<u>Dover-Eyota ISD #533</u> Dover-Eyota High School & Middle School

Restrictive Procedures Plan

(Minnesota Statutes, Section 125A.0942, Subd. 1)

- (a) Schools that intend to use restrictive procedures shall maintain and make publicly accessible in an electronic format on a school or district web site or make a paper copy available upon request describing a restrictive procedures plan for children with disabilities that at least
 - (1) Lists the restrictive procedures the school intends to use;
 - (2) Describes how the school will implement a range of positive behavior strategies and provide links to mental health services;
 - (3) Describes how the school will monitor and review the use of restrictive procedures, including:
 - (i) conducting post-use debriefings, consistent with subdivision 3, paragraph (a) clause (5); and
 - (ii) convening an oversight committee to undertake a quarterly review of the use of restrictive
 - procedures based on patterns or problems indicated by similarities in the time of day, day of week, duration of the use of a procedure, the individuals involved, or other factors associated with the use of restrictive procedures; the number of times a restrictive procedure is used schoolwide and for individual children; the number and types of injuries, if any, resulting from the use of restrictive procedures; whether restrictive procedures are used in nonemergency situations; the need for additional staff training; and proposed actions to minimize the use of restrictive procedures; and
 - (4) Includes a written description and documentation of the training staff completed under subdivision 5.
- (b) Schools annually must publicly identify oversight committee members who must at least include:

FOR SCHOOL YEAR: 2018-2019

School Building Restrictive Procedures Plan

- **Restrictive procedures** means the use of <u>physical holding</u> or <u>seclusion</u> in an <u>emergency</u>. Restrictive procedures must not be used to punish or otherwise discipline a child.
- An emergency means a situation where immediate intervention is needed to protect a child or other
 individual from physical injury. Emergency does not mean circumstances such as: a child who does
 not respond to a task or request and instead places his or her head on a desk or hides under a desk or
 table; a child who does not respond to a staff person's request unless failing to respond would result
 in physical injury to the child or other individual; or an emergency incident has already occurred and
 no threat of physical injury currently exists.
- Restrictive procedures may be used only in response to behavior that constitutes an emergency, even if written into a child's Individualized Education Program or Behavior Intervention Plan.

I. This school intends to use the following restrictive procedure only as a last resort:

A. Physical holding:

- "Physical holding" means physical intervention intended to hold a child immobile or limit a child's movement, where body contact is the only source of physical restraint, and where immobilization is used to effectively gain control of a child in order to protect a child or other individual from physical injury.
- 2. 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. Physical holding or seclusion may be used only in an emergency.
 - a) Physical holding or seclusion is the least intrusive intervention that effectively responds to the emergency;
 - b) physical holding or seclusion is not used to discipline a noncompliant child;
 - c) physical holding or seclusion ends when the threat of harm ends and the staff determines the child can safely return to the classroom or activity;
 - d) staff directly observes the child while physical holding or seclusion is being used.
- 4. This school/district intends to use the following types of physical holding:
 - a) CPI's Children's Control Position^{sм}
 - b) CPI's Standing Control Position^{sм}
 - c) CPI's Sitting Control Position^{sм}
 - d) CPI's Team Control Position^{sм}
 - e) The school will not use "prone restraint".
- B. At this writing, this school does not intend to use "seclusion" as a restrictive procedure.
 - 1. "Seclusion" means confining a child alone in a room from which egress is barred. Egress may be barred by an adult locking or closing the door in the room or preventing the child from leaving the room.
 - 2. Removing a child from an activity to a location where the child cannot participate in or observe the activity is not seclusion.
 - 3. If this school/district ever intends to explore the use of "seclusion", the director of special education will be contacted to ensure that statutory compliance standards can be followed. If a decision is made to include seclusion as a restrictive procedure, this plan will be updated.

II. This school will monitor and review the use of restrictive procedures in the following manner:

A. Documentation

- 1. Each time physical holding or seclusion is used, the staff person who implements or oversees the physical holding or seclusion documents, as soon as possible after the incident concludes, the following information:
 - a) A description of the incident that led to the physical holding or seclusion;
 - b) Why a less restrictive measure failed or was determined by staff to be inappropriate or impractical;
 - The time the physical holding or seclusion began and the time the child was released;
 and
 - d) A brief record of the child's behavioral and physical status.
- 2. The school shall make reasonable efforts to notify the parent on the same day a restrictive procedure is used on the child, or if the school is unable to provide same-day notice, notice is sent within two days by written or electronic means or as otherwise indicated by the child's parent within the student's individualized education program.
- 3. Attached, as *Appendix A*, is this school's form used to document the use of physical holding. (This form is also located electronically in the district's/school's internet version of due process documents, "SpEd Forms". <u>Team members will be using the electronic version of this</u> form after using a physical hold and printing it for the student's file.)

