



New Height School (NHS) - Restrictive Procedures Policy

In accordance with Minn. Stat. §§ 125A.094 and 125A.0942, every school district is required to develop and make publicly accessible in an electronic format on a school or district website or make a paper copy available upon request of plan that discloses its use of restrictive procedures with special education students. The plan must list the restrictive procedures that the school district intends to use; describe how the school district will implement a range of positive behavior strategies and provide links to mental health services, describe how the school district will monitor and review the use of restrictive procedures, including post-use debriefings and 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 the 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 procedures 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 non-emergency situations, the need for additional staff training, and proposed actions to minimize the use of restrictive procedures; and includes a written description and documentation of the training any staff members who will be using restrictive procedures have completed to show they have the skills set out in Minn. Stat. § 125A.0942, subd. 5.

RESTRICTIVE PROCEDURES

NHS promotes the use of positive approaches for behavioral interventions for all students and uses restrictive procedures only in emergency situations.

- “Emergency” means a situation where immediate intervention is needed to protect the student or other individuals 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 must not be used to punish or otherwise discipline a child.

Restrictive Procedures are not Used at NHS

Physical Holding - NOT USED

- “Physical holding” means physical intervention intended to hold a student immobile or limit a student’s movement, where body contact is the only source of physical restraint, and where immobilization is used to effectively gain control of a student in order to protect a student or other individual from physical injury.
- The physical holding must:
 - be the least intrusive intervention that effectively responds to the emergency;
 - not be used to discipline a noncompliant student;

- end when the threat of harm ends, and the staff determines the child can safely return to the classroom or activity;
- be observed directly by staff while the physical holding is being used; and
- be documented as soon as possible after the incident concludes by the person who implemented the physical hold or oversaw the hold.
- The term “physical holding” does not mean physical contact that:
 - helps a student respond or complete a task;
 - assist a student without restricting the student’s movement;
 - is needed to administer an authorized health-related service or procedure; the application of mechanical restraints for bus transportation, sensory needs, or medical needs as these procedures are documented in the student’s Individual Family Service Plan (IFSP) or Individual Education Program (IEP). or
 - is physically needed to escort a student when the student does not resist or the student’s resistance is minimal.

Seclusion - NOT USED

- “Seclusion” means confining a student alone in a room from which egress is barred, including by an adult locking, or closing the door in the room or preventing the student from leaving the room. Removing a student from an activity to a location where the student cannot participate in or observe the activity is not seclusion if the student is not confined alone in a room from which egress is barred.

POSITIVE BEHAVIOR SUPPORTS

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

NHS will only use physical holds in emergency situations and staff will implement a range of positive behavior strategies as a proactive approach to teaching positive behavior skills to students, thereby reducing students exhibiting challenging behaviors and the need for the use of physical holds. Staff who use restrictive procedures shall complete training in the following skills and knowledge areas:

- Positive behavioral interventions;
- Communicative intent of behaviors;
- Relationship building
- Alternatives to restrictive procedures including techniques to identify events and environmental factors that may escalate behavior;
- De-escalation methods;
- Standards for using restrictive procedures;
- Obtaining emergency or medical assistance;
- Physiological and psychological impact of physical holding and seclusion;
- Monitoring and responding to a student’s physical signs of distress when physical holding is used;
- Recognizing the symptoms of and interventions that may cause positional asphyxia when physical holding is used;
- District policies and procedures for timely reporting and documenting each incident involving the use of a restrictive procedure; and
- Schoolwide programs on positive behavior strategies.

Restrictive procedures may be used in emergency situations only by the following staff who have been properly trained in the skills and knowledge areas described in Minn. Stat. § 125A.0942, subd. 5, which are set out subsequently in this plan and only when certified through training, the following employee job classifications are authorized to use restrictive procedures:

- School Principal or Administrator;
- Licensed special education teachers;
- Licensed school social workers;
- Licensed school psychologists;
- Other certified/registered educational professionals (e.g.; school nurse, BCBA, behavior specialists, other)
- Educational Assistants

as described in Minn. Stat. § 120B.363, and mental health professional covered by Minn. Stat. § 245.4871, subd. 27.

OVERSIGHT COMMITTEE

As described in Minn. Stat. § 125A.094, NHS will convene an oversight committee to include:

- Mental health professional;
- Expert in positive behavior strategies;
- Special education administrator;
- General education administrator.

The oversight committee will meet quarterly to review:

- 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 the procedure, the individuals involved, or other factors associated with the use of restrictive procedures;
- any disproportionate use of restrictive procedures based on race, gender, or disability status;
- the role of the school resource officer or police in emergencies and the use of restrictive procedures;
- the number of times a restrictive procedure is used schoolwide and for individual students;
- the number and type 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;
- proposed actions to minimize the use of restrictive procedures.

