP restraints



### Committee Input

- Policy Recommended updating policy currently in place instead of new policy
- Committee members concurred.



# Final Guidance

• Add language to current policy DPM 2.4.65 – Restraining Prisoners that address the use of RIPP restraints.





Discussion