Volume F - Use of Force and Restraints

F05.00.00 Use of Force and Restraints

F05.01.00 Written Policies and Procedures

F05.01.01 Written Policy and Procedure Required

These written policies and procedures govern the use of force and the use of restraint devices.

F05.01.02 Content

Policies and procedures relating to use of force and restraints include, but are not limited to:

A. Justification for the use of force;
B. Determining the appropriate level of force to be used in a given situation;
C. A prohibition against using force as a punishment;
D. Use of weapons and other control devices;
E. Use of restraints;
F. After-action requirements;
G. Authorization for use of force and restraints; and
H. Documentation.

F05.02.00 Use of Physical Force

F05.02.01 Purpose of Use of Force

A. Situations often occur in the jail, which require the use or threatened use of force to protect persons and property; and to respond to disturbances, escape attempts, and physical resistance to the lawful orders of jail staff. Situations requiring the use of force may not always provide adequate time to fully consider all possible options. Comprehensive directives and training are designed to help ensure better preparation in making judgments under circumstances, which may require the use of force.

B. Correctional deputies are justified in using force (other than deadly force) against another person when and to the extent that the deputy reasonably believes that such force is necessary for:
1. Self-defense;
2. Protecting others;
3. Preventing an escape;
4. Restoring and maintaining order and discipline, including overcoming a prisoner’s resistance to lawful orders;
5. Preventing the commission of a crime; and
6. Protection of property.

F05.02.02 Forced Cell Extractions Involving Mental Health Prisoners

Prisoners housed in Health Services and prisoners designated as seriously persistently mentally ill (SPMI) are afforded a unique level of care prior to using force. If the prisoner is an immediate threat to himself or others, reasonable force will be used. In situations where a prisoner is not an immediate threat to himself or others the following will take place:

A. A Registered Nurse and Mental Health Professional will assess the current situation and apprise the Incident Commander of any medical and or mental health concerns. This will include reviewing the prisoner’s medical history.

B. Recommendations from the medical and mental health staff will be communicated in writing to the Incident Commander within a reasonable time.

C. The Incident Commander will determine whether or not the use of force will be carried out and what type of force will be used.

F05.02.03 Use of Deadly Force

The use of deadly force will be made consistent with the Sheriff’s Office Policy Manual and the Utah State Code “UCA”.

A. Pursuant to UCA “(1) A peace officer, or any person acting by his command in his aid and assistance, is justified in using deadly force when:...

(b) effecting an arrest or preventing an escape from custody following an arrest, where the officer reasonably believes that deadly force is necessary to prevent an arrest from being defeated by escape; and

(i) the officer has probable cause to believe the suspect has committed a felony involving the infliction or threatened
infliction of death or serious bodily injury; or

(ii) the officer has probable cause to believe the suspect poses a threat of death or serious bodily injury to the officer or to others if apprehension is delayed;

(c) the officer reasonably believes that the use of force is necessary to prevent death or serious bodily injury to the officer or another person.

(2) If feasible, a verbal warning should be given by the officer prior to any use of deadly force pursuant to UCA.

F05.02.04 Prohibited Use of Force

a. In addition to the limits imposed or implied by F05.02.01 and F05.02.02, correctional deputies shall never use force;

1. For punishment, retaliation, or revenge;

2. In a purposeless, malicious, wanton, unnecessary, or sadistic manner; or

3. For the very purpose of causing harm.

b. Use of force in violation of these policies may violate the constitutional rights of the prisoner against whom the force is used.

F05.03.00 After - Action Follow Up

F05.03.01 Medical Examination and Treatment

A. Any use of force resulting in any obvious injury to a prisoner requires an immediate medical examination.

1. A prisoner allegation of a use of force related injury, no matter how slight, also requires an immediate medical examination.

2. Any use of force requiring an office report to be submitted by F05.04.03B also requires an immediate medical examination, whether or not there is obvious injury or prisoner complaint.

B. Medical examinations will be documented by a medical examination report completed by health services staff and placed in the prisoner’s medical record.
C. A medical examination and documentation is necessary to:

1. Identify obvious injuries requiring treatment;
2. Discover and treat undetected injuries;
3. Document the absence of injuries; and
4. Provide medical documentation to protect jail staff members from false or exaggerated claims of injury.

