

WELCOME TO
AMERICAN JAIL
ASSOCIATION'S
33RD ANNUAL
TRAINING CONFERENCE &
JAIL EXPO



○ DALLAS, TEXAS
 ○ APRIL 27 – 30, 2014

National Resource Center
 on Justice Involved Women

www.cjinvolvedwomen.org

**Best Practices
 in the Use of
 Restraints with
 Pregnant
 Women
 Under
 Correctional
 Custody**

American Jail Association's
 33rd Annual Training
 Conference and Jail Expo

 April 30, 2014
 10:00 am – 11:30 am

National Resource Center
 on Justice Involved Women
A project of the Bureau of Justice Assistance and the National Institute of Corrections

www.cjinvolvedwomen.org

Faculty

- Becki Ney, Principal, Center for Effective Public Policy and Director, National Resource Center on Justice-Involved Women
- Maureen Buell, Correctional Program Specialist, National Institute of Corrections
- Ronaldo Myers, CJM, Director, Alvin S. Glenn Detention Center
- Patricia Reams, MD, MPH, Certified Correctional Health Professional, National Commission on Correctional Health Care

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**National Resource Center on
 Justice Involved Women (NRCJIW)**

- Funded by the U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance in partnership with the National Institute of Corrections.
- **Primary Goal: Provide resources and tools to professionals to equip them to be more successful in their work with justice-involved women.**
- Administered by the Center for Effective Public Policy in partnership with Orbis Partners, University of Cincinnati, Women's Prison Association, CORE Associates, The Moss Group and SAMHSA's National Center on Trauma-Informed Care.

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OUR GOALS

- Promote safety
- Synthesize and disseminate evidence-based and gender-responsive research and knowledge
- Promote the implementation of innovative, evidence-based and gender-responsive approaches
- Promote gender-informed policy and management practices
- Highlight critical issues
- Build a community of professionals to advance gender-informed practices nationally

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NRCJIW

WAYS WE CARRY OUT OUR MISSION:

- Web site: www.cjinvolvedwomen.org
 - Resources
 - Innovator series
 - Newsletter
- Training events and webinars
- Technical assistance
- Document development
 - Women Veterans in the Criminal Justice System
 - Women who Perpetrate Violence
 - Trauma-Informed Care for Corrections Professionals
 - Ten Truths that Matter when Working with Justice Involved Women
 - Discipline and Sanctions Toolkit for Women's Correctional Facilities (forthcoming 2014)

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The National Task Force on the Use of Restraints with Pregnant Women under Correctional Custody

Resulted from a series of meetings of federal agencies, national associations, state and local policymakers, practitioners, and non-profit and advocacy partners

Co-sponsored by

- SAMHSA's Promoting Alternatives to Seclusion and Restraint through Trauma-Informed Practices
- SAMHSA's National Center for Trauma-Informed Care
- U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance's NRCJIW

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Task Force Membership

Task Force members were selected to ensure a balance of corrections practitioners (jails and prisons), federal agencies, advocates, and medical professionals with expertise in this topic

Represented Organizations:

- ACA
- ACOG
- AJA
- ASCA
- BOP
- ICE, DHS
- Human Rights Project for Girls
- National Commission on Correctional Healthcare
- NIC
- National Women's Law Center

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Process for Developing the Statement

- Comprehensive literature review
- Task Force members
 - Online surveys to determine areas of consensus and divergence
 - Met in August 2012 to identify core principals and key recommendations for the best practices statement
- Developed final statement, which was released in April 2014

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The Best Practices Statement

A set of principles to guide agencies in the development of local policy and practice regarding use of restraints with pregnant inmates

This statement is not a proscribed policy but a starting point for developing policy and practices that...

maximizes safety and minimizes risk for pregnant women and girls, their fetus/newborns, and correctional and medical staff

Applies:

- Across a variety of settings (i.e., criminal justice, juvenile justice, psychiatric and forensic hospitals, law enforcement transport)
- To both women and girls
- During pregnancy, laboring, delivering, post-partum

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Why a Best Practices Statement?

- An increased focus on gender-responsiveness in corrections
- Growing national focus on trauma-informed care and the reduced use of seclusion and restraint (e.g., SAMHSA's Trauma and Justice Initiative)
- Changing human rights standards around the world (Amnesty International, Human Rights Watch, ACLU, UN)
- Growing body of case law and legal considerations
 - Lawsuits related to violations of human or constitutional rights, inadequate medical care, wrongful death of infant

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Why a Best Practices Statement?

"The opposition of medical, legal, and international communities to routine shackling during childbirth establishes that it is better policy to limit restraints to extreme cases in which a record can be established justifying the practice. This view also reflects the safer course for correctional administrators to avoid litigation."

—Myrna Raeder, J.D., Professor of Law at Southwestern Law School

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Principles

1. All service settings should have **written policies and procedures** on the use of restraints on pregnant, laboring, birthing, and post-partum women.
2. Policies and procedures on the use of restraints should be **developed collaboratively** by correctional leaders and medical staff.
3. Policies and practices **specific to the needs** of pregnant women and girls are necessary to ensure health and safety for pregnant women and their fetuses/newborns.
4. Policies and their associated procedures should clearly reflect the need to **balance** the safety, health, and well-being of the pregnant woman and her fetus/newborn with that of all other parties involved, and should be **gender responsive**.
5. The use of restraints on pregnant women under correctional custody should be **limited to absolute necessity**.

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Recommendations for Operational Practice

1. Abdominal, leg and ankle, behind-the-back wrist, and four-point restraints are expressly prohibited under any circumstances due to risk of injury to the pregnant woman or fetus/newborn.
2. Wrist restraints may be used only in a manner that allows the pregnant woman to protect herself and her fetus in the event of a forward fall.
3. Restraints should never be used during labor and delivery.
4. The use of restraints should be avoided during the post-partum period; if restraints are deemed absolutely necessary, they should not interfere with the mother's ability to safely handle and promptly respond to the needs of her newborn.
5. When transporting pregnant women, restraints should not be used except where absolutely necessary.
6. Standard operating procedures should outline a clear process and frequency for reassessing the use of restraints when they have been deemed absolutely necessary.

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Recommendations for Operational Practice (cont.)

7. Standard operating procedures should be in place to address emergency and non-emergency decisions around the use of restraints.
8. All uses of restraints should be documented thoroughly.
9. A debrief should occur following any use of restraints to review documentation and determine whether proper procedures were followed.
10. Correctional staff should universally receive training on restraint policy, procedures, and specific variations for use with pregnant women in custody.
11. Quality control and assurance methods should be in place to track adherence to policy and procedure, the impact/effectiveness of the restraint policy, and the need for adjustment in policy or practice over time.

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For More Information

The Best Practices Statement is available at our website:

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