

SEVERANCE POLICE DEPARTMENT POLICY 301.8 USE OF PRONE RESTRAINT

Consistent with training, to reduce the risk of asphyxiation while restraining an individual in a prone position, (CRS § 18-1-707):

- a. Officers should, as soon as safe and feasible after handcuffing or otherwise restraining a person in the prone position, roll the person to the side and move the person to an upright position that does not impede the mechanism of normal breathing, unless the person is unconscious.
- b. Officers should use a stepped process to move a person to standing (i.e., moving the person gradually from the prone position by transitioning through side, sitting, and kneeling positions before assisting them to stand).
- c. Officers should not put prolonged pressure on the individual's chest, neck, head, or back, including by sitting, kneeling, or standing. Application of such force shall end as soon as the person is restrained. Other control tactics may be employed to counter ongoing resistance.
- d. Officers should continuously monitor the person's condition while in prone restraint. Monitoring includes but is not limited to assessing the adequacy of the individual's breathing, color, and any impairment as verbalized by the individual.
- e. The ranking officer shall, whenever possible, designate a safety officer during team restraint. If the safety officer becomes aware of an issue with the person's breathing or color or of any impairment, the safety officer shall inform the ranking officer. The safety officer shall monitor the health and welfare of the person until either:
 1. Responsibility is transferred to a health care professional (e.g., emergency medical technician (EMT), paramedic).
 2. The person is placed in a seated position in a transport vehicle and verbalizes to the safety officer that the person feels well, and the person appears to the safety officer to be well and speaking normally.

Once it is reasonably safe to do so, medical assistance shall be provided or obtained for any person who exhibits signs of physical distress, has sustained visible injury, expresses a complaint of injury or continuing pain, or was rendered unconscious. Any individual exhibiting signs of physical distress after an encounter should be continuously monitored until the individual can be medically assessed. See the Medical Aid and Response Policy for additional guidance.

Members shall not transport a person while they are restrained in the prone position.