Policy on the Use of Restraint and Seclusion

Ball State University Schools

July 1, 2014

Maintaining an orderly, safe school environment is critical in providing an educational setting conducive to learning. To those efforts, appropriate social behaviors are taught and modeled, and alternative strategies such as de-escalation and removal from reinforcement should be used prior to any efforts to restraint or seclude a student. The use of restraint or seclusion should only be in a case of emergency when the student presents an imminent risk of injury to self or others and *as a last resort* when alternatives have failed to restore safety. Restraint and seclusion are not to be used for punishment, coercion, retaliation, disciplinary purposes, or convenience. All efforts shall be made to prevent the escalation of the student’s behavior while preserving the student’s dignity and respect. This policy does not apply to law enforcement officers employed by the school when performing law enforcement duties.

This policy on the use of restraint and seclusion shall be posted on the school’s website, and a copy may be obtained in the school office. Reference to the location of this policy will be included in the school handbook.

Definitions

1. Restraint
	1. Includes:
		1. Chemical restraint: The administration of a drug or medication to manage a student’s behavior or restrict a student’s freedom of movement that is not a standard treatment or dosage or both for the student’s medical or psychiatric condition.
		2. Mechanical restraint: The use of a mechanical device, a material, or equipment attached or adjacent to a student’s body that the students cannot remove and that restricts the freedom of movement of all or part of the student’s body or restricts normal access to the student’s body.
		3. Physical restraint: Physical contact between a school employee and a student in which the student unwillingly participates and that involves the use of a manual hold to restrict freedom of movement of all or part of a student’s body or to restrict normal access to the student’s body.
	2. Excludes:
		1. A bus harness or other safety equipment used during transportation to maintain the safety of the student
		2. A mechanical device, material, or equipment prescribed by a physician or other qualified health-care professional
		3. Briefly holding a student without force to calm or comfort the student or to prevent unsafe behavior, physical escort, or a gentle assist or prompt in performing a task or to guide from one area to another.
2. Seclusion
	1. Includes: Confinement alone in a room or area where the student is physically prevented from leaving.
	2. Excludes:
		1. Supervised time-out (removal from reinforcement in the environment) with an adult continuously present and the student is not physically prevented from leaving
		2. Opportunities for a student to exercise free will choice to enter and leave the area

The Use and Non-use of Restraint and Seclusion

1. Restraint
2. Use of Restraint:
	* 1. Use restraint only if the student presents an imminent risk of harm to self or others and as a last resort.
		2. Restraint is performed only by trained personnel as a matter of policy. However, any staff member may intervene when a student presents an imminent danger of harm to self or others.
		3. No restriction of breathing or speaking or causing intentional harm is permitted.
		4. Use restraint only as long as necessary for the student to regain behavioral stability and the risk of harm ends.
		5. No medical contraindications to the use of restraint are indicated.
		6. The restrained student shall be carefully, continuously, and visually monitored.
		7. A pulse oximeter and portable automatic electronic defibrillator shall be available on the school property.
3. Non-Use of Restraint
	* 1. Chemical restraints are not allowed.
		2. Mechanical restraints are not allowed (see exclusions above).
		3. Prone or supine restraints are not allowed.
		4. Restraint shall not be used for verbal threats, profanity, or verbal displays of disrespect.
		5. Restraint shall not be used for destruction of property unless a risk of injury is created.
		6. Restraint shall not be used to rely on pain as an intentional method of control.
4. Seclusion
	1. Use of Seclusion:
		1. Use seclusion only if the student presents an imminent risk of harm to self or others and as a last resort.
		2. Seclusion is performed only by trained personnel as a matter of policy. However, any staff member may intervene when a student presents an imminent danger of harm to self or others.
		3. Use seclusion only as long as necessary for the student to regain behavioral stability and the risk of harm ends.
		4. Use only when the student can be safely transported to the seclusion area.
		5. The secluded student shall be carefully, continuously, and visually monitored.
		6. Restroom use (with an escort) and drinks of water upon request are to be allowed.
	2. Non-use of Seclusion: As a punishment or to force compliance.
	3. Seclusion Environment:
		1. Is large enough to hold the student and an adult.
		2. Has adequate light and ventilation, heat and air conditioning.
		3. Provides for continuous visual and auditory monitoring.
		4. Meets fire, health, and safety codes.
		5. Is not locked.
		6. Contains no materials or objects that can be used to harm self.