D. Timely treatment of serious medical needs is constitutionally required.

F05.03.02 Documentation Requirements

A. Documentation of the use of force and forcible application of restraints is essential to preserve information for future criminal, civil, or administrative proceedings. Office reports will include:

1. Justification for the use of force or restraints;
2. What officials knew at the time;
3. How the force and/or restraints were employed;
4. What efforts were made to achieve compliance, maintain discipline, or assert control prior to the use of physical force or restraint devices;
5. What, if any, injuries resulted to the involved prisoners and/or staff;
6. The actions of the involved prisoner(s); and
7. Other information necessary for criminal complaints and prosecution, disciplinary proceedings, and/or defense of civil litigation.

B. Any forcible application of restraints or any use of physical force beyond a single member using a twist-lock or rear wrist-lock, will be documented in an office report, by all office participants and witnesses.

1. Any use of physical force, including a single member using a twist-lock or rear wrist lock, that results in an obvious injury, results in the prisoner’s head striking a wall, floor, or solid object, or results in a prisoner allegation of an injury, will also be documented in an office report, by all office participants.
2. An exception to this documentation in an office report requirement is made if, during a booking search, a second member uses the same twist-lock or rear wrist-lock and/or an additional member is needed to restrain the lower legs, for safety reasons.

B. Uses of force will be recorded, if feasible. This includes all prisoner extractions and resolution of prisoner disorder.

C. All use of force reporting will be consistent with the Sheriff’s Office Policies and Procedures Manual Use of Force Reporting policies.

F05.03.03 Notifications

A. Each member shall make immediate verbal notification to his or her supervisor after any use of force, including a twist-lock or rear wrist-lock used to control a prisoner. This notification also requires the reporting of the incident in the supervisor’s shift log.

B. Each supervisor shall make immediate verbal notification to their supervisor and/or the Watch Command of any use of force requiring office reports or resulting in any injury to a prisoner no matter how slight, the placement of any prisoner in 4 point restraints, or any use of therapeutic seclusion. This notification also requires reporting the incident in the supervisor’s shift log.

C. Division Administrators shall be notified through the Watch Command Log, of any prisoner placed in 4-point restraints or placed in therapeutic seclusion. In the absence of the Watch Command, a notation shall be made by the on-coming Watch Commander from the supervisor’s logs.

F05.03.04 Use of Force Critiques

A. All use of force incidents requiring office reports will be critiqued.

B. The Use of Force Critique form will be completed by the involved member(s) immediate supervisor within 21 calendar days of the incident.

C. The supervisor’s immediate chain of command supervisor will be present during the critique. When disciplinary action is not anticipated, Watch Commanders may be requested to substitute for administrative convenience by the chain of command Division Administrators.

D. All personnel that used force will be included in the critique, when possible.

E. The critiquing supervisors will review and preserve all available recordings to ensure compliance with Sheriff’s Office Policies.

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F. The Use of Force Critique form will be forwarded to the appropriate Division Administrators, upon completion, for review.

G. Use of Force Critique forms are GRAMA classified as “protected.”

H. Original Use of Force Critique forms will be forwarded to the Administrative Services Division, for filing.

F05.04.00 Restraints

It is the policy of the Sheriff’s Office that a clear separation exists between the use of restraints for security purposes and the use of restraints for medical purposes.

A. The use of restraints for security purposes by sworn members is outlined in this section.

B. The use of restraints for medical purposes by Health Services Unit staff members is outlined in Jail Policy Intensive Medical Management and Health Services Unit Intensive Medical Management policy.

F05.04.01 Security or Custody Ordered Restraint

A. The use of restraints is to assist the sworn security staff in controlling prisoners;

1. During transport to and from the jail;

2. Who are in custody outside the confines of a jail facility;

3. During the pre-admission phase of the booking process;

4. As a precaution during suspicious circumstances or certain searches;

5. To take or maintain control of a non-compliant prisoner;

6. To prevent destruction of property;

7. To prevent a prisoner from self-inflicted injury,

8. To prevent a prisoner from harming others, or

9. Based on classification status.

B. The use of restraints to control prisoners during transport, while in custody outside the facility, and during the pre-admission process is
necessary to ensure the safety of the transporting deputy, booking staff, and other prisoners and to provide sufficient security and control to prevent prisoners from escaping. In addition to such routine uses, restraints may also be used to secure prisoners who are violent and require greater control than could be provided without the use of restraints. Restraints provide a practical and humane option for handling violent prisoners with a reduced risk of physical or psychological trauma.

C. In an emergency, the decision to make non-routine use of restraints may be made by the involved sworn staff. Continued use after the emergency has been resolved requires approval as specifically designated in this policy.

D. The use of restraints will be made consistent with post orders, training and the manufacturer’s instructions.

E. Restraints will not be used as a means of discipline, convenience or retaliation by sworn staff.

F05.04.02 Restraint Devices

A. Restraint devices include any device used to secure or control the hands, arms, feet, legs, head or torso of a prisoner.

