

PACT Charter School

Restrictive Procedures Plan

January 2022

PACT Charter School ***RESTRICTIVE PROCEDURES PLAN***

This Restrictive Procedures Plan is developed in compliance with Minnesota Statute 125A.0942, which states that “schools that intend to use restrictive procedures shall maintain and make publicly accessible in an electronic format on a school or district website 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 conducting post-use debriefings and convening an oversight committee to undertake a quarterly review; and 4) includes a written description and documentation of the training staff completed. Finally, schools annually must publicly identify oversight committee members who must at least include a mental health professional, school psychologist or school social worker; an expert in positive behavior strategies; a special education administrator and a general education administrator.”

Restrictive Procedures Definitions:

"Restrictive procedures" means the use of physical holding or seclusion in an emergency.

"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. Emergency is never used for punishment.

"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 to protect a child or other individual from physical injury. The term physical holding does not mean physical contact that helps a child respond or complete a task, assists a child without restricting the child's movement, is needed to administer authorized health-related service or procedure, or is needed to physically escort a child when the child does not resist, or the child's resistance is minimal.

"Seclusion" means confining a child alone in a room from which egress is barred. Egress is barred when an adult locks or closes a door, leaving a child in the room alone and preventing the child from leaving the room. Removing a child from an activity to a location where the child cannot participate in or observe the activity is not seclusion.

District Restrictive Procedures Intent

PACT Charter School uses physical holding in emergency situations with students whose Individualized Education Program (IEP) includes provisions for the use of such procedures in an emergency or in emergency situations for students whose IEPs do not include the use of this procedure. Restrictive procedures are not used to punish or otherwise discipline a child.

PACT Charter School does not use seclusion procedures.

PACT Charter School prohibits the following actions or procedures from being used on a child:

1. Corporal Punishment which includes conduct involving: (a) hitting or spanking a person with or without an object; or (2) unreasonable physical force that causes bodily harm or substantial emotional harm.
2. Requiring the student to assume and maintain specified physical position, activity, or posture that induces physical pain.
3. Totally or partially restricting a child'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 access to equipment and devices such as walkers, wheelchairs, hearing aids or communication boards that facilitate the student's functioning except when temporarily removing the equipment or device is needed to prevent injury to the student, 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.
7. Withholding regularly scheduled meals or water.
8. Denying the student access to bathroom facilities.
9. Physical holding that restricts or impairs a student'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.
10. Seclusion.

Mental Health Resources

Anoka County Community Social Services & Behavioral Health

<https://www.anokacounty.us/421/Community-Social-Services-Behavioral-Hea>

Mental Health Crisis Alliance

<http://mentalhealthcrisisalliance.org/crisis-lines/>

Minnesota Association for Children's Mental Health

<http://www.macmh.org>

Fraser

<http://www.fraser.org>

District Restrictive Procedure Plan

Whenever a restrictive procedure is used on a student, staff will report the use of that procedure in written form to the Special Education Case Manager, Lead Special Education Teacher and the Director of Special Education within 24 hours of its use. PACT Charter School utilizes Spedforms (special education data system) to document the use of restrictive procedures. The use of restrictive procedures form includes evidence that:

1. The physical holding was the least intrusive intervention that effectively responded to the emergency.
2. 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.
3. The staff directly observed the child while physical holding was being used.
4. Parents and the district administrator were notified in a reasonable amount of time not to exceed 24 hours.

In addition, each time physical holding is used; the staff person who implements or oversees the physical holding will document the following information:

1. A description of the incident that led to the physical holding.
2. Why a less restrictive measure failed or was determined by staff to be inappropriate or impractical
3. The time the physical holding began and the time the child was released
4. A brief record of the child's behavioral and physical status.

After each use of a restrictive procedure, the Special Education Teacher will hold a debriefing meeting with the Lead Special Education Teacher and the Special Education Paraprofessional involved in the restrictive procedure, preferably within 1-2 days, to review the conditions under which the restrictive procedure was used and consider alternatives to future use.

