

RESTRICTIVE PROCEDURES

The School District promotes the use of positive approaches for behavioral interventions for all students. When restrictive procedures are employed in an emergency situation with any student **(you may change the “any student” to “only students with disabilities,” as the law does not specify use with the general population of students)** the School District will adhere to the standards and requirements of Minnesota Statutes 125A.094 Restrictive Procedures for Children with Disabilities.

A. Definitions

The following terms have the meanings given them.

1. “Emergency” means a situation where immediate intervention is needed to protect a child or other individual from physical injury or to prevent serious property damage.
2. “Physical holding” means physical intervention intended to hold a child immobile or limit a child’s movement and where body contact is the only source of physical restraint. The term “physical holding” does not mean physical contact that:
 - (a) helps a child respond or complete a task;
 - (b) assists a child without restricting the child’s movement;
 - (c) is needed to administer an authorized health-related service or procedure; or
 - (d) is needed to physically escort a child when the child does not resist or the child’s resistance is minimal.
3. “Positive behavioral interventions and supports” means interventions and strategies to improve the school environment and teach children the skills to behave appropriately.
4. “Restrictive procedures” means the use of physical holding or seclusion in an emergency.
5. “Seclusion” means confining a child alone in a room from which egress is barred. Removing a child from an activity to a location where the child cannot participate in or observe the activity is not seclusion.

B. Personnel Development Activities

Personnel development activities will be provided to District staff and contracted personnel who have routine contact with students and who may use restrictive procedures in the following areas:

1. Positive behavioral interventions;
2. Communicative intent of behaviors;
3. Relationship building;

4. Alternatives to restrictive procedures, including techniques to identify events and environmental factors that may escalate behavior;
5. De-escalation methods;
6. Standards for using restrictive procedures;
7. Obtaining emergency medical assistance;
8. Physiological and psychological impact of physical holding and seclusion;
9. Monitoring and responding to a child's physical signs of distress when physical holding is being used; and
10. Recognizing the symptoms of and interventions that may cause positional asphyxia when physical holding is used.

C. Staff Training Requirements

Staff who design and use behavioral interventions that include restrictive procedures will complete training in the use of positive approaches as well as restrictive procedures. Districts will maintain training records, and will identify the content of training, attendees, and training dates.

THOSE AUTHORIZED TO USE RESTRICTIVE PROCEDURES:

The following employee job classifications are authorized and certified to use restrictive procedures:

- Licensed special education teachers
- Licensed school social workers
- Licensed school psychologists
- Other certified/registered educational professionals (Behavior Specialists, Autism Specialists)
- Mental health professionals
- Educational assistants

D. Restrictive Procedures and Prohibited Procedures

Restrictive procedures that may be used in emergency situations include seclusion and physical holding.

Prohibited procedures include the following:

1. Corporal Punishment which includes conduct involving: (1) hitting or spanking a person with or without an object; or (2) unreasonable physical force that causes bodily harm or substantial emotional harm under section 121.58;
2. Requiring the student to assume and maintain a specified physical position, activity, or posture that induces physical pain;
3. Totally or partially restricting a student's senses as punishment;
4. Presenting an intense sound, light or other sensory stimuli using smell, taste, substance, or spray as punishment;

5. Denying or restricting the student's access to equipment and devices such as wheelchairs, hearing aids or communication boards that facilitate the student's functioning except when temporarily removing the equipment or device as needed to prevent injury to the student or others or serious damage to the equipment or device, in which case the equipment or device shall be returned to the student as soon as possible;
6. Interacting with a student in a manner that constitutes sexual abuse, neglect, or physical abuse under section 626.556;
7. Withholding regularly scheduled meals or water;
8. Denying the student access to bathroom facilities, and/or;
9. Physical holding that restricts or impairs a student's ability to breathe.

E. Documentation Procedures

The use of restrictive procedures in emergency situations will be documented in the Student Information System and the Restrictive Procedure Reporting Form. The District will monitor and review the use of restrictive procedures, including conducting post-use debriefings and convening an oversight committee.

The use of restrictive procedures in behavioral intervention plans will be documented in the learner's file. Reviews will be conducted in accordance with the plan. In the case of a student with a disability, due process and documentation requirements will be followed. **(If not using this policy for all students, delete "In the case of a student with a disability").**

Record retention will be in accordance with District policies on student records.

F. Emergency Situations - Use of Restrictive Procedures

The School District shall make reasonable efforts to notify the parent on the same day by phone when restrictive procedures are used in an emergency. If the school is unable to provide same-day notice, notice will be sent by written or electronic means or as otherwise indicated by the parent.

District Administration will receive written notification when restrictive procedures are used in emergency situations. Records will be reviewed annually.