



Control Procedure Policy

Date Implemented: 1/10/13

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Regulation(s) supporting the need for this policy:

10 CCR 2505-10 8.608.4

POLICY:

Innovations will ensure that Control Procedures are used appropriately by trained staff, and that consumer rights are protected.

PROCEDURE:

1) Control Procedures in General

a. What is a Control Procedure

- i. A Control Procedure is defined as physical restraint necessary to protect the consumer from injury to self or others or to prevent significant property damage.

b. When to use a Control Procedure

- i. In general, Control Procedures will only be used to protect the consumer or those around him or her from serious, probable, imminent threat of bodily harm.

c. Health and Safety Considerations

- i. The individual shall be released from physical or mechanical restraint as soon as the emergency condition no longer exists.
- ii. Physical or mechanical restraint cannot be a part of an IBSSP and can only be used as an emergency or safety control procedure in accordance with HCPF rules and regulations and the Innovations procedures listed below
- iii. No physical or mechanical restraint of a person receiving services shall place excess pressure on the chest or back of that person or inhibit or impede the person's ability to breathe.
- iv. During physical restraint, the person's breathing and circulation shall be checked to ensure that these are not compromised.
- v. Mechanical restraints used for medical purposes following a medical procedure or injury shall be authorized by a physician's order which shall be renewed every twenty-four (24) hours.
- vi. Mechanical or physical restraints used for a diagnostic or other medical procedure conducted under the control of Innovations (e.g., drawing blood by an Innovations nurse) shall be dually authorized by a licensed medical professional and agency administrator, and its use documented in the person's record.

d. Types of procedures that may be used

- i. Innovations staff will only use Non-Violent Crisis Intervention (NVC) techniques approved by the Crisis Prevention Institute (CPI).

e. Requirements for staff training

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- i. No Innovations staff or provider will implement a Control Procedure unless they have completed the NVCI live class and are current in their on-going NVCI training. Staff and providers will not work alone or be left alone with a potentially aggressive client before becoming certified in NVCI.
- ii. In order to become NVCI certified, staff and providers are required to participate in an NVCI “Full Certification” class taught by an Imagine! Innovations instructor. In addition, to remain NVCI certified, staff/providers will participate in an NVCI refresher/recertification class every 12 to 18 months if serving adults, and every 6 months if serving children (per state regulations). For those serving adults, the refresher may be taken up to 18 months after the original certification, after which the person would need to re-take the full recertification class. The refresher/recertification class must also be taught by an Imagine! Innovations instructor.
 1. All Innovations Staffed Site employees will complete the NVCI requirements, as specified above.
 2. Most contract providers will complete the NVCI requirements specified above. However, some will not be required to do so due to the small size of client they serve and/or the absence of physical aggression on the part of the client. This decision will be made by the Host Home Coordinator/Manager or the Foster Care Coordinator/Manager as applicable.
- iii. Staff and providers who need to complete NVCI training will complete it within 30 days of their start date.
- iv. In some cases, if it seems like it will help, additional 1-on-1 support is to be provided within 10 business days by the NVCI Instructor. If the staff cannot perform one or more physical techniques due to a permanent physical limitation, the instructor may still decide to pass the staff if the person will be working at a site where the particular technique(s) is not likely to be needed. However, the instructor may fail a staff/provider that does not have enough range of motion and mobility to safely implement the physical techniques that would be required for him to be safe at his works site. In a rare case like this, Innovations will attempt to find a more appropriate job placement for the staff.
- v. The Imagine NVCI Instructor maintains oversight by:
 1. Reviewing (and following up with) all incident reports involving the threat of physical aggression and/or restraint
 2. Being available by email, phone, and monthly check-ins with Site Supervisors/Coordinators to troubleshoot issues,
 3. Periodic client and/or site-specific reviews and refreshers as needed,
 4. Quarterly review of incident trending for incidents involving the threat of physical aggression and/or restraint, and
 5. NVCI refresher/recertification classes.

