

## **DIRECTIVE 70.2 RESTRAINING DEVICES**

<b>Issue Date: 02/11/2025</b>	<b>By Order of Chief of Police</b>
<b>Rescinds: (Issue 01/12/2024)</b> <b>Pages: 6</b>	<b>CALEA Standards</b> <b>Referenced: 70.2.1</b>
	<b>Review: October 2025</b>

**This directive consists of the following sections:**

**[70.2.1 Detainee Restraint Methods](#)**  
**Addendum A. WRAP Restraint**

**POLICY AND PROCEDURE:**

It is the policy of the Miami Township Police Department that all prisoners shall be restrained with appropriate devices that provide for the safety of the officer and the safety of the prisoner while being transported except as provided in this directive.

**[70.2.1 Detainee Restraint Methods](#)**

Every prisoner transported shall be secured in handcuffs with the handcuffs double locked. Prisoners shall be handcuffed with prisoners' hands behind their back except in the following circumstances:

- The transporting officer may choose, in limited circumstances, not to handcuff a prisoner's hands behind their back. In these cases, the prisoner's hands shall be handcuffed in front of their waist with an alternate restraining device. The exceptions to handcuffing a prisoner behind the back will be limited to the following:
  - Prisoners who are crippled or otherwise physically incapacitated and incapable of escaping or placing their hands behind their back.
  - Elderly or ill persons arrested for minor offenses.
  - Any other reason that a person is physically incapable of placing their hands behind their back.
- Pursuant to ORC 2901.10, if a charged or convicted female offender is known to be pregnant or in a period of postpartum recovery (up to six weeks after pregnancy), the officer shall not restrain (use any shackles, handcuffs or other similar appliance or device) said female. However, should the pregnant/postpartum charged or convicted female offender present a serious threat of physical harm to herself or another, a serious threat of physical harm to property, a substantial security risk or a substantial flight risk, officer(s) may

restrain her. At any point during or prior to the period of restraint, should the officer receive notification from the pregnant/postpartum female's treating health care professional stating the restraints pose a risk of physical harm to her or her unborn, the restraints must be removed/not used.

- The officer is restricted from using any leg, ankle, or waist restraint to restrain the pregnant/post-partum charged or convicted female offender. It may be best to restrain the pregnant/postpartum charged or convicted female offender in the front opposed to the back, allowing her to protect herself/unborn. The officer should provide any information regarding the pregnant/postpartum charged or convicted female offender to the Clermont County Jail or medical facility personnel, if transported to these locations. If restraining is required, officers need to submit a detailed narrative regarding their encounter with the pregnant/postpartum charged or convicted female offender.

No prisoner is to be handcuffed to any part of the transporting vehicle, except in exigent circumstances where no other alternative exists. If such an incident should arise it shall be documented in writing with the prisoner's arrest report.

When a prisoner may pose a significant threat to themselves and/or the transporting officer and upon approval of a supervisor, prisoners may be restrained with department issued and approved restraining devices, i.e., hobble restraint, red man helmet, WRAP restraint. These devices shall be used only in such a manner as not to cause harm or injury to the prisoner. When any additional or alternate restraining devices are used on a prisoner, the use of such devices will be documented in the narrative of the offense report. If a hobble restraint is used on a prisoner, the officer needs to complete a Use of Force report.

Officers shall be cognizant of preventing lethal positions, i.e., Positional Asphyxia. Positional asphyxia refers to a situation where there is a compromise of respiration because of splinting of the chest and/or diaphragm preventing normal respiratory excursion, or occlusion of the upper airway due to abnormal positioning of the body. (Journal of Forensic and Legal Medicine, October 2008). Officers must be aware of potentially dangerous restraint positions that need to be avoided during custodial arrest and transportation.

Positional asphyxia can occur when the prisoner's chest is restricted from expanding properly or when the position of the prisoner's head obstructs the airway.

Officers shall avoid putting weight on a restricted person's back, such as with their knee, for a prolonged period. This practice adds stress to the respiratory muscles and inhibits movement of the diaphragm and rib cage.

If temporary prone positioning is required for control, the prisoner must be closely and constantly monitored. Officers shall be aware of any obvious physical disabilities, mental state, or the possibility the person is under the influence of alcohol or narcotics.

During transport of a restrained prisoner utilizing the hobble restraint, the prisoner shall be placed on their side in the rear of the vehicle.

During transport of a restrained detainee, any sudden cessation of verbal communication or unusual quietness should be checked as a possible medical distress. Monitor the person by watching the three ABC's: Airway, Breathing and Circulation.

- Airway – The path is free of obstruction and allows the flow of air to the lungs.
- Breathing – Air flows to and from the lungs.
- Circulation – A heartbeat and pulse are present.

Many factors contribute to a person's susceptibility to positional asphyxia. There is an increased risk for positional asphyxia if one or more of the following indicators are present:

- Alcohol Intoxication
- Drugs (Especially Cocaine and other Controlled Substances)
- Physical Ailments (Obesity, Chest Deformity)
- Delirium, Bizarre or Frenzied Behavior (Mental Disease, Psychosis, Schizophrenia, Drug Intoxication)
- Respiratory Diseases (Asthma, Emphysema)

Although officers have no reason to expect death to result from restraining a person, the possibility exists. By exercising caution and common sense, the potential for in-custody deaths from positional asphyxia will be lessened.

