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Book Descriptions:

control and restraint training manual

The disclosure of this manual is for information purposes only. This document is strictly for the use of Rampton Hospital qualified instructors only. The physical interventions contained in this manual should not be attempted by anyone other than employees of Nottinghamshire Healthcare NHS Trust who have been certified as having received the appropriate instruction and training in the techniques detailed. Nottinghamshire Healthcare NHS Trust cannot accept any responsibility for any harm or injury caused to any individual as a result of the application of techniques contained in this manual being carried out by an individual who has not been certified as having received the appropriate training to perform these techniques by a Rampton Hospital qualified instructor. CR was initially developed by the prison service as a way to deal with violent episodes, and since then has cascaded in to the health service with adaptations made to meet the needs in forensic mental health services and named "C and R General Services" Wright, 1999. All staff at risk of being faced with violence in mental health settings across the NHS are trained in managing violence and aggression. This is a requirement under the Health and Safety at Work Act 1974 who place responsibility on organisations to ensure they provide a safe working environment for staff. With any physical intervention health risks increase, these include Positional Asphyxia a body position that interferes with your breathing, Compartment Syndrome increased pressure in a muscle compartment, Metabolic Acidosis too much acid in the body fluid to name a few. Staff who attend this training are required as a minimum to be trained in Basic Life Support BLS Resuscitation Council UK. Each warmup that is carried out must be started with basic cardio vascular exercises. This enables each student's muscles to warm up gradually by increasing their heart rate, which in turn increases blood and oxygen flow to the muscles. <http://www.meattravel.pl/userfiles/colt-black-powder-revolver-manual.xml>

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This prepares the muscles for stretching techniques. There are two basic principles of an effective warmup Keep safe. All warmup and stretching techniques must be recognised as safe and when practiced correctly do not increase the risk of injury. Be effective. All techniques must be recognised and designed to warmup and stretch each individual muscle group. Prior to commencing a "warmup", it is important that students recognise their own limitations. Hands in front of your face. Do not clench your fists. 2. Front strangle, open space Protective stance, raise arm nearest aggressor high trapping the hand between your neck and shoulder, turn inwards releasing the grip, back away. Clavicle diversion. Use two fingers, thumbs or phoenix fist to apply this diversion. Place at the bottom of the earlobe and apply technique by sliding straight down to the soft tissue area behind the clavicle. Pressure should be applied downwards. Ear diversion. Place finger, thumb or phoenix fist middle knuckle protruding in the soft tissue area behind the earlobe. Other hand to cup the other side of the head. Compress hands together, finger aiming towards the opposite eye. Phoenix fist diversion. Place knuckle on the aggressor at the top of the sternum, your other hand takes hold of your wrist. Slide your knuckle down the centre until you feel a small "pocket" Apply pressure by pushing and twisting your knuckle at the same time. Take a tiny pinch of the aggressors' skin on each upper arm. Flick fingers. 3. Choker Hold Both hands to take their forearm situated around your neck. Shrug your shoulders forward and pull down on their forearm creating a small

gap, place your chin in the gap. Release your hand closest to their hands, drop your shoulder and take that arm backwards all the way around to cup their chin from the inside, ensure your hands stays clear of their mouth , at the same time take your inside leg back turning to face the aggressor as you do. <http://change4best.ru/upload/colt-black-powder-instruction-manual.xml>

Keep yourself upright, bending your knees maintains your balance. If you cannot get your arm around to the chin then take a grip of the clothing of their opposite shoulder. The Other hand now takes a grip of the skin on the upper aspect of the inner thigh on the inside leg squeezing it to cause the discomfort. 4. High Bear Hug archive Pin the aggressors' hands to your chest using both hands. Step to the side. On the same side flick your elbow up so it is pointing towards the ceiling creating a gap. Step through with the remaining leg. Keep hold of their hands until you have completed the breakaway. 4.1 Bear Hug from Behind, arms trapped 4.2 Place a foot slightly forward, take the lock off your knees. Rotate hands behind you, thrust your hips forward. Take a grip of the aggressors' upper aspect of the inner thighs and squeeze tightly causing them to release their grip. 4.3 Bear Hug from Behind arms free, interlinked fingers Place a foot slightly forward, take the lock off your knees Place the heel of your hands on the top of their forearms. Drive your hands forward on their forearms until you get to their wrists. Compress the heels of your hands on to their wrists; this will make their fingertips more accessible. Clench your fist, place your knuckles on the back of their hand, hold on to your wrist, and move up and down their hand using a "sawing" motion until the grip is released. 5. Hair Pull from the Front one handed Protective stance. Place heels of hands on top of the aggressor's knuckles and compress them on to your head. Dip your head down and move backwards bringing the aggressor off balance. 5.1 Hair Pull from Behind one handed Place one foot slightly forward, take the lock off your knees. Place both thumbs under the aggressor's wrist and wrap your fingers around the hand pinning it to your head. Bring your elbows together to protect your face. Turn inwards or outwards keeping your distance from the aggressor.