B. Custody restraints are normally appropriate for use when routine control of movement of a prisoner is occurring, or to immediately respond to an emergency. The methods of restraints include but are not limited to:

1. Handcuffs,
2. Control tether,
3. Leg shackles,
4. Waist chains,
5. Protective helmets,
6. Humane Restraint,
7. Flexible plastic restraints

C. Full Body Restraint System

1. Full body restraint systems may be used on a violent or non-compliant prisoner to control an emergency, including transportation. This device severely limits the prisoner’s movement and should only be used according to the
manufacturers’ recommendations and until a more appropriate restraint system is available. All reasonable efforts will be made to safely remove the prisoner from the restraint including Intensive Medical Management.

2. Full body restraint systems will only be applied by properly trained staff, with the approval of the Incident Commander or Area Sergeant.
   
a. While in this restraint the Incident Commander will designate staff to monitor the prisoner at all times. The observation will be documented on the approved Restraint Log.

3. A Health Services Nurse will be notified of the application of the full body restraint system and conduct a medical evaluation as soon as feasible.
   
a. The Health Services Nurse will notify the Incident Commander or Area Sergeant of any medical concerns regarding the application of the full body restraint system.

b. If medical concerns exist, the Incident Commander will evaluate both those concerns and security needs to determine the need for removal from the restraint.

4. Use of the full body restraint system will be limited to one (1) hour.

5. Staff will pay close attention to any signs of medical distress.

6. All application and use of the full body restraint system will be documented as a Use of Force, on a Sheriff’s Office Initial Report, and video recorded.

7. Upon the initial application of the full body restraint system a Restraint Log will immediately be completed and reviewed by the Incident Commander or Area Sergeant. The Restraint Log will contain the following information:
   
a. Signature and IS of the approving Incident Commander or Area Sergeant.

b. The signature and IS of the screening Health Services Nurse;

c. The date and time of application;

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d. The time the prisoner must be removed from the restraint and;

e. The initials and IS of the Incident Commander, or Area Sergeant receiving the prisoner.

8. Use of a gurney is required when moving a prisoner in a full body restraint system.

9. An ambulance is the preferred method of emergency off-site transport for a prisoner in a full body restraint system. This requires a sworn supervisor’s approval.

10. Upon removal from the full body restraint, staff will continue to monitor the prisoner for an additional 20 minutes to ensure no medical conditions exist.

D. Restraint chair

The restraint chairs may be used on a violent or non-compliant prisoner to control an emergency and safely move prisoners within the facility. This device severely limits the prisoner’s movement, should only be used according to the manufacturers’ recommendations, and shall not be used as punishment. All reasonable efforts will be made to safely remove the prisoner from the restraint including Intensive Medical Management.

1. The restraint chairs used by the Sheriff’s Office are:

a. The Pro-Straint; and

b. The Emergency Restraint Chair (ERC).

2. Restraint Chairs will only be applied by properly trained staff, with the approval of the Incident Commander or Area Sergeant.

a. While in this restraint the Incident Commander will designate staff to monitor the prisoner at all times. The observation will be documented on the approved Restraint Log.

3. A Health Services nurse will be notified of the application of the Restraint Chair and conduct a medical evaluation as soon as feasible.

a. The Health Services Nurse will notify the Incident Commander or Area Sergeant of any medical concerns regarding the application of the Restraint Chair.
b. If medical concerns exist, the Incident Commander will evaluate both those concerns and security needs to determine the need for removal from the restraint.

4 Use of the restraint chair, will not exceed one (1) hour.

5 Staff will pay close attention to any signs of medical distress.

6 All application and use of the restraint chairs will be documented as a Use of Force, on a Sheriff’s Office Initial Report, and video recorded.

7 Upon the initial application of the Restraint Chair, a Restraint Log will immediately be completed and reviewed by the Incident Commander or Area Sergeant. The Restraint Chair Log will contain the following information:

   a. Signature and IS of the approving Incident Commander or Area Sergeant.

   b. The signature and IS of the screening Health Services Medical Nurse;

   c. The date and time of application;

   d. The time the prisoner must be removed from the chair and;

   e. The initials and IS of the Incident Commander, or Area Sergeant receiving the prisoner.

8 Upon removal from the restraint chair, staff will continue to monitor the prisoner for an additional 20 minutes to ensure no medical conditions exist.

