

TUBES AND MARTIN CHAINS

- AUTHORITY:** California Code of Regulations, Title 15, Section 1358
- RESCINDS:** Procedure Manual Item **3-6-005**, dated **8/18/23**
- FORMS:**
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|--|------------------|
| Special Incident Report (SIR) | (Automated ICMS) |
| Use Of Force Report | (Automated ICMS) |
| Youth's Daily Welfare Log | (F057-10092) |
| Youth Martin Chain Status Form | (Attachment A) |
| Martin Chain Improvement Plan (Sample) | (Attachment B) |
- PURPOSE:** To establish guidelines for the use of Tubes and Martin chains for youth at Juvenile Hall (JH) **and the Youth Leadership Academy (YLA) who pose an immediate threat to themselves or others and when all less restrictive alternatives have been ineffective in controlling the youth's behavior.**

I. GENERAL INFORMATION

- A. The DD or designee, in cooperation with the responsible physician and mental health director, shall develop and implement written policies and procedures for the use of restraint devices. Restraint devices include any devices which immobilize a youth's extremities and/or prevent the youth from being ambulatory.
- B. The provisions of this section do not apply to the use of handcuffs, shackles or other restraint devices when used to restrain youth for movement or transportation within the facility. Movement within the facility shall be governed by Section 1358.5, Use of Restraint Devices for Movement Within the Facility. Please refer to PMI 3-6-002 Handcuffs, Transportation Belts, Shackles, **and Flex Cuffs** for further information.
- C. Youth shall be placed in **Tube** restraints only with the approval of the facility manager or designee. The facility manager may delegate authority to place a youth in restraints to a physician **or a Clinical Evaluation and Guidance Unit (CEGU) therapist.**
- D. **A medical professional must determine within two hours of placement of a youth in Tubes that it is safe for the youth to remain in the Tubes. After that initial determination, the youth must be reevaluated at least every three hours to determine whether continued retention remains medically appropriate.**
- E. A mental health consultation shall be **conducted** as soon as possible, but no later than four hours from the time **the youth was placed in Tubes**, to assess the need for mental health treatment.

F. Definitions

1. Tubes are cylindrical nylon devices used by having a youth slide their hands into the devices, and the device is secured at the wrist. Once the Tubes are applied, the **youth** is unable to use their fingers or hands. Tubes are considered a physical restraint **and** are stored **in the supervisors office in Unit B and Unit C**
2. Martin chains (also known as a “waist chain” or a “belly chain”) is a physical restraint consisting of a chain around the waist to which the **youth’s** hands are cuffed to the waist chain in the front of the body. Martin chains are considered a physical restraint **and** are **located** in each unit.

II. PROCEDURES

A. Restrictions

1. Restraints shall not be used as punishment, discipline, or as a substitute for treatment.
2. The use of restraint devices that attach a youth to a wall, floor or other fixture, including a restraint chair, or through affixing of hands and feet together behind the back (hogtying) is prohibited.
3. Tubes and Martin chains are not used at the Youth Guidance Center (YGC).

B. Medical Considerations

1. Staff must **consider** any known medical conditions that would preclude certain restraint devices and/or techniques, which restraint devices are appropriate based on known medical conditions, and the signs/symptoms that would indicate a need for **an** immediate medical/mental health referral. Staff shall also be aware of the location of and be trained in the use of Automatic External Defibrillator devices (AED's), as well as be currently certified in first aid and cardiopulmonary resuscitation (CPR) prior to using any physical, mechanical or chemical restraints on youth.
2. Youth with medical considerations are generally identifiable by unique wristbands. **This information is also located in the unit’s medical sheets.**
3. Pregnant youth present special circumstances that require a higher level of consideration prior to the use of any physical, mechanical, or chemical restraint. **Refer to PMI 3-6-002 Handcuffs, Transportation Belts, Shackles, and Flex Cuffs.**