Every prisoner in a police vehicle will be secured with a seatbelt. The only exception to this is if an officer feels he may be injured by a violent prisoner during the placement of the seatbelt, or the use of alternate restraining devices prohibits the use.

At times, Miami Township Police Department officers transport prisoners who display behavior and/or threats of harm that require transport to a hospital for evaluation. Mentally disturbed persons may pose a significant threat to themselves and/or the transporting officers. In these cases, the following shall apply:

- The persons shall be restrained securely but not in a manner that may tend to cause harm to the person.
- If the person is violent, the supervisor may authorize a second officer to assist the transporting officer by either following the vehicle or riding inside the vehicle.
- When it appears that a person's violent or bizarre behavior may constitute a risk of harm to themselves or to others, the person may be transported in restraints on a stretcher in an EMS vehicle. This method of transportation should only be used when no other method is feasible. In this case, the officer may ride in the EMS vehicle with the prisoner (officers should coordinate with EMS).

## **ADDENDUM A. WRAP Restraint**

This policy is intended to familiarize Department personnel with the WRAP and procedural guidelines for its use. The WRAP provides a safe and quick method of controlling and immobilizing a violent or potentially violent/combative subject who has been detained or taken into custody.

The WRAP Restraint manufactured by Safe Restraints, Inc., was designed as a temporary restraining device. Used properly it can increase officer safety and reduce the risk of liability due to injuries and in-custody deaths. The WRAP immobilizes the body and restricts a subject's ability to kick or do harm to oneself or others. The WRAP minimizes the time required to secure a person safely, restrains the subject in an upright position, and has the subject prepared for transportation or movement.

### Guidelines For The Use of The WRAP

Subjects should NOT be left unmonitored. The WRAP can be used prior to or after a violent/ combative subject is controlled using approved departmental methods. As with any restraint device, do not assume the WRAP is escape proof. The WRAP should be considered for use under the following situations:

- When pre - assaultive, violent, or combative behavior is indicated;
- To immobilize a violent/combative subject;
- To limit violent/combative subjects from causing injury to themselves or others;
- To prevent violent/combative subjects from causing property damage by kicking;
- To restrain a subject after a chemical spray or stunning device is used;
- When conventional methods of restraint are not effective;
- In transportation of violent/combative subjects.

Once the subject is properly restrained in the WRAP, the subject should be placed on his/her side, or in a sitting position. This will increase the oxygen recovery rate and will reduce the incident of respiratory fatigue.

### Application of the WRAP

The WRAP can be applied by one person, but for violent/combative subjects, two to four people should be used. Only qualified personnel who have received training in the use of the WRAP should use this restraining device. However, under exigent circumstances, those who are qualified to use the Wrap may direct personnel who are not trained in its application on a violent/combative subject.

### Safety Precautions

When utilizing the WRAP be sure to follow the below safety precautions:

- The shoulder harness should never be tightened to the point that it interferes with the subject's ability to breathe;

- The leg bands and shoulder harness must be checked frequently for tightness and retightened or loosened as necessary until the WRAP is removed;
- If the restrained subject complains of or shows signs of breathing distress (shortness of breath, sudden calmness, a change in facial color, etc.), medical attention should be provided immediately;
- The subject should NOT be left unmonitored. Subjects should be placed in an upright sitting position or on their side as soon as possible to allow for respiratory recovery;
- The WRAP is a temporary restraining device and is NOT escape proof.

### Transportation While Utilizing the WRAP

Movement of a restrained subject can be accomplished in two ways depending on their cooperation. The restrained subject can either be carried or allowed to stand and shuffle step to the destination. Officers shall observe the following procedures:

- To carry the restrained subject, it is recommended between two to four personnel should be used depending on the size and weight of the subject. Lift the subject under the arms and ankles. A “log lift” carrying technique may be used when moving the subject. Proper lifting techniques should be used to prevent injury to officers.
- As an alternative to lifting, the subject may be moved by means of a shuffle. If the subject is cooperative the lower WRAP leg band can be loosened to allow some leg movement below the knees without compromising security or safety. By loosening the tether to the shoulder harness, the subject can be brought to a standing position with the help of officers and then allowed to shuffle to or from a vehicle or holding cell. If this method is used, appropriate support must be given to the subject to prevent possible injury from falling.

Prior to vehicle transportation, re-check all belts to ensure that they are securely fastened. The use of a seat belt is required to limit movement and reduce the risk of injury to the subject. If needed, consider having an officer ride with the subject to ensure all straps remain tight and the subject has no medical problems. Re-checking the security of the WRAP and keeping the subject under constant observation should apply to any movement of the subject.

### Documentation

Any time the WRAP restraint device is used, the officer will complete the appropriate report and include the following in the report:

- The reason and/or justification for use;
- The amount of time the suspect was restrained;
- How the suspect was transported and the position of the suspect;
- Observations of the suspect’s physical and physiological actions;
- Information about the application and removal of the WRAP;
- Any known or suspected drug use or other medical problems;

- Documentation of continuous activation of the officer(s) body worn camera prior to, during, and after the use of the WRAP.

A first line supervisor shall be responsible for sending an email to records clerks regarding the use of the WRAP restraint and report number. The first line supervisor shall ensure the Patrol Division Supervisor is advised of the incident.

### Training

The Department shall provide certified training in the use of the WRAP restraint. Only those personnel who have successfully completed the training shall apply this restraining device and, under exigent circumstances, may direct personnel who are not trained in its application on a violent/combatative subject.