9 Restraint chairs may be used to collect DNA samples per Utah State Code.

E. Non-Medical Seclusion

1. May be used as a means to control the assaultive or uncontrollable prisoner.

2. Prisoners in non-medical seclusion require 30 minute documented checks by sworn staff.

3. Must be authorized by a sworn supervisor.
4. Jail policy requires documentation and notification on any use of force.

5. Requires an immediate evaluation by a mental health professional to determine if medical seclusion is necessary.
   a. If medical seclusion is ordered, then the prisoner will be transferred to the medical unit for further observation.

F05.04.03 Restraining Pregnant Prisoners

This policy applies to restraining of pregnant prisoners. In every case, due regard will be given to a prisoner’s individual medical needs and the safety and security interests of the jail.

If the staff of a correctional facility knows or has reason to believe that an inmate is pregnant, the staff, when restraining the inmate, shall use the least restrictive restraints necessary to ensure the safety and security of the inmate and others. This requirement shall continue during postpartum recovery and any transport to or from a correctional facility.

A. When moving prisoners, who are medically determined by Health Services staff to be pregnant, a wheelchair will be used during transport to reduce chances of injury.

   Pregnant females will not be restrained with their hands and arms behind their back.

B. No ankle/leg restraints shall be used to transport or secure a prisoner medically determined to be pregnant unless:
   1. A significant safety and security threat can be articulated and
   2. Authorization for this exception is approved by a lieutenant or higher authority after consulting with medical personnel:
   3. This significant threat to safety and security will be documented on the appropriate shift log and Sheriff’s Office Initial Report.

C. No restraints will be used during active labor, childbirth or postpartum recovery while in a medical facility unless a correctional staff member makes an individualized determination that there are compelling grounds to believe that the inmate presents:
1. An immediate and serious risk of harm to herself, medical staff, correctional staff, or the public; or

2. A substantial risk of escape that cannot reasonably be reduced by the use of other existing means.

D. Correctional staff present during labor or childbirth shall be stationed in a location that offers the maximum privacy to the inmate, while taking into consideration safety and security concerns; and be female, if practicable.

E. Restraints authorized require a written record of the decision and use of the restraints shall be made in a written report that includes:

1. The correctional staff member's determination on the use of restraints;
2. The circumstances that necessitated the use of restraints;
3. The type of restraints that were used; and
4. The length of time the restraints were used.

The record created in this section shall be retained for five years, shall be available for public inspection with individually identifying information redacted, and may not be considered a medical record under state or federal law.

F. Definitions from State Law 64-13-45 as used in this section:

1. "Postpartum recovery" means, as determined by her physician, the period immediately following delivery, including the entire period a woman is in the hospital or medical facility after birth.

2. "Restraints" means any physical restraint or mechanical device used to control the movement of an inmate's body or limbs, including flex cuffs, soft restraints, shackles, or a convex shield.

3. "Shackles" means metal or iron restraints and includes hard metal handcuffs, leg irons, belly chains, or a security or tether chain.
A. When it is necessary to use restraint devices to control a violent or self-destructive prisoner, mental health crisis intervention will be initiated after the prisoner has been restrained and brought under control.

B. Prisoners may act out for a variety of reasons; including emotional problems, poor impulse control, manipulation, etc. For this reason, it is in the best interest of the jail to initiate a mental health assessment during these situations.

C. All prisoners deemed to be in mental health crisis will be referred for a mental health assessment.

F05.04.05 Intensive Medical Management

A. Intensive Medical Management encompasses involuntary medical restraints, forced medication, and therapeutic seclusion.

1. Intensive Medical Management is to be implemented only under the order of a licensed independent practitioner. This includes physicians, physician assistants, and nurse practitioners that have prescriptive privileges in the State of Utah and are authorized to work in the jail.

2. The process of Intensive Medical Management in the jail will be performed under the supervision of a Registered Nurse (RN) in the Health Services Unit. The RN is responsible by licensure to oversee the process of Intensive Medical Management.

3. Health Services Unit Policy outlines the process of Intensive Medical Management. Under emergency conditions, sworn supervisory jail staff may temporarily authorize application of physical restraints or seclusion, and will immediately notify the on-site supervisory nurse.

4. While in restraints, prisoners will be observed frequently (15 minute intervals) by Health Services Medical Nurse or designated, trained, Corrections Health Services Staff. In the event that observation is delegated to assistive staff, the nurse will make a documented check every hour. Delegation criteria are outlined in the medical seclusion section.

5. During extended periods of restraint, the prisoner will be allowed to complete normal bodily voiding functions (with appropriate medical aids such as a bed pan and/or urinal), and to flex/stretch muscles.

6. If the prisoner is restrained for more than two hours, each limb will be freed for five (5) minutes every hour to provide adequate

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circulation and ensure muscle tone, under the supervision of both Health Services staff and sworn staff.