B. Post-use debriefings

- 1. Each time physical holding is used, a post-use debriefing meeting will be conducted. This meeting will include:
 - a) the staff person who implemented or oversaw the physical holding,
 - b) team member(s) who were involved with the holding,
 - c) team member(s) responsible to observe the holding,
 - d) and one individual not involved in the incident.
 - e) The director of special education will be notified when a physical hold has been done.
- 2. This debriefing will be conducted:
 - a) within 24 hours after the incident concludes, whenever possible,
 - b) but no more than 2 school days after the incident.
- 3. The post-use debriefing will review the following requirements to ensure the physical holding was used appropriately:
 - a) Whether the physical holding was used in an emergency.
 - b) Whether the physical holding was the least intrusive intervention that effectively responds to the emergency.
 - c) Whether the physical holding ended when the threat of harm ended and the staff determined that the child could safely return to the classroom or activity.
 - d) Whether the staff directly observed the child while physical holding was being used.
 - e) Whether the documentation was completed correctly.
 - f) Whether the parents were correctly notified.
 - g) Whether an IEP team meeting needs to be scheduled.
 - h) Whether the appropriate staff used physical holding.
 - i) Whether the staff that used physical holding was appropriately trained.
- j) If the post-use debriefing reveals that the use of physical holding was not used appropriately, the team will determine if corrective action is needed, and if so, what it will include.

4. Attached, as **Appendix B**, is this district's/school's form used to document the *Staff Debriefing Meeting*. (This form is also located electronically in the district's/school's internet version of due process documents, "SpEd Forms". <u>Team members will be using the electronic version of this form after using a physical hold and printing it for the student's file.)</u>

C. Individualized Education Program Team Meetings

- 1. When: The district must hold a meeting of the individualized education program team,
 - a) within ten calendar days after district staff use restrictive procedures on two separate school days within 30 calendar days or
 - b) a pattern of use emerges and the child's individualized education program or
 - the behavior intervention plan does not provide for using restrictive procedures in an emergency; or
 - d) at the request of a parent or the district after restrictive procedures are used.
- 2. What: The district must hold a meeting of the individualized education program team,
 - a) conduct or review a functional behavioral analysis,
 - b) review data,
 - c) consider developing additional or revised positive behavioral interventions and supports,
 - d) consider actions to reduce the use of restrictive procedures,
 - e) and modify the individualized education program or behavior intervention plan as appropriate.
 - f) must review any known medical or psychological limitations, including any medical information the parent provides voluntarily, that contraindicate the use of a restrictive procedure,
 - i. consider whether to prohibit that restrictive procedure,
 - ii. and document any prohibition in the individualized education program or behavior intervention plan.
 - g) If the individualized education program team determines that existing interventions and supports are ineffective in reducing the use of restrictive procedures **OR** the district uses restrictive procedures on a child on ten or more school days during the same school year, the team, as appropriate, either
 - i. must consult with other professionals working with the child;
 - ii. consult with experts in behavior analysis, mental health, communication, or autism;
 - iii. consult with culturally competent professionals;
 - iv. review existing evaluations, resources, and successful strategies; or
 - v. consider whether to reevaluate the child.
 - h) The district must review use of restrictive procedures at a child's annual individualized education program meeting when the child's individualized education program provides for using restrictive procedures in an emergency.
 - i) The individualized education program or behavior intervention plan shall indicate how the parent wants to be notified when a restrictive procedure is used.
- 3. **Removal by a Peace Officer:** In addition, if a pupil who has an individualized education program is restrained or removed from a classroom, school building, or school grounds by a peace officer at the request of a school administrator or a school staff person during the school day twice in a 30-day period, the pupil's individualized education program team must meet to determine if the pupil's individualized education program is adequate or if additional evaluation is needed. *(MN Statute 121A.67 Subd. 2)*

