

## **Restraint and Seclusion under the Autism Waiver**

Restraint and Seclusion refer to safety procedures used to physically hold (restrain) or shelter and isolate (seclusion) the client from becoming a danger to themselves or others. It is important to have a clear understanding that restraint is only to be used to keep the child and the worker safe from imminent danger. It is not to be used when other less restrictive alternatives haven't been tried first. As an employee working under the Autism Waiver, the use of seclusion is a prohibited safety procedure that can never be used. We believe that restraint should be a last resort effort that technicians can only use if their client is in imminent danger to himself/herself or others.

### **1. As an employee of Endless Options please remember:**

- a. We strive to maintain the dignity and respect of the individuals we serve. Restraint can be a damaging and traumatic experience for both client and worker that could undermine a very important working relationship.
- b. Restraint is never to be used without prior consent and training. If administered incorrectly, the client and worker could be hurt. Refer to the separate "No-Restraint, No Hands On" policy.
- c. Restraint isn't the proper procedure for a client who is non-compliant, disruptive, or verbally threatening, only for a client whose actions place them in imminent danger.
- d. The worker may never hit a child, restrict a child's breathing, threaten a child with a weapon, or in any other way threaten or harm a child with physical force.
- e. With our clientele, aggressive behavior may occur. In the event that the client becomes agitated beyond your individual clients typical realm of behavior, use the following procedure:
  - Provide substantial distance between yourself and your client, this will communicate that you are not engaging with them.
  - Minimize your language, providing concise directions and pausing at least ten seconds before re-directing.
  - Maintain a low voice volume and model appropriate coping strategies through your behavior.
  - If you manage to get the client to sit, remove any hazardous, unsafe materials from the area, provide any coping mechanisms the client may have, i.e. music, book about a subject they enjoy, video, etc...This requires discretion because you cannot provide the coping tool if the client may break it.
  - Provide adequate time and space for de-escalation to occur, if possible have the client communicate their readiness to move on.