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

Parent Notification:

School staff shall make reasonable efforts to notify the parent on the same day a restrictive procedure is used on the student, or if the school is unable to provide same-day notice, notice is sent to the parent by written or electronic means within two days of the procedure being used or as otherwise indicated in the student's IEP.

Reporting of Use of Restrictive Procedure:

Either the staff person who implements or the staff person who oversees the use of a restrictive procedure shall inform the administration of the use of the restrictive procedure as soon as possible and shall complete the restrictive procedures report form no later than the next working day. (See reporting form in Attachment A.) The restrictive procedures report form must include:

- a description of the incident that led to the use of the restrictive procedure;
- statement of why a less restrictive measure failed or was determined by staff to be inappropriate or impractical;
- the time the restrictive procedure began and the time the student was released from the hold; and
- a brief record of the student's behavioral and physical status during and after the use of the restrictive procedure.

Staff Debriefing after Use of Restrictive Procedure:

The building administrator or his/her designee and the staff involved in the use of the restrictive procedure are expected to debrief after every use of a restrictive procedure. This debriefing could include completing and discussing the restrictive procedures reporting form.

Including Plan for Use of a Restrictive Procedure in Student's IEP:

A student's IEP team may include a plan for using a restrictive procedure in the student's IEP but may only use the restrictive procedure in situations that constitute an emergency. If a plan is included in the student's IEP, the IEP must also indicate how the parent wants to be notified when a restrictive procedure is used. The district must review use of restrictive procedures at a student's annual IEP meeting when the student's IEP provides for using restrictive procedures in an emergency.

Use of Restrictive Procedures on Two School Days in 30 Calendar Days:

When restrictive procedures are used on two separate school days within 30 (thirty) calendar days or if a pattern of use of the restrictive procedure emerges and the student's IEP or behavior intervention plan does not provide for using restrictive procedures in an emergency; the district must hold an IEP meeting within 10 (ten) calendar days after district staff use the restrictive procedures on the second day. A meeting can also be requested by the parent or the district after restrictive procedures have been used.

The IEP Team must:

- review the student's Functional Behavior Assessment (FBA);
- review other data connected to the behavior(s) that prompted the use of the restrictive procedure;
- consider developing additional or revised positive behavioral interventions and supports;

- consider actions that could be taken to reduce the use of restrictive procedures;
- consider developing a Behavior Intervention Plan (BIP) or modifying an existing BIP;
- consider other revisions to the student's IEP;
- review any known medical or psychological limitations, including any medical information the parent provided voluntarily, that contraindicate the use of a restrictive procedure; and
- consider whether to prohibit a restrictive procedure and, if so, document any prohibition in the student's 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 10 or more school days during the same school year, the team, as appropriate, either must consult with other professionals working with the student; 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 student.

PROHIBITED PROCEDURES

District staff members are prohibited from using the following actions or procedures:

1. engaging in corporal punishment which is defined by Minnesota statute to be conduct involving:
 - a. hitting or spanking a person with or without an object; or
 - b. unreasonable physical force that causes bodily harm or substantial emotional harm.
2. requiring a 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 a student's access to equipment and devices such as walkers, wheelchairs, hearing aids, and communication boards that facilitate the student's functioning, except when the temporary removal of the equipment or device is 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 as those terms are defined in Minn. Stat. § 626.556;
7. withholding regularly scheduled meals or water;
8. denying access to bathroom facilities;
9. physical holding that restricts or impairs a student's ability to breathe, restricts or impairs a student's ability to communicate distress, places pressure or weight on a student's head, throat, neck, chest, lungs, sternum, diaphragm, back, or abdomen, or results in straddling a child's torso; and
10. prone restraint: placing a student in a face-down position. An employee or agent of the school, including a school resource officer, security personnel, or a police officer contracted with the school, shall not:
 - a. use prone restraint;
 - b. inflict any form of physical holding that restricts or impairs a student's ability to breathe; restricts or impairs a student's ability to communicate distress; places pressure or weight on a student's head, throat, neck, chest, lungs, sternum, diaphragm, back or abdomen; or results in straddling a student's torso.

Nothing in this plan precludes the use of reasonable force as allowed under Minn. Stat. §§ 121A.582, 609.06, subd. 1, and 609.379.

REASONABLE FORCE

Minn. Stat. §121A.582

Subdivision 1. Reasonable force standard.

- (a) A teacher or school principal, in exercising the person's lawful authority, may use reasonable force when it is necessary under the circumstances to correct or restrain a student or to prevent imminent bodily harm or death to the student or another.
- (b) A school employee, school bus driver, or other agent of a district, in exercising the person's lawful authority, may use reasonable force when it is necessary under the circumstances to correct or restrain a student or to prevent imminent bodily harm or death to the student or another.
- (c) Paragraphs (a) and (b) do not authorize conduct prohibited under section 125A.0942.

Subd. 2. Civil liability.