D. Oversight committee

- 1. This school's oversight committee consists of the following individuals:
 - a) A general education administrator
 - b) A special education administrator
 - c) A mental health professional, school psychologist, or school social worker
 - d) An expert in positive behavior strategies
 - e) Other team members, as appropriate
- 2. The oversight committee meets:
 - a) quarterly (whether or not restrictive procedures have been used): November 11, January 10, March 14, May 9; AND
 - b) may be called at other times, if necessary, to address excessive or inappropriate use of restrictive procedures and determine and recommend training needs or other corrective action.
- 3. The oversight committee will review the following:
 - a) The School Restrictive Procedures Plan, to ensure procedures are being followed.
 - b) Review the Administrative Quick Report generated in SpEd Forms that identifies all restrictive procedures used in the school/district during that school year. The committee will ensure that the data is accurate and complete, and report it as such to the director of special education by the end of the school year.
 - c) It is the responsibility of the director of special education to report this data to the Minnesota Department of Education each year through the secure compliance website. This report is filed, even if no procedures were used.
 - the use of restrictive procedures based on patterns or problems indicated by similarities in the time of day, day of the week, duration of the use of a procedure, the individuals involved, or other factors associated with the use of restrictive procedures;
 - e) the number of times a restrictive procedure is used schoolwide and for individual children;
 - f) the number and types of injuries, if any, resulting from the use of restrictive procedures
 - g) whether restrictive procedures are used in nonemergency situations;
 - h) the need for additional staff training;
 - i) and proposed actions to minimize the use of restrictive procedures.
- E. The committee will include a written description and documentation of the training staff completed.
- F. Attached, as **Appendix C**, is a copy of the template used to document the Oversight Committee's meeting. (The elements of this form will be used as an agenda for each meeting and a copy of it and the meeting outcomes will be kept in the district's Restrictive Procedures file for 5 years.)

III. This school will receive training

- A. **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;
 - De-escalation methods;

- 6. Standards for using restrictive procedures only in an emergency;
- 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;
- 10. Recognizing the symptoms of and interventions that may cause positional asphyxia when physical holding is used;
- 11. district policies and procedures for timely reporting and documenting each incident involving use of a restricted procedure; and
- 12. schoolwide programs on positive behavior strategies.

B. The training will be conducted

- 1. at least annually for all team members.
- via Hiawatha Valley Education District's (HVED's) CPI's Nonviolent Crisis Intervention® trained instructors.
- 3. via delivery of CPI's course materials and additional materials providing overview and emphasis of the 12 strands listed in *III.A.*
- 4. In addition, all participants will be required to review the district's/school's Restrictive Procedures Plan.
- C. When trained, **only the following employee job classifications** are authorized and certified to use restrictive procedures:
 - 1. Licensed special education teacher
 - 2. School social worker
 - 3. School psychologist
 - 4. Behavior analyst certified by the National Behavior Analyst Certification Board
 - 5. A person with a master's degree in behavior analysis
 - 6. Other licensed education professional
 - 7. Highly qualified education paraprofessional
 - 8. Mental health professional
- D. **Verification of all training** will be kept on file at Hiawatha Valley Education District for a minimum of 5 years.

CPI Trained Staff

Staff Member	<u>Instructor</u>	Training Date(s)
Carol Benish	Kris Jansen	Refresher on 1/20/17
Peyton Grummons	Bobbi Waters	Initial on Oct. 12 & 13, 2017
Katie Johnson	Bobbi Waters	Initial on Oct. 12 & 13, 2017
Sarah Martinak	Bobbi Waters	Refresher on 5/30/17
JB Mathison	Bobbi Waters	Initial on Oct. 12 & 13, 2017
Sara Smith	Bobbi Waters	Initial on Oct. 12 & 13, 2017

IV. This school is committed to using positive behavioral interventions and supports.

A. The school boards and staff employed by HVED schools believe that all **students can experience success**. We believe that behavior that is rewarded is more likely to be repeated. We believe that encouragement and positive reinforcement are effective techniques for changing behavior. Our goal is to model and shape prosocial behavior for the students under our care, using positive approaches that focus on skill acquisition.

