



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene


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Developmental Disabilities Administration
Diane K. Coughlin, Director

Central Maryland Regional Office
Alexis M. Melin, Regional Director

MEMORANDUM

To: BPS Trainers

From: Donna Shreve, Regional Training Coordinator 

CC: Diane Dressler, Statewide Training Coordinator

Date: November 1, 2006

Re: New Techniques Approved for Use

After careful review, the Statewide Behavior Supports Committee has approved the use of two new physical intervention techniques which have been incorporated in the Behavior Principles and Strategies (BPS) training program. These techniques include the *Basic Escort: One and Two Person Alternative* and the *Two/Three/Four Person Sitting Restraint*.

The new techniques utilize previously approved interventions in different combinations or with additional staff. BPS Instructors are not required to receive additional training in the interventions, however, a list of resources for contacting Master Trainers should you desire technical assistance are also noted below.

Effective November 1, 2006, all BPS trainers will be required to incorporate the two new techniques in their Level IV BPS training for new staff. In addition, BPS refresher classes are required to incorporate the new techniques in all classes for previously trained staff who require training in Unit IV. Completion of training for these staff must be completed by December 31, 2007.

Thank you for your assistance and cooperation with implementing this change in your BPS training curriculum. Please contact me if you require additional information.

Master Trainers in Central Region are as follows: JK Ferrell and Jane Conrad at the Arc of Baltimore (410) 296-2272, and Dale Yoder at WMIBMP (301) 791-9580.

Attachments

c/o Rosewood Center • Rosewood Lane • Owings Mills, Maryland 21117
410-902-4500 • Fax 410-581-6170

Toll Free 1-877-874-2494 • TTY for Disabled – Maryland Relay Service 1-800-735-2258

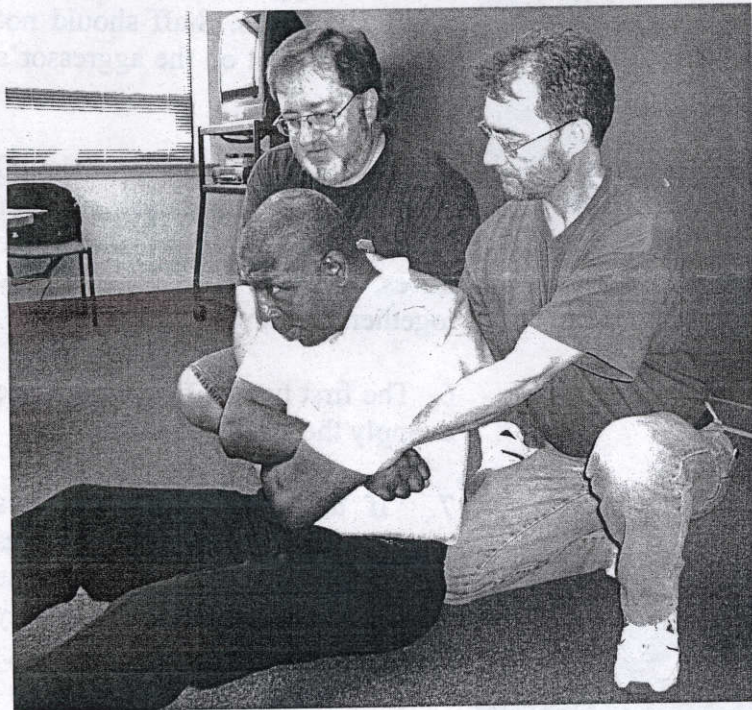
Web Site: www.dhmh.state.md.us



Two/Three/Four Person Sitting Restraint

Purpose: This intervention may be used if it is necessary to go from a standing position to a sitting floor position while initially engaging in a Two Person Basket Hold.

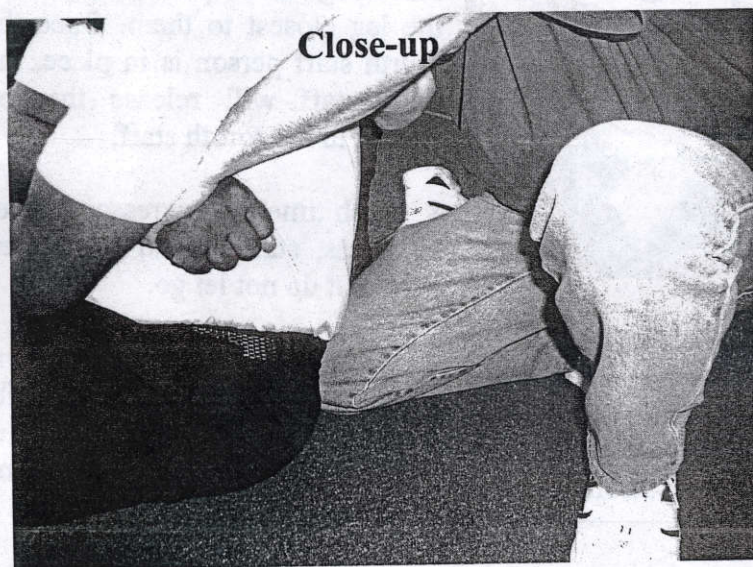
NOTE: this is a continuation of the Take Down Basket Hold: Two Person technique found on page 4-40.



