

Subject:	Emergency Use of Manual Restraint (EUMR) Policy
Effective Date:	October 6, 2022 Reviewed 11-18-22
Audience:	LLTS (LiveLife Therapy Solutions) Consultants and Program Director
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TABLE OF CONTENTS

EMERGENCY USE OF MANUAL RESTRAINT (EUMR) POLICY2

POLICY2

POSITIVE SUPPORT STRATEGIES AND TECHNIQUES REQUIRED2

PROHIBITED PROCEDURES.....2

MANUAL RESTRAINTS NOT ALLOWED IN EMERGENCIES3

REPORTING EMERGENCY USE OF MANUAL RESTRAINT3

POLICY REVIEWED AND AUTHORIZED BY:3

Emergency Use of Manual Restraint (EUMR) Policy

Program Name: LiveLife Therapy Solutions

Policy

It is the policy of this DHS licensed provider LiveLife Therapy Solutions/Technology for HOME to promote the rights of persons served by this program and to protect their health and safety during the emergency use of manual restraints.

“Emergency use of manual restraint” means using a manual restraint when a person poses an imminent risk of physical harm to self or others, and it is the least restrictive intervention that would achieve safety. Property damage, verbal aggression, or a person’s refusal to receive or participate in treatment or programming on their own, do not constitute an emergency.

Positive support strategies and techniques required

The following positive support strategies and techniques must be used to attempt to de-escalate a person’s behavior before it poses an imminent risk of physical harm to self or others:

- Follow individualized strategies in a person’s coordinated service and support plan and coordinated service and support plan addendum.
- Shift the focus by verbally redirect the person to a desired alternative activity.
- Model desired behavior.
- Reinforce appropriate behavior
- Use positive verbal guidance and feedback.
- Actively listen to a person and validate their feelings.
- Create a calm environment by reducing sound, lights, and other factors that may agitate a person.
- Speak calmly with reassuring words, consider volume, tone, and non-verbal communication.
- Simplify a task or routine or discontinue until the person is calm and agrees to participate; or
- Respect the person’s need for physical space and/or privacy.

Prohibited Procedures

Use of the following procedures as a substitute for adequate staffing, for a behavioral or therapeutic program to reduce or eliminate behavior, as punishment, or for staff convenience, is prohibited by this program:

1. Chemical restraint;
2. Mechanical restraint;
3. Manual restraint;
4. Time out;

5. Seclusion; or
6. Any aversive or deprivation procedure.

Manual Restraints Not Allowed in Emergencies

This program does not allow the emergency use of manual restraint. The following alternative measures must be used by staff to achieve safety when a person's conduct poses an imminent risk of physical harm to self or others and less restrictive strategies have not achieved safety:

- Continue to utilize the positive support strategies;
- Continue to follow individualized strategies in a person's coordinated service and support plan and coordinated service and support plan addendum;
- Ask the person and/or others if they would like to move to another area where they may feel safer or calmer;
- Remove objects from the person's immediate environment that they may use to harm self or others
- Call 911 for law enforcement assistance if the alternative measures listed above are ineffective in order to achieve safety for the person and/or others. While waiting for law enforcement to arrive staff will continue to offer the alternative measures listed above if doing so does not pose a risk of harm to the person and/or others.

Reporting Emergency Use of Manual Restraint

As stated in section V, this program does not allow the emergency use of manual restraint. Any staff person who believes or knows that a manual restraint was implemented during an emergency basis they must immediately report the incident to the person listed below.

The program has identified the following person or position responsible for reporting the emergency use of manual restraint according to the standards in section 245D.061 and part 9544.0110, when determined necessary:

Sue Redepenny

Policy reviewed and authorized by:

Susan Redepenny

Print name & title



Signature

Date of last policy review: 11-18-22 Date of last policy revision: 10/2022

Legal Authority: MS §§ 245D.06, subd. 5 to subd, 8; 245D.061, MR part 9544.0110