When facing the aggressor maintaining a protective stance thrust your hips forward and bring your head up as though you were to look them in the eye. 5.2 Hair Pull from Behind two handed As above except one hand takes each wrist of the aggressors. 6. Clothing Grab one handed, palm up Protective stance. Place thumbs at the back of the hand, spray fingers around the wrist. Clench fist, grab your own fist, bring elbow in to your side and your fist up towards your face. Raise elbow rotating your wrist across your face and backing away. 7.1 Wrist Grab opposite arm grabbed Protective stance. Block punch between your wrists. 8.1 Punches from the side Forearms in front of face, elbows in front of fists. Block punch between the aggressor's wrist and elbow. 9. Strangles on the Floor straddle Bend one knee up bringing your foot close to your bum. Opposite arm, over the nearest arm and secure the other arm by the elbow, other hand also secures the same elbow. Dip the other elbow. Thrust your hip up and sideways and using the secured elbow push the aggressor sideways. 9.1 Strangle on the Floor at the side Secure both wrists and tuck elbows in to your side. Walk away from the aggressor until your head has past their knees. Roll on to your stomach keeping hold of the wrists. Changing staff in the kneeling position 11. Toweling down 12. Undressing 13. Leg management supine 13.1 Leg management prone 14. Pinned to rest prone facing the head 14.1 Pinned to rest prone facing the feet 15. Pinned to rest supine facing the head 16. Assist to standing sitting and kneeling position 17. Doorways 17.1 Doorways knees 18. Stairs 19. Three person team 20. Bend the wrist and move the arm inwards, inside hand to mirror the outside hand. Outside hand to slide down to the elbow thumb in the crease. Push the aggressors elbow down securing it on your hip. Return outside hand to mirror inside hand.

No 2 Outside hand to mirror the aggressor's hand hook thumb on the inside of the wrist, inside hand to cover, rotate the hand inwards until the fingers are pointing up. Inside hand takes the finger and thumb, outside hand takes the thinnest part of the wrist. The palm of your hand should be on the back of the aggressors. Keep the wrist bent without applying discomfort. No 1 to approach the

aggressor remaining sideways. Rotate the hand inwards into your outside hand. Outside hand, place thumb in the crease of the wrist, place your fingers on the back of their hand. Inside hand releases the hold; bring the arm across your body at an angle, inside arm hook under the aggressor's arm then securing the elbow grabbing your own clothing on the opposite shoulder. Number 1 to move back. Inside leg moves first, outside leg always plays "catch up". Do not trap the aggressor's feet. Outside leg needs to be at a 45 degree angle to aid the stability of the team. No 1 to remain sideways, kneel on knee closest to the aggressor. No 1 turn the aggressor's head to the side placing one hand on either side of their head thumb facing the back of the head, this ensures that should you need to turn the head you will maintain control. Ask the aggressor to "kick their legs out". No 2 outside hand to elbow, fingers in the crease, thumb at the back, lift the elbow, feed the hand through, place the whole arm flat on the floor in a "V" shape, and trap the elbow with your knees. Thumb to remain on the elbow pinning it to the floor. To return to the kneeling position, No 2 each in turn, turn to face number 1 bringing your outside leg up, lift the aggressor's elbow, feed the arm back through, forearms remain flat on the floor, inside knee blocks the elbow. Return the patient to the kneeling position. No 4 approach from the bottom or the top of the aggressor. Kneel next to No 2, "mirror" No 2's hands securing the aggressor.

