## SENATE CONCURRENT RESOLUTION

REQUESTING THE GOVERNOR OF THE STATE OF HAWAII TO CONVENE A TASK FORCE TO REVIEW POLICIES FOR STATE FUNDED PROGRAMS AND SERVICES ON THE USE OF RESTRAINTS AND SECLUSION ON ADULTS AND CHILDREN IN INSTITUTIONAL AND NONINSTITUTIONAL SETTINGS.

WHEREAS, the use of restraints is a common intervention to prevent a person who is aggressive or agitated from harm to self or others; and

WHEREAS, the effects of restraints can include isolation, depression, panic, physical or mental trauma, retraumatization, fear, and anger; which can include a loss of dignity, independence and self-esteem; as well as physical effects, such as pressure sores, infection, incontinence, and muscle atrophy; and

WHEREAS, there have been a great many studies documenting the adverse effects, both physical and mental, on people who are restrained, such as new studies in Canada and the United States which reveal that death from the use of restraints happens all too frequently; and

WHEREAS, it is estimated that eight to ten child deaths, and countless injuries, including bites, damaged joints, broken bones and friction burns, in the United States each year involve behavior management restraints; and

WHEREAS, the investigative reporting team of Connecticut's largest newspaper, The Hartford Courant, documented that there are between 50 to 150 deaths each year as the result of restraints; and

WHEREAS, within our State, there is no standardized or integrated reporting mechanism across service environments and programs; and consequently, there is no data on the number of

injuries to either recipients or staff members occurring during behavior management interventions in which restraints are used; and

WHEREAS, there are accreditation guidelines for the use of restraints and seclusion from organizations such as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), the Commission on Accreditation of Rehabilitation Facilities (CARF), and Centers on Medicare and Medicaid Services (CMS); however, these guidelines only cover a small segment of the population, and may not protect the rights of individuals who may be restrained in community and classroom settings; and

WHEREAS, the Hawai'i Maternal and Child Health Leadership Education in Neurodevelopmental and Related Disabilities Program (MCH LEND) 2006 Community Needs Assessment on Autism identified that:

(1) There is an inconsistency in guidelines and protocols regarding the purpose and the implementation of restraints across departments, service environments, and programs;

(2) This inconsistency can become a point of confusion for individuals who are served by more than one program or in more than one service setting;

(3) This inconsistency can also be a challenge for individual service providers who work for more than one program and may have to implement a different methodology, depending not on the circumstances of the incident, but program requirements; and

(4) At times, restraints are being implemented by individuals who may not have adequate or current training in the restraint methodology of the program; and

WHEREAS, there has been an increase in the identification and the use of restraints within the Hawaii Medicaid Home and Community Based Waiver Programs as found in their ongoing quality monitoring activities; and



WHEREAS, the Hawaii Families As Allies (HFAA) Youth Council has identified the use of restraints as one of the most important issues facing Hawaii's youth with disabilities; now, therefore,

BE IT RESOLVED by the Senate of the Twenty-fourth Legislature of the State of Hawaii, Regular Session of 2007, the House of Representatives concurring, that the Governor is requested to convene a task force to review the current definitions, uses, and methodologies employed by the Departments of Education, Health, Human Services, and Public Safety, and other publicly funded programs as it relates to the use of restraints and seclusion on adults and children in institutional and noninstitutional settings, as well as the current literature and best practices, to develop a consistent statewide policy; and

BE IT FURTHER RESOLVED that the Governor involve representatives of all relevant agencies and organizations, both public and private, in the convening of the task force; and

BE IT FURTHER RESOLVED that the purpose of the task force is to review the policies of state-funded programs and services on the use of restraints and seclusion to ensure they are being implemented consistently; and

BE IT FURTHER RESOLVED that the task force is requested to:

(1) Clarify the use of restraints and seclusion and define appropriate uses;

(2) Delineate the strategies and methodologies used related to de-escalation;

(3) Define the minimum documentation and debriefing requirements of restraint or seclusion use;

(4) Determine the feasibility of implementing a standardized methodology across programs and service environments;

(5) Make recommendations on the initial and ongoing training requirements of personnel;

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1 2 3 4 5	(6)	Review potential alternatives to the use of restraints and seclusion, and incorporate these alternatives into the protocols of the various programs and agencies; and
6 7	(7)	Develop specifications for a quality monitoring system that:
8 9 10		(A) Can be replicated across departments for consistency;
11 12 13 14		(B) Tracks the use of restraints or seclusion in institutional and noninstitutionalized settings, differentiating between uses on adults and children;
16 17		(C) Tracks serious injuries in any setting; and
18 19 20		(D) Establishes guidelines for quality reviews and data analysis to identify trends; and
21 22 23		FURTHER RESOLVED that the task force membership at not be limited to representatives from:
24 25 26 27 28 29	(1)	The Department of Health, including representation from the Adult Mental Health Division, Child and Adolescent Mental Health Division, Developmental Disabilities Division, Dental Health Division, Family Health Services Division, and the Office of Health Care Assurance;
31 32 33 34	(2)	The Department of Education, including representation from Special Education, Regular Education, and Transportation;
35 36 37 38	(3)	The Department of Human Services, including representation from the Social Services Division, Office of Youth Services, and Child Welfare;
39 10	(4)	The Department of Public Safety;
#1 #2 #3	(5)	The University of Hawaii, including the Maternal Child Health Leadership Education in Neurodevelopmental and

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Related Disabilities Program and the Center on
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              Disability Studies;
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         (6)
              Hawaii State Council on Developmental Disabilities;
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              Disability and Communication Access Board;
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              Hawai'i Disability Rights Center;
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              Healthcare Association of Hawaii;
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             Hawaii Long Term Care Association;
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              Hawaii Families as Allies:
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             Community Children's Council;
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        (13) Hawaii Centers for Independent Living;
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        (14) Private service providers; and
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              Consumer representation; and
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         BE IT FURTHER RESOLVED that the task force is requested to
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    submit to the Legislature an annual report no later than twenty
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    days prior to the start of each Regular Session, beginning with
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    the Regular Session of 2008, on its findings and
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    recommendations, including any legislation or funding
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    appropriation necessary to implement the recommended policy; and
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         BE IT FURTHER RESOLVED that certified copies of this
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    Concurrent Resolution be transmitted to the Governor, Director
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    of Health, Director of Human Services, Superintendent of
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    Education, Director of Public Safety, Board of Regents of the
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Director of the Hawaii Families as Allies, Supervisor of the Community Children's Councils, and the Executive Director of the Hawaii Centers for Independent Living.

University of Hawaii, Executive Administrator for the Hawaii

of the Disability and Communication Access Board, Executive

Director of the Hawai'i Disability Rights Center, Executive

Director of the Healthcare Association of Hawaii, Executive

Director of the Hawaii Long Term Care Association, Executive

State Council on Developmental Disabilities, Executive Director

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