- a) A teacher or school principal who, in the exercise of the person's lawful authority, uses reasonable force under the standard in subdivision 1, paragraph (a), has a defense against a civil action for damages under section 123B.25.
- b) A school employee, bus driver, or other agent of a district who, in the exercise of the person's lawful authority, uses reasonable force under the standard in subdivision 1, paragraph (b), has a defense against a civil action for damages under section 123B.25.

Subd. 3. Criminal prosecution.

- (a) A teacher or school principal who, in the exercise of the person's lawful authority, uses reasonable force under the standard in subdivision 1, paragraph (b) has a defense against a criminal prosecution under section 609.06, subdivision 1.
 - a. A school employee, bus driver, or other agent of a district who, in the exercise of the person's lawful authority, uses reasonable force under the standard in subdivision 1, paragraph (b), has a defense against a criminal prosecution under section 609.06, subdivision 1.

To obtain service or a referral to a service provider, the family should contact their primary care clinic, physician, or insurance provider. Set out below are links to mental health resources:

Hennepin County Child Crisis Services:

http://hennepin.us/portal/site/HennepinUS/menuitem.b1ab75471750e40fa01dfb47ccf06498/?vgnextoid=500_9e5d0820a3210VgnVCM10000049114689RCRD

National Alliance on Mental Illness (NAMI): <http://www.namihelps.org/>

Minnesota Association for Children's Mental Health (MACMH): <http://www.macmh.org/>

List of Mental Health/Family Support/Youth Development Agencies

Canvas Health 2550 University Ave W. St. Paul, MN 55114 (651) 379-5157
 Centro 1915 Chicago Ave. Minneapolis, MN 55404 (612) 874-1412
 Change, Inc. 227 Colfax Ave. N., Suite 130 Minneapolis, MN 55405 (612) 759-8789

Family Innovations, Inc. Anoka: (763) 421-5535 Eden Prairie: (952) 224-2282 Maplewood: (651) 748-5019

Guadalupe Alternative Programs 381 E. Robie St. Saint Paul, MN 55107-2415 (651) 222-0757

Headway Emotional Health Services (formerly Storefront) 6425 Nicollet Ave. S. Richfield, MN 55423 (612) 861-1675

Helena Family Support 13537 Windyhill Rd. Minnetonka, MN 55305 (952) 484-4885

Hoistad and Associates/Natalis Counseling St. Paul and Shoreview locations: 2550 University Ave. W., Suite 314N St. Paul, MN 55114 (651) 379-5157

Lutheran Social Service of Minnesota 2485 Como Ave. St. Paul, MN 55108 (651) 642.5990
1-800-582-5260

NorthPoint Health and Wellness Center 1313 Penn Ave. N. Minneapolis, MN 55411 (612) 543-2500

POR Emotional Wellness (formerly Power of Relationships) 7380 France Ave. S., Suite 209 Edina, MN 55435 (952) 835-6540

The Family Partnership 414 S. 8th St. Minneapolis, MN 55404 (612) 339-9101

The Mental Health Collective (Watercourse) 3548 Bryant Ave S. Minneapolis, MN 55408 (612) 822.8227

Washburn Center for Children 2430 Nicollet Ave. S. Minneapolis, MN 55404 (612) 871-1454

ATTACHMENT A

Restrictive Procedure Form: This form is completed whenever a restrictive procedure is used, as described in Minn. Stat. § 125A.0942. This form is to be filed in the Student’s Due Process file. The form is completed in SpEd Forms and retained. Parent communication about restrictive procedures will also be documented in SpEd Forms student communication log.

Directions: The staff person who implemented or oversaw a physical hold must complete this form each time a physical hold is utilized.

PHYSICAL HOLDING

Description of the physical holding and a brief description of the student's behavioral and physical status:

Was physical holding the least intrusive intervention to effectively respond to the emergency? Yes No

Explain why a less restrictive intervention failed or was determined to be inappropriate or impractical:

Did the physical holding end when the threat of harm ended and staff determined that the student could safely return to the classroom or activity: Yes No

Explain:

Did staff directly observe the child during the physical hold: Yes No

Explain:

Did staff sustain an injury **as a result of** the physical holding: Yes No

Did the student sustain an injury **as a result of** the physical holding: Yes No

Date of Procedure:

Procedure	Start Time	End Time	Total Time	Delete
<div style="border: 1px solid black; padding: 2px;"> ---Select Option--- ▼ </div>	<div style="border: 1px solid black; padding: 2px;"> MM/DD/YY </div>	<div style="border: 1px solid black; padding: 2px;"> MM/DD/YY </div>		
	<input type="text"/> : <input type="text"/> PM ▼	<input type="text"/> : <input type="text"/> PM ▼		

REMOVAL FROM SCHOOL

Was the student removed from school by a police officer at the request of school personnel: Yes No

PARENT NOTIFICATION

Parents must be notified the same day a restrictive procedure is used. A written or electronic notice must be sent home within two (2) days if unable to notify on the same day.