- B. **Promotion of the use of positive approaches:** The school promotes the use of positive interventions and strategies. The use of positive approaches and procedures, such as: praise and encouragement, planned ignoring, contracts, monitoring sheets, modeling of appropriate behavior, and proximity control are implemented as appropriate. In addition to individualized approaches to positive intervention, the school's school-wide plan includes:
 - All teachers and paras have been trained on the basics of Love & Logic, and the school has
 adopted those principles as our underlying philosophy on our approach to student
 discipline and corrective action.
 - 2. In their first four years at the HS/MS, students participate in a character-building/team-building retreat each year: 6th grade Kindness Retreat, 7th grade Courage Retreat, 8th grade Eagle Bluff trip, 9th grade Respect Retreat.
 - 3. School policies and expectations in the student handbooks are reviewed with all students in the first week of school and classes use a Kahoot! Quiz to reinforce the concepts and make it more fun.
 - 4. Some character/social skills lessons and activities are conducted in the daily 6th grade "Morning Meeting" and 7th & 8th grade Advisory.
 - 5. Student groups such as Peer Helpers, Gay Straight Alliance, Student Council, Teens as Leaders, and National Honor Society conduct campaigns of education, awareness, and promotion on topics such as anti-bullying, acceptance of diversity and differences, conflict resolution, etc.
 - 6. Posters with the "Eagle Values" of character and conduct for our middle school are posted around the building.

V. This school will never use the following prohibited procedures on a child:

- A. Engaging in conduct prohibited under section 121A.58 (corporal punishment);
- B. Requiring a child to assume and maintain a specified physical position, activity, or posture that induces physical pain;
- C. Totally or partially restricting a child's senses as punishment;
- D. Presenting an intense sound, light, or other sensory stimuli using smell, taste, substance, or spray as punishment;
- E. Denying or restricting a child's access to equipment and devices such as walkers, wheelchairs, hearing aids, and communication boards that facilitate the child's functioning, except when temporarily removing the equipment or device is needed to prevent injury to the child or others or serious damage to the equipment or device, in which case the equipment or device shall be returned to the child as soon as possible;
- F. Interacting with a child in a manner that constitutes sexual abuse, neglect, or physical abuse under section 626.556 (reporting of maltreatment of minors);
- G. Withholding regularly scheduled meals or water;
- H. Denying access to bathroom facilities; and
- I. physical holding that restricts or impairs a child's ability to breathe, restricts or impairs a child's ability to communicate distress, places pressure or weight on a child's head, throat, neck, chest, lungs, sternum, diaphragm, back, or abdomen, or results in straddling a child's torso.

References:

Minnesota Department of Education's "Sample Restrictive Procedures Plan with Legal Citations and Suggestions" (April 2012); MN Statutes: §125A.0941 and §125A.0942

Appendix A: Use of Restrictive Procedures Physical Holding

*	Use	of Restrictive Proceds	ures: Physical Holding
Student: Fred Sample	D: 05555555555	5	Date: MMDC/YY
School: Gender ***	Grade: Primary Disability:	-	DOB
<u>Directions</u> : The staff person who im hold is utilized. Staff involved:	plemented or oversaw a physical h	old must complete this fo	rm each time a physical
Person completing this form:		Position:	Phone:
	EMERGENCY		
Was physical holding used to prote Description of the emergency situs Description of the incident that led	ation: to physical holding:		
Description of the emergency situs Description of the incident that led to	ation: to physical holding: PHYSICAL HOLDI	NG	ival status;
Description of the emergency situs Description of the incident that led to	ation: to physical holding: PHYSICAL HOLDI	NG	ical status:
Description of the emergency situs Description of the incident that led to	ation: to physical holding: PHYSICAL HOLDI and a brief description of the stude	NG nf/s behavioral and phys	ical status: □ Yes □ No
Description of the emergency situs Description of the incident that led to Description of the physical holding.	to physical holding: PHYSICAL HOLDI and a brief description of the stude sive intervention to effectively resp	NG nt\s behavioral and phys and to the emergency?	☐ Yes ☐ No
Description of the emergency situe Description of the incident that led to Description of the physical holding. Was physical holding the least intru	to physical holding: PHYSICAL HOLDI and a brief description of the stude sive intervention to effectively respection failed or was determined to the threat of harm ended and staff	NG nt/s behavioral and phys and to the emergency? be inappropriate or impro	☐ Yes ☐ No
Description of the emergency situs Description of the incident that led to Description of the physical holding: Was physical holding the least intru Explain why a less restrictive intervel Did the physical holding end when to determined that the student could so	to physical holding: PHYSICAL HOLDI and a brief description of the stude sive intervention to effectively responsive intervention to effectively responsive intervention failed or was determined to the threat of hummended and staff aftely return to the classroom or act	NG nt/s behavioral and phys and to the emergency? be inappropriate or impro	□ Yes □ No
Description of the emergency situal Description of the incident that led to Description of the physical holding: Was physical holding the least intru Explain why a less restrictive intervel Did the physical holding end when to determined that the student could is Explain:	to physical holding: PHYSICAL HOLDI and a brief description of the stude sive intervention to effectively responsive intervention to effectively responsive intervention failed or was determined to the threat of hummended and staff aftely return to the classroom or act	NG nt/s behavioral and phys and to the emergency? be inappropriate or impro	☐ Yes ☐ No notical: ☐ Yes ☐ No
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Description of the emergency situal Description of the incident that led a Description of the physical holding. Was physical holding the least intrustive physical holding the least intrustive intervention of the physical holding and when the determined that the student could as Explain: Did staff directly observe the child of Explain: Did staff sustain an injury as a result.	to physical holding: PHYSICAL HOLDI and a brief description of the stude sive intervention to effectively responsion failed or was determined to the threat of humm ended and staff afely return to the classroom or act during the physical hold: t of the physical holding:	NG nt/s behavioral and phys and to the emergency? be inappropriate or impro	☐ Yes ☐ No netical: ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No