Procedures for the Use of Restraint and Seclusion

1. Examination of Student and Debriefing
	1. A staff member not involved with the incident will examine the student immediately after emotional and behavioral control is regained to ascertain if any injury was sustained by the student.
	2. The student will be monitored throughout the day for risk of shock.
	3. The school principal/director or designee will meet with the participant(s) and one nonparticipant within 24 hours after the incident.
	4. Prevention options, avoidance possibilities, the following of procedures, and suggestions for how to avoid use in the future will be discussed.
	5. The school principal/director or designee will debrief with the student to discuss the conditions and the student’s triggering behaviors leading up to the use of restraint or seclusion.
2. Parent Notification
	1. The school principal/director or designee will notify the parent verbally on the same day of the incident, providing a detailed account of the incident including the circumstances that led to the use of restraint and/or seclusion.
	2. The school principal/director or designee will offer to meet with the parents in person at the school.
	3. A copy of the written report of the incident will be provided to the parents within the next school day.
3. Documentation
	1. A written report will be completed by the employee using the restraint or seclusion procedure using the Incident Report form (see attached).
	2. The Restraint and Seclusion Incident Report form shall include:
		1. Student’s name
		2. Student’s racial/ethnic status
		3. Type of disability if applicable
		4. Date and time of incident
		5. Duration or beginning and ending times
		6. Description of relevant events and interventions used prior
		7. Description of the incident and the technique used, including any danger of injury
		8. Plan to deal with student’s behavior in the future
		9. School personnel involved and whether or not trained
		10. Date and time of parent notification
	3. Copies will be provided to:
		1. Student record
		2. The school principal/director
		3. Superintendent
		4. Parents
4. Repeated Use (three incidences of restraint or seclusion)
	1. The person(s) using the procedures will review the effectiveness of the procedures and develop an individual behavior plan for the student addressing the continued use of these procedures and alternative strategies to be implemented.
	2. Repeated use should be viewed as a need for school-wide examination of behavioral strategies, educational methodologies, and other interventions which may be inadequate in providing supportive educational programming.
	3. An IEP team review for a student with a disability will be conducted through the case conference committee to examine behavior support strategies.
5. Annual Review and Report
	1. The school principal/director or designee will review all school-wide cases to ensure compliance with policy and procedures and the need for any modifications to the plan.
	2. Aggregated data will be reviewed annually to improve procedures by examining the following:
		1. Incident reports
		2. Procedures used
		3. Preventive measures tried
		4. Injuries
		5. Notification procedures
		6. Training needs
		7. Student and staff patterns of behavior
		8. Environmental considerations
	3. The number of instances of the use of restraint and seclusion will be reported in the school’s annual performance report.

Training

1. All staff will be trained in restraint and seclusion policy and procedures.
2. Components for all staff, provided by a qualified behavior specialist: Level 1 training.
	1. Prevention: Steps to avoid the use of restraint and seclusion
	2. Conflict de-escalation and conflict management techniques
	3. Positive behavior and intervention supports
	4. Evaluating risks and danger
	5. Awareness of possible effects of medications taken
3. Components for a core group of specially trained staff, provided in conjunction with officers of the Ball State University police department trained in these procedures: Level 2 training.
	1. The safe use of restraint and seclusion, only when imminent danger of serious physical harm is present
	2. Participants will be provided simulated experiences.
	3. Participants will learn how to monitor the physical and mental health effects of use of the procedures on the student.
4. Training will be recurrent annually with certification or credentials provided for the individual participants and for the school.
5. Training will be documented to include:
	1. Name and position of persons completing each of the two levels of training
	2. Trainer
	3. Date training completed
	4. Protocols and techniques used in training

Positive Behavior and Intervention Supports and/or Mental Health Supports

1. A program of Positive Behavior and Intervention Supports shall be implemented regularly to minimize the need for the use of restraints and seclusion.
2. Elements of PBIS include
	1. Teaching appropriate social skills as part of the school’s curriculum
	2. Conducting Functional Behavior Assessments (FBA) with competing behavior pathways identified
	3. Implementing of Behavior Intervention Plans (BIP)
	4. Using positive reinforcement systemically and systematically
3. School and community mental health supports shall be identified and used as needed by students exhibiting a need for such support.

Ball State University Schools RESTRAINT AND/OR SECLUSION INCIDENT FORM

School personnel completing the form: Position:

Today’s date: \_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_ **Procedure used:**  Restraint  Seclusion

 Month Day Year

1. Name of student: Age/grade: Ethnicity:

Disability *(if any)*

2. Date of incident: \_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_ Location of incident:

 Month Day Year

Beginning time: Ending time: Duration:

3. Emergency personnel involved: Name: Time:

Investigation

1. Describe the incident.

1. Describe the actions that were taken to de-escalate the need for the use of this procedure.

Use of Restraint and/or Seclusion Incident Form Page 2

1. Describe the technique used, including any danger of injury.

1. What steps were taken to monitor the student for injury or shock?

Immediately:

Within an hour:

Every hour thereafter:

Prior to dismissal from school:

1. List and describe the steps that will be taken to address the student’s behavior in the future.
2.
3.
4.
5.
6.
7.
8.
9.
10. School personnel involved:

 Trained:  No  Level 1  Level 2

 Trained:  No  Level 1  Level 2

 Trained:  No  Level 1  Level 2

 Trained:  No  Level 1  Level 2

 Trained:  No  Level 1  Level 2

Use of Restraint and/or Seclusion Incident Form Page 3

1. Witnesses:

1. Parent notification:

Method: Phone call Date and Time: / By whom:

Method: E-mail Date and Time: / By whom:

Method: Personal meeting Date and Time: / By whom:

Method: Date and Time: / By whom:

1. Follow-up required *(check all that apply)*:

\_\_\_\_\_\_\_\_ Mental health emergency intake evaluation Requested Received / date

\_\_\_\_\_\_\_\_ Qualified health care provider referral Requested Received / date

\_\_\_\_\_\_\_\_ Referred to school counselor Requested Received / date

\_\_\_\_\_\_\_\_ Other *(please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Requested Received / date

1. Copies provided to:
* Student record
* Principal
* Superintendent
* Parents
1. Other comments:

*Signature of Person Completing Form Date Time*