



**Admission Agreement Addendum for use of Temporary Constraint
In Level 4 Residential and Behavior Management Programs**

Client Name _____ **UCI#** _____

Facility/Program _____ **Vendor #** _____

Type of Program _____ **Date of Admission** _____

This is an addendum to the Admission Agreement for _____ who currently receives or will receive services from the above-referenced program. This program is vendored and/or is approved to provide specialized services to address behavioral challenges.

\$ The program shall have a current (i.e., prepared at the 30 day IPP Planning Meeting and annually thereafter) Behavioral Treatment Plan that provides the staff with client-specific interventions to meet behavioral treatment objectives.

\$ A behavioral consultant (as identified in Title17) shall develop the Behavioral Treatment Plan based on an analysis of behavioral data.

\$ Level 4 Residential Programs shall provide on-going consultant hours, per Title 17 Section 56004.

\$ All program staff shall be trained on each client’s Behavioral Treatment Plan and interventions.

\$ A formal data collection and analysis system shall be in place to record and analyze targeted behaviors. This system shall support documentation for use of behavioral methods and techniques.

\$ Client is being informed by the IPP Planning Team of the potential for temporary physical constraint when he/she has placed him/herself or a staff member in imminent danger (there must be “clear evidence for believing the existence of an imminent danger to either the client or others if such constraint is not accomplished”). Client has been informed that temporary physical constraint is a “last resort.”

\$ Physical constraint never is to be used as a substitute for a Behavioral Treatment Plan or for the convenience of staff.

Facility has a policy (consistent with the Program Design) that physical containment is not to be used under any circumstances.

\$ If physical constraint is to be used, only techniques taught by a certified Professional Assault Response Training (P.A.R.T.) or Crisis Prevention Intervention (C.P.I.) trainer may be used. Techniques of constraint other than P.A.R.T or C.P.I., shall be approved prior to their use by the San Gabriel/Pomona Regional Center.

- \$ All staff members involved in the physical constraint of a client shall have current training and verification of such, through an “approved upon” training, such as P.A.R.T. or C.P.I.
- \$ The use of physical constraint of a client is deemed a “Special Incident” and as such falls under the reporting requirements pursuant to Title 17, Section 54327. The Special Incident Report (SIR) detailing the use of temporary constraint shall include the “clear evidence for believing the existence of an imminent danger to either the client or others if such constraint is not accomplished.”[Ref: Title 17, Section 50501]

In signing this document, we indicate that this agreement has been read, understood and is entered into voluntarily. It is understood that the use of physical constraint of a client is used only as a last resort to protect a client or another individual from imminent danger when all other treatment/intervention plans have been unsuccessful.

Note: This addendum is to be completed on an annual basis.

_____	_____
Client Signature	Date
_____	_____
Client’s Authorized Representative (if applicable)	Date
_____	_____
Program Representative	Date
_____	_____
Regional Center Representative	Date

CONFIDENTIAL CLIENT INFORMATION
 SAN GABRIEL/POMONA VALLEYS
 DEVELOPMENTAL SERVICES, INC.
 See California Welfare & Institutions Code
 Section 4514