Parents must be notified the same day a restrictive procedure is used. A written or electronic not within two (2) days if unable to notify on the same day.	ice must be sent home
Parent: Date: Time:	
Notified by:	

Appendix B: Staff Debriefing

		STAFF DEBRIEFING MEETING		
	Date of Incident:	Date of Debriefing:		
Student: Fred Sample	IC	DOB: (-
School: "		Grade: "		
Student was on an IEP:	⊕ Yes ⊖ No	Was IEP implemented correctly?	⊕ Yes	⊕ No
Was a BIP in place:	⊕ Yes ⊕ No	Was BIP implemented correctly?	⊕ Yes	O No
Identify the antecedents, triggers as Briefly describe the impact of these What behavior necessitated the use Describe student and staff behavior What actions helped or didn't help? Describe the procedure used to retain	: less restrictive interventions of a restrictive procedure? during the incident:			
Was the hold/seclusion the respons	to an emergency situation?		⊕ Yes	⊕ No
Was the hold/seclusion the least res	strictive intervention?		⊕ Yes	O No
Did the hold/seclusion end when the	0id the hold/seclusion end when the threat of harm ended?		⊕ Yes	@ No
s corrective action needed?		© Yes	@ No	
Is the behavior likely to reoccur?		∀cs	@ No	
Follow-up action to prevent the nee	ed for future use of restrictive	procedures:		
Behavior History:				
Other restrictive procedures used in	the last 4 weeks:		○ Yes	⊕ No
Restrictive procedures used twice in a month:		⊕ Yes	⊕ No	
Does the team see this as a pattern?			⊕ Yes	⊕ No
Does the child's IEP team need to n	neet?		⊖ Yes	⊕ No
Staff Attending Debriefing (shoul (Facilitator)	d include one individual not i	nvolved in the incident)		100

Appendix C: Quarterly Oversight Committee Agenda Template

Quarterly Restrictive Procedures Oversight Committee

Meeting Agenda and Notes

School Name:				
Date Time:				
	Pres	ent		
Members Required	Yes	No	Name	
General Education Administrator				
Special Education Administrator				
Mental Health provider, school psych, or social worker				
Expert in positive behavior strategies				
Others, as appropriate				

Area of discussion	Items to discuss	Notes
Restrictive Procedures Plan	Review and update plan as needed	
	Review procedures to inform all staff of plan components	
Review use of restrictive procedures this quarter	Compare SpEd forms report to actual use Number of Restrictive Procedures used school wide Number used on specific students Review documents from use of restrictive procedures. Completed on time Parents informed Debriefing conducted Recommended changes to staff practices in debriefing	

	What, if any, patterns or problems do you notice on time, location, student, staff involved in restrictive procedures?	
	Were staff or student injured? Corrections needed?	
	Was the event an emergency? How do you know this?	
	If no restrictive procedures used, what strategies are working?	
Training	Training plans for all staff?	
	Training plans for crisis team?	
	Are enough staff trained?	
Other		