

# "TACT-2" Announcement

To all TACT-2 Agencies and Trainers

Changes to TACT-2 Prone Restraint Policy, effective July 1, 2008

## TACT-2 Program Changes

### Prone restraint removed July 1, 2008

Due to concerns regarding positional asphyxia, a number of states have banned the use of prone restraints in the past 5 years. More states are moving in that direction in 2008.

On the plus side, effective prone restraints provide a much greater level of control over large or violent youth, who might otherwise escape and injure themselves, staff or other youth. It is my position that prone restraints can be very safe when:

- √ Agencies are sufficiently staffed to allow 2-4 staff to participate in a prone restraint;
- √ Staff are well-trained in carefully designed de-escalation and safe restraint techniques;
- √ Staff are informed and cognizant of youths' preexisting health conditions; and
- √ Staff maintain the level of calm professionalism needed to monitor youths' emotional and physical well-being.

However, even when well-designed and well-executed, prone restraints contain an inherent potential for danger, as they place youth in a face down position which could possibly compromise breathing. When the conditions above are met, staff can respond quickly and intelligently to emotional and physiological concerns before they become emergencies.

Unfortunately, the reality is that too many agencies and too many staff fail to meet these conditions. Across the nation, youth care agencies are often understaffed, and because of high turnover, utilize inexperienced and poorly trained individuals. Staff are frequently uninformed of health conditions which might impact the safety of a restraint, or in the heat of the moment, lose the professional perspective needed to make safe and therapeutic decisions. As a result, too many youth are put at greater risk than needed, and it falls to state government agencies to create policy restrictions which assure the safety of youth.

Given the realities cited above, I have decided to voluntarily remove the prone restraint from the TACT-2 program. Effective July 1, 2008, the SEATED double arm bar restraint, which we have been training for 4 years, will become the primary restraining technique of the TACT-2 program. While not quite as effective as the prone restraint for larger or more violent youth, it has many advantages. The TACT-2 seated restraint poses no threat of positional asphyxia, so previously enforced time limitations on restraints will be extended. The technique is easier for physically limited staff to learn and master, and the seated position provides greater opportunities to monitor youth as they de-escalate. Given a solid wall for staff to brace against, the vast majority of youth can be effectively held by only two trained staff members using this technique.

The guiding principle of all physical intervention within the TACT-2 program is this: Never allow an intervention to cause more harm than it prevents. Our goal in imminently dangerous situations is always safety, not simply control. I hope that this change in the program will be viewed as a step in that direction.



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