



Date: December 1, 2021

DMS Numbered Memo: 2021-07  
DCTS Action Memo 2021-15  
DQA Memo 21-008

To: Adult Day Care Centers  
Adult Family Homes  
Certified/Regulated Facilities Serving People With Developmental Disabilities  
Certified/Regulated Mental Health and Substance Use Treatment Programs  
Child and Adolescent Day Treatment Facilities  
Children's Long-Term Supports Supervisors and Leads  
Community-Based Residential Facilities  
Community Recovery Services Providers  
Community Support Programs  
Comprehensive Community Services Programs  
County Community Options Program Coordinators  
County Human Service Directors  
County Mental Health Coordinators  
County Social Services Directors  
County Waiver Coordinators  
Home and Community-Based Services (HCBS) Providers  
IRIS Consultant Agencies  
Managed Care Organizations  
Medicaid Certified Personal Care Providers  
Medically Monitored Detoxification Programs  
Residential Care Apartment Complexes  
Tribal Chairpersons/Human Services Facilitators  
Youth Crisis Stabilization Facilities

From: Jim Jones, Administrator, Division of Medicaid Services  
Rose Kleman, Administrator, Division of Care and Treatment Services  
Otis L. Woods, Administrator, Division of Quality Assurance

**Prohibited Restraints and Restrictive Measures in Community-Based Programs  
and Facilities**

## Summary

This memo specifies maneuvers or techniques that may not be used at any time in community-based homes, programs, and facilities. These prohibited maneuvers or techniques present an inherently high risk of serious injury and death. Any use of the procedures listed in this memo must be terminated immediately.

## Background

The Wisconsin Department of Health Services (DHS) supports the national trend of reducing restrictive measures and physical interventions. The ultimate goal is to replace such interventions with trauma-informed systems and settings, positive behavior supports, and non-coercive intervention strategies. DHS promotes long-term support, recovery, and healing that is consumer-driven, person-centered, trauma-informed, and recovery-based.

Restraint, seclusion, and restrictive measures must be avoided whenever possible and may only be used after all other feasible alternatives, including de-escalation techniques, have been exhausted. When necessary, restraint, seclusion, and restrictive measures may only be used with the minimum amount of force needed, and for the shortest duration possible, to restore safety.

## Prohibited Maneuvers, Techniques, or Procedures

The following maneuvers, techniques, or procedures may not be used in any circumstances:

- Any maneuver or technique that does not give adequate attention and care to protection of the head.
- Any maneuver or technique that places pressure or weight on the chest, lungs, sternum, diaphragm, back, or abdomen.
- Any maneuver or technique that places pressure, weight, or leverage on the neck or throat, on any artery, or on the back of the head or neck, or that otherwise obstructs or restricts the circulation of blood or obstructs an airway, such as straddling or sitting on the torso, or any type of choke hold.
- Any maneuver or technique that involves pushing into a person's mouth, nose, or eyes.
- Any maneuver or technique that utilizes pain to obtain compliance or control, including punching, hitting, hyperextension of joints, or extended use of pressure points.
- Any maneuver or technique that forces a person to remain in a prone (face down) position.
- Any maneuver or technique that forcibly takes a person from a standing position to the floor or ground. This includes taking a person from a standing position to a horizontal (prone or supine) position or to a seated position on the floor.
- Any maneuver or technique that creates a motion causing forcible impact on the person's head or body, or forcibly pushes an individual against a hard surface.
- The use of seclusion where the door to the room would remain locked without someone having to remain present to apply some type of constant pressure to the locking mechanism.

## Additional Information

The use of restraint or restrictive measures to control a person or as a response to a person's behavior is not treatment, nor is it therapeutic. All facilities and programs should become familiar with the changing standards of care and best practices focused on building skills and techniques to de-escalate and redirect behaviors that present safety concerns, and work earnestly to promote a trauma-informed culture of care.

Trauma-informed practice and restraint reduction resources

- [Resilient Wisconsin: Applying the Parallel Values of Trauma-Informed Practices](#)
- [Resilient Wisconsin: Developing Parallel Skills for Trauma-Informed Practice](#)
- [Resilient Wisconsin: Healing Comes from Relationships](#)

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- [Promoting Alternatives to the Use of Seclusion and Restraint](#)
- [Promoting Alternatives to the Use of Seclusion and Restraint: Making the Business Case](#)
- [Six Core Strategies for Reducing Seclusion and Restraint Use](#)
- [Restraint Reduction](#)

In addition to the information in this memo, entities must follow program specific guidance related to the use and approval of restrictive measures. Information may be found in DHS publications and webpages on restrictive measures

- [Restrictive Measures Guidelines and Standards](#)
- [Instructions and Requirements for the Use of Restrictive Measures in Long-Term Support Programs for Children](#)
- [Waivers, Approvals, Variances, and Exceptions: Assisted Living \(Restrictive Measures Request Process\)](#)

For questions regarding this memo:

## CENTRAL OFFICE CONTACTS

### **Division of Care and Treatment Services**

Bureau of Prevention Treatment and Recovery

[dhswebmaildcts@dhs.wisconsin.gov](mailto:dhswebmaildcts@dhs.wisconsin.gov)

### **Division of Medicaid Services**

#### **Family Care, PACE, Partnership, IRIS**

Bureau of Quality and Oversight

[dhsdmsltc@dhs.wisconsin.gov](mailto:dhsdmsltc@dhs.wisconsin.gov)

### **Division of Medicaid Services**

#### **Children's Long-Term Supports Program and Children's Community Options Program**

Bureau of Children's Services

[dhsclts@dhs.wisconsin.gov](mailto:dhsclts@dhs.wisconsin.gov)

### **Division of Quality Assurance**

Bureau of Education Services and Technology

[dhswebmaildqa@dhs.wisconsin.gov](mailto:dhswebmaildqa@dhs.wisconsin.gov)

## REGIONAL OFFICE CONTACT

Area Administrators

[dhsareaadmin@dhs.wisconsin.gov](mailto:dhsareaadmin@dhs.wisconsin.gov)