2) Emergency Control Procedures (ECPs)

a. The use of ECPs

- i. ECPs will be used when a control procedure needs to be used for a consumer who does not have a defined Safety Control Procedure. The behaviors that require ECPs should be infrequent and unpredictable.

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- ii. ECPs shall not be employed as punishment, for the convenience of staff, or as a substitute for services, supports or instruction.
- iii. An incident report will be completed within twenty-four (24) hours for each instance of an ECP. The incident report will be routed to all interested parties including the consumer's CCB and the consumer's guardian/authorized representative (if applicable). This incident report will contain the following:
 - 1. A description of the emergency control procedure employed, including beginning and ending times
 - 2. An explanation of why the procedure was judged necessary
 - 3. An assessment of the likelihood that the behavior that prompted the use of the emergency control procedure will recur.
- iv. The consumer's IDT will consider the development of a Safety Control Procedure if it seems likely that the behavior prompting the use of the Emergency Control Procedure is likely to recur or an ECP is used three times in a 30 day period.

3) Safety Control Procedures (SCPs)

a. The use of SCPs

- i. SCPs are procedures that are used to control a previously exhibited behavior, which is anticipated to occur again and for which a planned intervention is developed.
- ii. **SCPs will only be used after all due process has been completed, which consists of the following:**
 - 1. **SCP written**
 - a. The planned intervention will be written that details the accepted procedures to be used. The SCP **will not** be part of an IBSSP.
 - b. SCPs are written by the Imagine! NVCI Instructor. Innovations staff and providers may only implement SCPs written by an Imagine! NVCI Instructor.
 - c. The NVCI Instructor will speak with relevant parties familiar with the client such as staff and/or the Innovations Nurse Case Manager to determine the following:
 - i. The exact target behavior(s) such as punching, kicking, biting, etc.,
 - ii. If there are any medical issues that need to be considered such as osteoporosis, scoliosis, etc.,
 - iii. If the client is being supported by Imagine's Behavioral Health Services (IBHS) team to ensure that the SCP will not create a behavioral training conflict, and
 - iv. If there are any other special considerations that need to be made such as environmental considerations. For example, if the SCP will be implemented in a building with stairs, it will specify that staff will not attempt to physically engage or restrain the client near the top of the stairs or on the stairs, etc.
 - 2. **Staff/providers trained**

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- a. Staff/providers will be trained by the NVCI Instructor to implement the specific procedures in the SCP. Only staff/providers who have been trained will implement the procedure.
3. **Included in IP**
 - a. The Host Home Coordinator/ Site Supervisor will email the consumer's Case Manager to ask that the SCP be included in the IP. The Host Home Coordinator/ Site Supervisor will print this email and file it in the consumer's home book until an amended IP is received and filed.
4. **Human Rights Committee (HRC) review**
 - a. Innovations will ensure that all SCPs are reviewed by the HRC unless immediate implementation is absolutely necessary to protect the health and safety of the consumer.
 - b. The Host Home Coordinator/ Site Supervisor will contact the person at Imagine! responsible for HRC scheduling to ask that the consumer's proposed SCP be reviewed at the next HRC meeting.
 - c. The Host Home Coordinator/ Site Supervisor will complete the HRC report and submit it to the HRC for review prior to implementing the SCP.
 - d. When the SCP has been approved for use by the HRC, it may then be implemented by Innovations staff and providers.
- iii. **Innovations will also ensure that the following ongoing tasks are completed:**
 1. **Incident report**
 - a. An incident report will be written and filed within 24 hours of the use of the SCP.
 2. **CM notified**
 - a. The Case Manager will be notified regarding the use of the SCP within 72 hours.
 3. **IDT review**
 - a. The IDT needs to convene any time an SCP is used three (3) times in a **30 day** period to review the effectiveness of behavior plans and other interventions
 4. **Ongoing HRC review**
 - a. The HRC will review all ongoing incident reports involving the SCP.
 - b. The Host Home Coordinator/ Site Supervisor will ensure that the SCP is included in all future HRC reviews for the consumer.