C. Use of Tubes

1. Tubes are a protective measure and shall be limited to youth who present an immediate danger to themselves.

2. Tubes shall only be utilized as long as is **essential** for the youth's protection.
3. Prior to the use of Tubes, approval of a psychiatrist **or CEGU therapist** is required. The only exception is a clear emergency where neither time nor availability permit a **Supervising Probation Correctional Officer (SPCO), Duty Officer (DO), or Administrator in Charge (AIC)** to obtain the prior approval **from** a psychiatrist **or CEGU therapist**. **In these situations**, the "on-call" psychiatrist **or CEGU therapist** must be called as quickly as possible, but no longer than **30** minutes after the Tubes are authorized by a **SPCO/DO/AIC**. The psychiatrist **or CEGU therapist** will **decide** whether or not to report **to the facility**. No **SPCO/DO** will authorize a restraint if **they were** involved in physically subduing the youth in the instant matter or was subjected to a physical attack or attempted physical attack by the youth.
4. No staff member is to participate in the application of the Tubes without being fully trained in the procedure.
5. A youth placed in Tubes will not be deprived of the rights afforded to all youth in the facility, except those made impractical by **the** nature of the restraint (i.e., a youth in restraints cannot **write** mail, complete phone calls, etc.). At the request of the youth or **their** attorney, visitation with the attorney will be permitted while the youth is in the Tubes.
6. Within 24 hours, after the youth is released from the Tubes, a complete copy of all Special Incident Reports (SIRs) and **Use of Force Reports** regarding the incident will be forwarded (via the appropriate Supervising **Probation** Correctional Officer) to the psychiatrist **or CEGU supervisor**; also, the nurse from the Medial Unit who monitored the incident will provide copies of the medical records to the psychiatrist **or CEGU supervisor**.
7. Within five (5) working days of receiving these reports, the supervising psychiatrist **or CEGU supervisor** will submit to the Director a signed approval of all actions taken in connection with the incident, a signed disapproval with the reasons stated, or a signed approval with comments critiquing the steps taken during the incident.
8. Within **five (5)** working days after the supervising psychiatrist **or CEGU supervisor** submits their written statement to the Director, the Director and the supervising psychiatrist **or CEGU supervisor** will consult with staff to critique the incident.

D. Tubes – Responsibilities

1. Deputy **Probation** Correctional Officer (DPCO)
 - a. When a youth becomes **uncontrollable** to such an extent as to make the use of Tubes a **necessity**, staff shall notify the **SPCO/DO** and consult with available medical/mental health staff to assist in resolving the crisis.

- b. To apply the Tubes, secure the nylon/Velcro belt around the youth's waist. Positioned properly, the attached handcuffs will be at the youth's sides. Place each hand in the attached tube and secure the tubes to the youth's waist by looping the attached handcuff around the cuff of the tubes and through the "O" ring attached to the tube. Be sure to allow one finger's space between the cuff and **the** youth's wrist. Double-lock the cuffs.
- c. Note: The Tubes are designed to prevent self-inflicted injuries, such as scratching and/or carving. They do not immobilize the youth, who can still strike their head or other body areas against hard surfaces. Youths who have the Tubes applied must be supervised **1on-1** for the duration of the **incident**, with **the youth's door** open. **While in the Tubes, the youth is** to sit on their mattress on the floor. In the event the Tubes fail to deter the youth's self-destructive behavior, other alternative means will be considered/**deployed** as per existing policy. Youth should not be transported with the Tubes in place unless necessary. Staff must use great care in ensuring **the** youth **does** not fall. At the one-hour mark, and hourly thereafter, youth must be offered water/restroom access, which may entail temporarily removing the Tubes from one or both hands. **Staff shall attempt counseling to aid the youth in regaining self-control. Staff will document all activities and counseling efforts on the Youth's Daily Welfare Log. Entries must be made at least every 15 minutes or when any significant incident occurs.**
- d. **Reasons for continued use of the Tubes shall be reviewed and documented at a minimum of every hour. This review must be completed by a SPCO, DO, or Administrator, and their name shall be noted with the reasons for the continued application of the Tubes into the Integrated Case Management System (ICMS).**
- e. A nurse from the Medical Unit in Juvenile Hall must be summoned immediately after the youth is placed in the Tubes. Following each incident, a medical examination will be performed to evaluate the youth's physical well-being. Medical evaluation shall be made every three hours thereafter.
- f. CEGU must be summoned immediately after the youth has been placed in Tubes.
- g. If the youth is in the Tubes during mealtime, **they** must be offered their meal. If the youth declines their meal, or their behavior remains so **uncontrollable** that **they** cannot be safely released from the Tubes, the meal is to be set aside and offered to them once they are released from the Tubes.
- h. Remove the youth from the Tubes as soon as **they** regain sufficient control as to no longer represent an immediate threat to **themselves**.