1. Position the aggressor on the floor in a sitting position between both staff members who are kneeling on their inside knee. The inside knee must be down on the floor, with the upper knee/thigh area providing support to the aggressor's lower back. Each staff member's inside hand should be placed on the top of the aggressor's shoulder, with their arm providing support down the aggressor's upper back.

2. Each time the aggressor relaxes or calms, you can relax your hold, but do not let go.

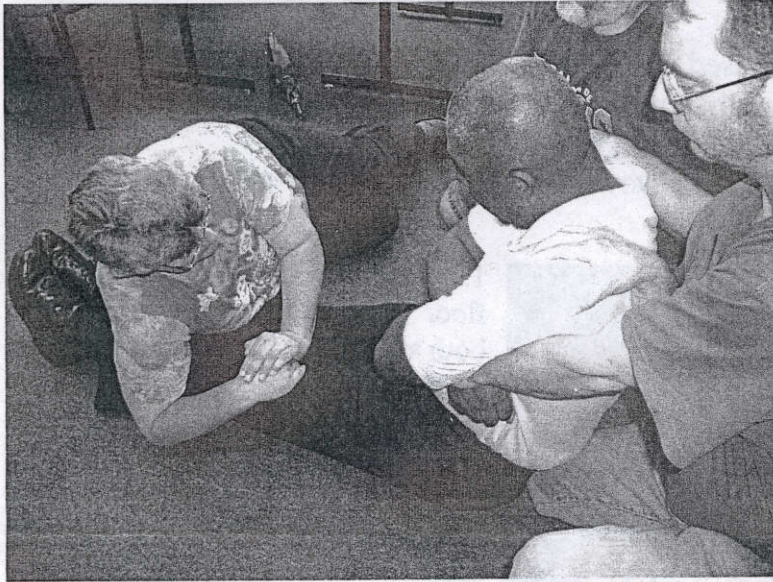
3. As the aggressor calms down re-establish communication with him. Once communication has been established and the struggling has ceased, release the hold.



NOTE: Calm, concise communication between all staff members is critical for effective team intervention.

As with all physical interventions, monitor the aggressor's vital signs (breathing, skin color, etc.) to ensure no medical complications.

NOTE: If this technique is not sufficient, proceed to the next series of steps.



4. At the team leader's instruction a third staff member should be sitting on the floor beside the aggressor, facing toward his head. Their inside arm, with their elbow on the floor, should be positioned over the aggressor's ankles, just below the knees. Staff should not put their weight on the aggressor's legs.

5. This staff person should place their hands/arms over the aggressor's thighs above the knees, holding the legs tightly together and down on the floor.

6. The first two staff will continue to apply the Basket Hold.

7. If the third staff person is unable to hold the aggressor's legs tightly together and down on the floor, a fourth staff person may assist at the leader's request.



The fourth staff person should approach the aggressor from the opposite side of the third staff, mirroring their positioning with the leg closest to them. Once the fourth staff person is in place, the third staff will release the leg closest to the fourth staff.

8. Each time the aggressor relaxes or calms, staff should relax their hold, but do not let go.

9. As the aggressor calms down, re-establish communication with him. Once communication has been established and struggling has ceased, release the hold.

NOTE: As with all physical interventions, continue to monitor the aggressor's vital signs (breathing, skin color, etc.) to ensure no medical complications.

Basic Escort: One and Two Person Alternative

Purpose: when staff need a free hand while providing minimal support while walking. It should not be used on a person who is extremely aggressive, although it may be used as a lead-in to a more restrictive technique. This can be used with one or two staff members.



1. Facing the same direction as the aggressor, stand to the side and slightly behind him/her.

2. Slide your inside arm between the aggressor's arm and their body, grasping him/her under the forearm.

3. Keeping his elbow at a 90 degree angle, tuck his/her arm in against his side.

4. Keeping your hip in close, gently guide the person to his/her destination.

5. If the aggressor requires additional support, a second staff can be used to assist, mirroring the first staff person's positions on the other side of the aggressor.



NOTE: the staff person's outside arm/hand is free for needs such carrying objects, opening doors, etc.