7. Staff will maintain close observation of the prisoner for signs or symptoms of medical distress

8. Frequent supervision by staff may aid in the prevention or discovery of problems which result from the restraints (e.g., circulation or breathing problems), and may aid staff members in avoiding liability arising from claims that staff members were deliberately indifferent to the restrained prisoner’s needs, or that restraints were used in a malicious, unreasonable, and/or wanton manner.

F05.05.00 Firearms

F05.05.01 General

A. By statute, Correctional Deputies may only carry firearms as authorized by their agency. The carrying of firearms is not normally required by the duties of most Correctional Officers. Therefore, only specifically authorized Correctional Officers may carry firearms while on-duty.

B. Authorizing Correctional Deputies to carry firearms requires significant office resources, including training time, ammunition, protective vests, and, when not furnished by the member, firearms. Accordingly, the primary purposes for such authorization will be for reassuming custody of prisoners, transporting prisoners, guarding prisoners, and maintaining security of Corrections Bureau facilities, including courts and other contract secure facilities.

C. Only Correctional Deputies authorized by this policy may access office firearms training, qualification, certification, or practice ammunition. Training, qualification, certification, and practice ammunition is limited to the office or personal firearm authorized for on-duty use, and a single authorized on-duty back-up weapon.

F05.05.02 Firearms Authorized Correctional Deputies

A. The following Correctional Deputy assignments are firearms authorized:

1. Movement/Critical Incident Response Team (M/CIRT),

2. Administrative Security Unit,

3. Firearms Unit,

4. Probation Unit

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5. Transportation Unit

6. Sheriff’s Prisoner Labor Detail (SPLD), and

7. Correctional Deputy Honor Guard.

8. Programs Deputies

B. At the discretion of the Corrections Bureau Chief, Correctional Deputies may maintain their firearms certification by submitting a written request. All such requests will be forwarded through the M/CIRT Lieutenant to the Security Division Administrator. The request must articulate the reason the member believes they should be authorized to retain the firearm following reassignment to a position not authorized for firearms certification. The letter of request will be re-submitted at the beginning of each calendar year.

C. The Security Division Administrator shall review and forward requests to the Corrections Bureau Chief with a recommendation for approval or denial.

D. Requests may include, but are not limited to the following criteria:

1. Needs of the Office;

2. Tactical certifications;

3. Hospital guard duty (the member must document the total number of hours completed for the previous year);

4. Other justifications or functions requiring the use of a firearm.

E. The M/CIRT Lieutenant will be responsible for maintaining a current list of firearms authorized personnel within the Corrections Bureau.

F05.05.03 Firearms Carry Requirements

A. The carrying of firearms will be consistent with the Sheriff’s Office Firearms Policy and this manual.

B. Firearms may only be carried when completing the duties designated by this policy as requiring a firearm.

C. On-duty firearms authorized Correctional Deputies will properly secure firearms in their vehicle or a gun locker when not completing a designated duty requiring a firearm.

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D. Empty holsters will not be worn away from office facilities, as this may cause public alarm or concern.

E. Firearms may be carried when the authorized Corrections Deputy is going immediately to and from their residence and their work location(s), but are not to be carried when conducting personal business.

F05.05.04 Availability for Off-Site Guard Duty

Off-site guard duty is the responsibility of M/CIRT. All firearms authorized Correctional Deputies are part of the available pool for this function and may be assigned guard duty when off-duty.

F05.06.00 Collapsible Baton Use

F05.06.01 Authorization to Carry a Collapsible Baton

Authorized members may carry collapsible batons, subject to the provisions of this policy and the Sheriff’s Office Weapons other than Firearms Policy.

A. The following Correctional Deputy assignments are collapsible baton authorized:

1. Movement/Critical Incident Response Team (M/CIRT)

2. Administrative Security Unit (ASU),

3. Probation Unit,

4. Transportation Unit,

5. Sheriff’s Prisoner Labor Detail (SPLD) and

6. Firearms Unit.

7. Programs Deputies

B. Additional authorizations may be made at the discretion of the Corrections Bureau Chief.

F05.06.02 Use Within the Jail Secure Perimeter

Collapsible batons will not normally be allowed within the secure perimeter of the jail in accordance with policy on unauthorized items in the jail. Batons will be secured when not in use. Additional batons will be stored in the armory or other emergency storage areas for use during emergencies.
F05.06.03 Emergency Use Authorization

Except as otherwise necessitated by immediate self-defense, use of collapsible batons within the secure perimeter must be authorized by the Tactical Commander.