- i. Within 24 hours after a youth is **placed in Tubes**, all special incident reports regarding the incident will be forwarded **by a SPCO/DO** to the assigned Assistant Division Director **where the incident occurred**.
 - j. Involved staff will complete a Special Incident Report **within 24 hours of the Tubes being placed on the youth**, and **document** the following information:
 - (1) The **circumstances and justification leading to the application of the Tubes**. **Describe exactly what the youth did that created the danger to themselves.**
 - (2) **Any known medical conditions that would contraindicate the use of the restraints.**
 - (3) Attempts made to counsel and de-escalate or otherwise contain the youth prior to the restraint.
 - (4) **All counseling attempts made with the youth.**
 - (5) **Description of the youth's behavior while in the Tubes.**
 - (6) Medical Unit involvement, including time and location of exam.
 - (7) Mental Health (CEGU) involvement, including the time, location of consultation, and name of the psychiatrist **or CEGU therapist** who authorized the use of the Tubes.
 - (8) Times water/toilet/meal offered/taken.
 - (9) Time the Tubes were applied and removed.
 - k. Document the incident **and all pertinent information** in the ICMS **unit log notes**.
2. Supervising **Probation** Correctional Officer (SPCO)
- a. Whenever the Tubes are utilized, the SPCO/DO will prepare and send a brief e-mail notification to the CDPO **over the** facilities, as well as JH Administration, prior to the end of their shift. The AIC will also be notified by the **DO** as soon as possible.
 - b. Upon notification of the crisis, respond to the unit, observe and assess the situation, and consider input from the **Deputy Probation Correctional Officers (DPCO)** and medical/mental health staff.
 - c. Contact the psychiatrist **or CEGU therapist** for authorization to apply the Tubes if appropriate or provide direction for a less restrictive alternative (if practicable). In a clear emergency, when

contacting a psychiatrist **or CEGU therapist would delay** time to provide a safe intervention, the **SPCO/DO/AIC** may make the decision.

- d. Ensure that the Director, Assistant Director, or Administrator in Charge is notified.
- e. Ensure that all policy and procedural guidelines are met.
- f. Review all SIRs by staff involved in the restraint **and application of the Tubes** for thoroughness and accuracy. **Forward** the SIRs, **ICMS notes, and Youth's Daily Welfare Log**, to the appropriate Assistant Director for review within 24 hours. Forward a copy of all **documents** to the **Service Chief II of CEGU** within 24 hours.

3. Review and Process

a. One-Hour Review

- (1) Approval from the psychiatrist **or a CEGU therapist** must be received to continue use of the Tubes at every one-hour interval the youth is in the Tubes and until the youth is removed **from the Tubes**.
- (2) If the youth remains in the Tubes in excess of one hour, **a SPCO or DO** must consult with the psychiatrist **or a CEGU therapist**.
- (3) Under extraordinary circumstances where **there are issues** contacting a psychiatrist **or CEGU therapist** to obtain approval for continued use of the Tubes, the appropriate **SPCO, DO, Assistant Director, or Director** may make the decision for the youth to remain in the restraints at the one-hour point. Documentation **in ICMS** must be made regarding attempts to contact the **psychiatrist or CEGU therapist and reasons for continued use of the Tubes**.

b. Two-Hour and **Beyond**

- (1) If the youth remains in the Tubes, an Administrator must be advised, review the situation, and consult with the psychiatrist **or a CEGU therapist** and medical staff at the two-hour point and **every hour thereafter**.
- (2) Under extraordinary circumstances where **there are issues with** contacting a psychiatrist **or CEGU therapist** to obtain authorization for continued use of the Tubes, an Administrator may make the decision. Efforts to contact the psychiatrist **or a CEGU therapist** must also be documented **in ICMS**.

- c. At each review, a note will be made in the unit logbook/ICMS regarding the justification for allowing the youth to remain in Tubes and the name of the authorizing individual.