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When secure No 2 will continue to block the aggressors wrist whilst number 4 places their knees either side of the elbow. 10. Changing Staff in the Kneeling Position No 2 Outside hand slides to the elbow, fingers in the crease, thumb hooked round the back. Turn the aggressor's hand inwards stand up, feed the arm back, step back with your outside leg, place thumbs at the back of the hand, fingers to be sprayed around the wrist, ensure the aggressor's wrist is higher than the shoulder. No 4 to approach in a safe stance from behind mirror No 2 with your hands and feet. No 4 Take the aggressors finger and thumb with your inside hand, outside hand to the elbow, thumb on top, turn the hand inwards, step forward with your outside leg and kneel on your inside knee. Outside hand takes the thinnest part of the wrist, thumb on top. No 1 ensure they are in a position so No 4 is approaching the side No 1 has the aggressor's chin guarded, this is to prevent being bitten. No 4 to approach in a safe stance from the front. Depending on the height of the staff and aggressor will dictate whether the staff kneels or remains in the standing position. Standing keeps your hip in close maintaining a protective stance. Outside hand takes the wrist; inside arm goes over and under the aggressor's upper arm taking hold of your own wrist. If kneeling, kneel on your inside knee outside leg up at a 45 degree angle. If kneeling ensure no pressure is applied to the arm to assist you to stand. Remove clothing on the upper body using the changing staff and towel down procedure. Place the aggressor in the "rest position prone". No 4 to approach the aggressor's legs, bum first from the side, elbow tucked in, forearm at an angle to protect your ribs, fist clenched. Place your inside knee and shin across the ankles to prevent being kicked, do not apply any weight. Use both hands to roll their ankles away from you. Remove their clothing down past their knees.

<http://askueandco.com/images/canon-ir330-400-pcl-manual.pdf>

Place your outside leg in the same position as your inside leg still below their knees, remove your inside leg and remove the remainder of the clothing. Place a hand on each ankle and swiftly move away. 13. Leg Management Supine Kneel on inside knee next to the aggressor's legs above the knee. Place forearm across the legs and above the knees. Place the other forearm in the same place. Remove other forearm from the legs and grip your other hand. Distribute your weight evenly by spreading your legs out, lean back. Reverse procedure to get off the legs. 13.1 Prone As above except. Place forearm across their ankles, roll the ankles away. 14. Pinned to Rest prone Facing Towards the Head Pin the aggressors arms laying across them making sure your chest is above the arm palms facing down. No 1 supports the head by placing one hand under the head and the other on the other side of the head thumb behind the ear. No 2 tulip grips thumb to thumb, the

aggressor's hand. Place your weight back on the elbow. Inside arm feed under the bicep and take the finger and thumb, outside hand to the elbow, push up, block the elbow with your inside knee, outside leg up. Place the arm in to the rest position. 14.1 Facing towards the Feet Pin the arms as above. Roll the arm on the thumb so the palm is facing up. Bend the wrist and take the finger and thumb with your outside hand. Raise your chest and fold the arm into the rest position. 15. Pinned Supine to sitting then Standing Facing Towards the Feet No 1 supports the aggressor's head by placing one hand under the head and the other on the forehead. No 2 pin the arms. Outside hand takes a tulip grip then folds the arm inwards. Inside arm feeds under the aggressors arm and takes the finger and thumb hold. Outside hand pins the elbow, outside leg up. When sitting staff should ensure their shoulder is behind the aggressors shoulder. No 1 asks the aggressor to bring their knees up towards their chest.

Place a foot to block the feet and take control of the head and ask the team and aggressor to stand. See Assisted Stand 16. Bend your knees keeping your back straight. No 1 moves their body so their back is towards the leading staff. Walk sideways through the door keeping their hips in close. Do not block the aggressor's feet. This may also be the case with the aggressor. When returning to standing remains in line with the door frame and use Assisted Lift technique. 18. Stairs Set up of team Shortest at the top, tallest below, prop. When negotiating stairways the outer wall should be used. No2 will be on the step above the aggressor. No 4 to "prop" the team by placing one hand on No 3's shoulders, the other on the hip. No 1 to always remain a step above the aggressor. Turn their body so their back is towards No 2. Secure the head, the hand that's on the back of the head, lower forearm down so the patients head is protected. Outside hand take a pinch of No 1's clothing on the shoulder, inside arm hooks underneath outside arm. No 1 cradles the head. No 2, outside hand rotates and takes the finger and thumb, inside arm secures the elbow. Move the aggressor's hand away from the wall and bend the wrist, turn inwards. Outside hand takes the wrist thumb on top. No 3 does the same. No 1 change position see 4. 20.1 Room Entry Punch No 1 to block the punch then secure the arm. No 2 takes over the role of No 1, No 3 secures the other arm. Walk back to the wall. No 1 to gain compliance from the aggressor by asking them to place their feet together and arms out to the side against the wall palm facing back. No 1 remains where they are. Move arm away from the wall and take a passive hold. 21. Seclusions Foot To Door No 1 asks the aggressor to kneel on the bed. Shuffle up the bed far enough so when the aggressor lies down their ankles are hanging over the foot of the bed. Outside hand to elbow, keep elbow in contact with your thigh, forearms to be flat on the bed.

