

Restrictive Procedures in Schools



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What parents should know about the use of seclusion and restraints

In 2009 a law was passed in Minnesota regulating how schools use restrictive procedures, in particular seclusion and restraint, on students in special education. The law went into effect on August 1, 2011. If your child has an IEP (Individualized Education Program), you will want to learn more about this law.

What are restrictive procedures?

Restrictive procedures limit a child's movement and include seclusion and physical holding or restraints. They can only be used in an emergency. They cannot be used to punish or discipline a child!

What is seclusion?

Seclusion means keeping a child alone in a room and not letting them leave. The word "seclusion" has also been called "locked time-out." Seclusion can also happen outside of a seclusion room.

Rooms that are used for seclusion have to meet certain standards. The room must:

- Be at least six feet by five feet
- Be well lit and well ventilated
- Be adequately heated
- Be clean
- Have a window that allows staff to directly see the child
- Have lights and other fixtures that can't be taken apart, secure ceilings, and switches located outside the room
- Have doors that open out and keyless locks with immediate release mechanisms or locks connected to fire and emergency systems;
- Not contain objects that a child could use to injure themselves or others;
- Meet all building, fire and safety codes;
- Be registered with the Department of Education.

What is physical holding or restraints?

Physical holding involves limiting a student's movement by using body contact. This might include a teacher holding a student. It does not include helping a child complete a task. It also does not mean physically escorting a child when he or she isn't resisting. Physical holding can no longer include prone restraints – holding a student face down.

When can restrictive procedures be used?

Physical holding and seclusion can only be used in an emergency. An emergency is when immediate action is needed to protect a child or other individual from physical injury. They can't be used simply because a child doesn't respond to a command or tosses a pencil. Restrictive procedures are not to be used for discipline or punishment. They are only used for serious incidents where someone could be hurt.

There are additional restrictions on the use of seclusion and restraints:

- The least intrusive intervention is used to respond to the emergency – school staff can't do more than what is necessary in order to calm the child down.
- The procedure must end when the threat of harm ends and the child can be returned safely to the classroom or activity.
- Staff is to directly observe the child when the procedures are being used.
- Staff must write down each time these procedures are used. The information must include: what happened that caused the procedures to be used, why a less intrusive measure failed or wasn't used, the time the procedure began and when it ended, and a brief record of the child's physical and mental status.

Who can use restrictive procedures?

These procedures can only be used by licensed personnel such as:

- Teachers
- Psychologists
- Social workers
- Behavior analysts
- Certain paraprofessionals
- Mental health professionals

They must also receive specialized training to use these procedures. The specialized training includes the following:

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 use of restrictive procedures only in an emergency;
7. Obtaining emergency medical assistance;
8. The 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.

Will parents be notified?

Schools are to notify parents on the same day a procedure is used. If the school isn't able to reach the parent, then schools will send a note within two days (email or letter).

Parents can agree to the use of restrictive procedures in their child's IEP. Parents can also put in the IEP when and how they want to be notified – every time, once a month, by e-mail, by phone, etc.

If there is nothing in the IEP about restrictive procedures, an IEP team meeting must be held if restrictive procedures are used on two separate school days in a 30 day period, the IEP team must meet. Any time restrictive procedures are used, even if they are included in the IEP, parents can ask for an IEP team meeting to talk about the use of restrictive procedures. At these meetings, the team will:

- Review the IEP,
- Conduct or review the functional behavior analysis,
- Review data,
- Consider developing or revising positive behavioral interventions for your child, and
- Revise the IEP if necessary.

The IEP team must also review any known medical (such as asthma) or psychological limitations (sexual abuse or trauma) when these procedures shouldn't be used. This information should be written in the IEP.

If the IEP 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 must consult with other professionals working with the child; consult with experts in behavior analysis, mental health, communication, or autism; consult with culturally competent professionals; review existing evaluations, resources, and successful strategies; or consider whether to reevaluate the child.

Please note that even if a parent does not agree, the school may use a restrictive procedure in an emergency.

How can parents find out more about restrictive procedures?

Every school has a plan about restrictive procedures. It includes:

- The list of procedures that they plan to use,
- How they will be monitored and reviewed (including an oversight committee and debriefings),
- Description and documentation of staff training,
- The range of positive behavior strategy and levels to mental health services, and
- Oversight committee monitors their work.

The school's plan should be posted on their website and paper copies should be available. Some schools may decide not to use them at all.

Parents should know that there is a list of procedures that can never be used. It includes things like withholding food, not allowing a child to use a bathroom, physical holding that restricts a child's ability to breathe and assuming a position that would be painful.

What organizations can help when parents are concerned?

All of the advocacy organizations listed below can help:

- PACER Center at 1-800-537-2237 or 952-838-9000
- Arc Greater Twin Cities at 952-920-0855
- Arc Minnesota 651-523-0823
- NAMI Minnesota at 645-2948 or 1-888-NAMI-HELPS (6264435)
- Disability Law Center 612-334-5970 or 1-800-292-4150
- MOFAS at 1-866-90-MOFAS (66327) 651-917-2370
- Office of the Ombudsman for Mental Health and Developmental Disabilities 651-757-1800 or 1-800-657-3506
- Minnesota Association for Children's Mental Health at 800-528-4511

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