E. Use of Martin chains

1. Use of the Martin chain status shall be limited to youth who are engaging in behavior that is destructive or dangerous **to youth or staff** when out of their room.
2. Martin chain status will be utilized only **if it** is necessary for the youth's or others' protection.
3. Approval of a **SPCO/DO/A.I.C.** is required before Martin chains **may be** utilized.

F. Martin Chains – Responsibilities

1. Martin chain status – **DPCO** Responsibilities:
 - a. **In ICMS**, articulate in detail the **incident(s)** that led up to the youth needing to be placed in Martin chains when out of their room, including all counseling attempts to cease negative behaviors.
 - b. When the youth comes out of **their** room, the following procedure will be used:
 - (1) Call two ISU staff to come and assist and supervise **the** placement of Martin chains on the youth.
 - (2) Youth will come out for **their daily** shower when behavior permits. Youth will be placed in Martin chains inside **their** room, escorted to **the** shower area, and the Martin chains will be removed so youth can shower properly. Youth will be placed back in Martin chains to return to **their** room. If the youth's behavior is too unstable, contact a **SPCO** or **DO** and document behaviors in ICMS.
2. Martin chain status – Supervising **Probation** Correctional Officers will:
 - a. If a youth is presenting unpredictable/unstable behavior through repeated assaults on staff or youth and refuses to make a believable commitment to cease dangerous behaviors, the youth **may** be placed on Martin chain status when out of **their** room.
 - b. Review the SIR(s) and log notes in ICMS.
 - c. Counsel with the youth on **needed changes in** behavior.
 - d. **Work with CEGU to have a therapist have ongoing counseling with the youth.**

- e. If Martin chain status is needed after all counseling attempts, use the Protocol Template and improvement plan (attached).
- f. Review the status, **document daily steps to address the behavior and progress or continued defiance, and have daily check-ins with the assigned Assistant Division Director or Administrator in Charge.**

REFERENCES

Procedures:	3-3-005	Assistance Calls
	3-5-004	Youth's Rights/Orientation
	3-5-015	Resident's Grievance Procedure
	3-6-001	Use of Force – Facilities
	3-6-003	Oleoresin Capsicum (OC) Spray - Facilities
	3-6-004	Room Extraction, Use of Protective Shield , and Property Removals
	3-10-003	Deterrence of Unacceptable Behavior
	3-11-002	Integrated Case Management System (ICMS) Automated and Manual Logbook
	3-15-001	Special Incident Reports / Routing SIR and DHO Paperwork
Policies:	C-16	Employee Conduct-On Duty
	D-1	Threats, Harm, Danger to Employees and Others
	D-2	Use of Physical Restraint/Corporal Punishment

K. Carvo

APPROVED BY:

Click here to enter youth's name. **Martin Chain Status**

Click here to enter youth's name. has been placed on Martin chain status and authorized by Click here to enter Administrators name. I will reevaluate this status on date based on Click here to enter youth's name. behavior. Click here to enter youth's name. has been placed on Martin chain status due to Choose an item. The following is the protocol:

Whenever youth comes out of his/her room, he/she must be in Martin chains and Martin shackles. This will require 3 staff with 2 **staff** in **the youths** room and 1 **staff** at the door.

During shower time, once in the shower area, staff will take his/her Martin chains and shackles off so he/she can properly shower. Once the shower is complete, he/she is to remain in the bathroom area. He/she may dry off in the bathroom area, get dressed and then he/she will be placed in Martin chains and shackles before coming out of the bathroom area. He/she is to shower alone.

He/she will remain on Martin chain status for independent free time, programming, and LME.

SPCO Signature

Click here to enter SJCO name.

Youth Signature

Martin Chain Status Improvement Plan (SAMPLE)

- Placed on Martin chain status on xx/xx/xx due to threats towards another youth in the unit and threats towards staff.
- Your status will be reviewed on xx/xx/xx.
- In order to be removed from Martin chain status, you must stop threatening/**assaulting** staff and other youth in the unit.
- If you show improvement in this area, you will be removed from Martin chain status.
- If you improve and show you are making a strong effort to improve in this area **by making** no threats, we will start allowing you out during the day in a designated area away from the other youth.
- Absolutely no fighting.
- **You are scheduled for court on xx/xx/xx for a progress review. There is still time to improve your behavior so positive comments can be made in your casework and to the court. You need to put forth your best effort in order to create positive change.**