No 2 outside hand to the elbow, fingers in the crease, thumb hooked around the back, lift the elbow, feed the arm back fully extending it, this relaxes the shoulder muscles feed the arm on to the aggressor's back keeping the wrist bent, place inside knee under the elbow to support it. No 1 approach aggressor's legs backwards, inside foot on to the bed, lower the same knee across the aggressor's legs below the knees to guard against kicks. Take hold other of the other leg at the back of the knee and ankle, push the leg away from you then fold it and place the ankle bone in to the back of the other knee, take hold of the other ankle and fold the leg up fig 4. Move to the foot of the bed, place the aggressor's ankle on your opposite shoulder, lean forward and take hold of each wrist. No 2 person furthest away from the exit, feeds the arm back see changing staff. To keep the aggressor dipped ensure elbow and wrist are higher than the shoulder. No 1 ask aggressor to kneel on the bed and shuffle to face the exit. No 2, walks across the bed then feeds the arm back through. No1, takes hold of the aggressor's wrists and lowers forearms on to the back without applying pressure. Lower the aggressor's upper torso on to the bed, if the aggressor is overweight place only the head and shoulders on the bed. No 1 exits the room handing control to the person closest to the door No 3. No 3, outside hand to the wrist, inside hand then takes other wrist, lower forearms onto the back no pressure to be applied. No 2, exit room as above except taking a grip of No 3s' clothing. Conclusion This document as not been designed has a teaching manual. It is a description of the

core techniques delivered primarily within the forensic division of Nottinghamshire Healthcare NHS Trust. Within this document some of the techniques can be adapted in accordance to individual need. This should be incorporated in to a comprehensive risk management plan and sanctioned by a multidisciplinary team.

Additional techniques not included within this document are taught if a training need is identified. The techniques are simple and effective. You don't need to be a martial arts expert nor remember complex physical moves. Quick simple skill based techniques result in having to use minimal force to control and restrain a person. It can only be used if there are reasonable grounds to believe the use of force is necessary. Examples of this include in selfdefence, in the case of an escape, to prevent property damage or resistance to a lawful order. The level of force used is dependent on the situation and the degree of resistance given by the offender. Control and restraint is the name of the intervention strategy we use to bring a person under control. It's used in situations where it's likely that a prisoner will Once compliant, the prisoner is relocated, decontaminated and assessed by health staff for any unexpected reaction. It's discontinued at the first safe opportunity once control is regained. They have access to medical, emotional and psychological support and the prisons post incident response team. The review also looks at strategies to avoid future situations that led to the use of force. All staff must undergo refresher courses at least every 12 months. Each of these training sessions reinforces legal requirements and principles underpinning the use of force. Instructors to the military, police and responsible committed realist civilians. Headquarters Dunedin, New Zealand Combat Training Group Depots Combat Articles Baton Us Combat School Close Combat Instructors Association Army Special Forces Close Combat Master Chief Instructor 21cm x 29.

5cm 50 pages illustrated You do not have to restrain the willing compliant or submissive, itsYou need to ask yourself if you could apply your technical studioSound tactics, procedures and skills give you and your team the bestI could have shown you countless secondary skills or applicationThe contents of this text has been designed for it's simplicity,The entire aim of this field manual is to promote the proven skillsWhile it is true there are no skills or procedures that are foolproof,Often one finds in civilian restraint groups, individuals whom are notThe following text is designed to dissuade the over zealous, heroicDont use historical,Success requires knowledge ofAlways be completely familiar with team procedures in all applicationsLet common sense prevail. A combination of skill and will are theSelect your security team members wisely for their physicalAlways attempt to use a diplomatic, verbal approach to defuse aBut do not carry them in such a way toClothing for security work should be practical, comfortable and hardFootwear should be safety shoes or preferably boots for extra support,Any equipment, keys, weapons, etc.

Position yourself so that youRemember prevention isWhen restricting entryNow apply a distractionAs the heart rate rises, the skill level lowers and the ability toThe higher the stress level, the lower the skill level and lesser theSpeech even furtherPost situation operators need to be physically strong, especially inThey need to take a realistic look at every aspect of the event andPosition Restraint Restraints Lock Finger Compliance Contingencies Position Counter Option To Attack Application From A Fist Up Position Escapee Restraint Hammer Lock Comealong Secondary Offenders Option Distraction Female Offender Offensive Restraints After Evasion Counter Offensive Restraint Applications A Frontal Double Grab Offender From The Front Approach Tactics Fight Restraint Applications Restraint Applications Weapon Disarming Disarm And Restraint Against Long Weapons Aid Of A Victim Restraints Offender From A Car Or Seat Offenders Accomplice Control And Restraint Decentralization Exit Formations Read more about Todd Close Combat Systems in the Close Combat Files. Related Products The DVD promotes theClick here to join the Todd Group Mailing List. Further, the decision of the Home Secretary not to publish aspects of the applicable policy on the use of such control and restraint is lawful. A timetable of two to three years for the