When restrictive procedures are used on two separate school days within 30 days or when a pattern of use emerges and restrictive procedures are not included in a child's individualized education program or behavior intervention plan, the district will hold a meeting of the individualized education program team within 10 calendar days. The district must hold the IEP meeting to conduct or review a functional behavior assessment, review data, consider developing additional or revised positive behavioral interventions and supports, consider actions to reduce the use of restrictive procedures, and modify the individualized education program or behavior intervention plan as appropriate. At the IEP meeting, the team must review any known medical or psychological limitations that contraindicate the use of a restrictive procedure, consider whether to prohibit that restrictive procedure, and document any prohibition in the individualized education program or behavior intervention plan.

An individualized education program team may plan for using restrictive procedures and may include these procedures in a child's individualized education program or behavior intervention plan; however, the restrictive procedures may be used only in response to behavior that constitutes an emergency. Physical holding or seclusion is never used to discipline a non-compliant child. The individualized education program or behavior intervention plan will indicate the parents' preference for notification when a restrictive procedure is used.

The District Restrictive Procedures Oversight Committee will meet quarterly to review the data related to the use of restrictive procedures and consider training needs. The committee comprises a District Administrator, the Director of Special Education, the Lead Special Education Teacher, and the School Social Worker.

Description and Documentation of Staff Training

Restrictive procedures will be implemented only by a licensed special education teacher, school social worker, school psychologist, behavior analyst certified by the National Behavior Analyst Certification Board, a person with a master's degree in behavior analysis, other licensed education professionals, paraprofessional or mental health professional who have completed the appropriate training program.

PACT Charter School staff that directly work with special education students will be initially certified through the Crisis Prevention Intervention (CPI) program and receive annual refreshers through the same program. CPI addresses the state requirements for a restrictive procedure training program which includes training on:

- Positive behavioral interventions
- Communicative intent of behaviors
- Relationship building
- Alternatives to restrictive procedures, including techniques to identify events and environmental factors that may escalate the behavior
- De-escalation methods
- Standards for using restrictive procedures only in an emergency
- Obtaining emergency medical assistance
- The physiological and psychological impact of physical holding and seclusion
- Monitoring and responding to a child's physical signs of distress when physical holding is being used and
- Recognizing the symptoms of and interventions that may cause positional asphyxia when physical holding is used.

A list of CPI-trained staff is kept on file in the PACT Charter School main office.

Staff will also be provided training on PACT Charter School policies and procedures for timely reporting and documenting each incident involving the use of a restricted procedure.

Positive Behavior Strategies

All applicable PACT Charter School licensed special education staff, and special education paraprofessionals are trained on de-escalation strategies. Special education staff will complete a full-day Crisis Prevention Intervention course, and teachers and Paraprofessionals are provided a 3-hour refresher training every year. Specific Positive Behavior Support strategies are discussed and agreed upon at individual IEP meetings. PACT Charter School has school-wide efforts to create a positive and supportive culture.

Restrictive Procedure – Step by Step

1. Student is physically held due to an emergency situation.
2. Adult staff member directly observes the student while he/she is physically held.
3. Student is released from hold as soon as the threat of harm has ended.
4. Student returns to activity or classroom.
5. District administrator is notified that a physical hold was used with a student.
6. Parents of student are notified that a physical hold was used with their child and the event(s) precipitating the hold.
7. Staff will complete the Restrictive Procedures: Physical Holding Form
8. The Special Education Teacher, Special Education Lead Teacher and Special Education Paraprofessional involved in the Restrictive Procedure will schedule and hold a de-briefing meeting within 1-2 days.
9. If a student is held on two separate school days in 30 days, the IEP manager will convene an IEP meeting within 10 calendar days of the 2nd physical hold.
 - a. The student's functional behavior assessment (FBA), IEP and positive behavior intervention plan (PBIP) will be reviewed and revised if necessary.
 - b. If the student does not have a functional behavior assessment, one will be completed.
 - c. The IEP team will review any known medical or psychological limitations that contraindicate the use of a restrictive procedure, consider whether to prohibit that restrictive procedure, and document any prohibition in the individualized education program or behavior intervention plan.
 - d. The IEP will be revised and a positive behavior intervention plan will be developed if appropriate.
10. If the IEP is revised, parents will be sent a Prior Written Notice and revised IEP no later than 14 days after the IEP meeting.
11. If the IEP is not revised, parents will be sent a Prior Written Notice no later than 14 days after the IEP meeting.

Any questions regarding this Restrictive Procedures plan should be directed to the district's Special Education Director.