introduction of a bespoke training package was laid out in December 2010. That package was approved in March 2014 for implementation later that year. It noted that while the states obligation is to minimise the risk of harm to the greatest extent possible insofar as the planning and carrying out of a particular operation involving the use of force e.g. an arrest is concerned, its systemic duty in relation to the implementation of a framework of safeguards applicable to such operations is to do all that can reasonably expected of it to afford safeguards against harm paras. 41, 61.

It was attracted to the view that the framework of safeguards existing then and subsequently in the Manual was ECHR compliant. However, as the need for a bespoke package of techniques and training had been identified, it would have been unacceptable had that not been acted upon. The recommendations in the NOMS November 2010 report had been consistently progressed and in the circumstances the timetable had not been unreasonably long. The delay between 2008 and 2010 in reacting to the identified need for such a package was not sufficient to justify a finding that Articles 2 and 3 had been breached. It also accepted the Home Secretary's justification for redacting certain parts of the Manual, namely that to reveal the material detailing specific restraint techniques would prejudice security in prisons. If the state is to do all that is reasonably expected of it through the framework of safeguards it implements to avoid harm arising from its use of force, it might be said as Articles 2 and 3 are the most fundamental of rights that it should accordingly minimise the risk of harm to the greatest extent possible, in the circumstances, through those safeguards. Such a conclusion seems attractive, as the systemic duty of the state would be as exacting as the duty on its individual agents, most commonly police officers, who are left to plan and execute individual operations. In any event, putting the test on the footing suggested above, it might be argued that the Home Secretary, as at February 2011 and indeed subsequently, had not done all that could reasonably expected of him to safeguard against harm where force is used on board aircraft in the course of removing individuals from the UK, having regard to both the inaction in the face of the 2008 NOMS Report and the somewhat lengthy implementation of the recommendations contained in the 2010 NOMS Report.

This post by Michael Deacon first appeared on the UK Human Rights Blog by 1 Crown Office Row chambers and is reproduced here with permission and thanks. Court of Appeal considers the application of Article 8 to foreign national offenders Charity no 1059147. At Mimas Training we understand, that's why our inhouse and accredited training courses and techniques are tailored for adult learning. Course Info Course Info. The annual refresher training programme requires a two day input. The learning outcomes can be enhanced to accommodate local force policies and procedures. This site may not work properly using Internet Explorer 9 or below as this browser is past its use by date. We recommend that you upgrade your browser to the latest Internet Explorer 11, Google Chrome, Firefox or Safari. Tactically, the system addresses the most common types of resistance officers encounter allowing the instructor to maximise training on job related techniques. We can put you on our waiting list, Tactically, the system addresses the most common types of resistance officers encounter allowing the instructor to maximise training on job related techniques. Legally, the PPCT System teaches a simple use of force continuum which clarifies the appropriate force level for every level of resistance. Medical research was conducted on every PPCT technique to refine technique efficiency and to ensure the medical implications were proportional to the level of resistance. This unit examines the PPCT Force Continuum, principles of control, survival reaction time and tactical positioning. The application of these pressure points is to control passive or defensive resistance and are highly effective no matter what the size or strength level of the officer. This unit provides officers with two joint locks designed specifically to control escort position resistance.

The student will learn to neutralise an aggressive assault with a basic system of blocks, punches, and kicks designed to control a subject with minimal chance of injury. Learning outcomes will be

assessed throughout the course and are conducted off the job via oral questioning and practical demonstration. All students are required to be present 15 minutes before course commencement time. Late arrivals may be refused from the course as a failure to attend. Participants undertake the course in comfortable, airconditioned classrooms with the latest IT and audiovisual capabilities. Students are supported through the provision of high quality learning materials and resources. The remaining course fee is to be paid in full prior to course completion. Course fee is fully refundable only if the course is cancelled. This price includes all study manuals and materials. Positions are limited so confirmed enrolments only will be able to attend. Replacements are allowed provided they have Eagle Training Services approval before the start of training and course prerequisites are met. Clients should identify existing needs prior to enrolment so that appropriate arrangements are made. Where additional support is required, the client will be referred to a specialist agency to access appropriate support. Eagle Training Services has a documented policy regarding access and equity.