

# Bluffview Montessori #4001-07

## 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: 2017-2018**

- (i) *a mental health professional, school psychologist, or school social worker;*
  - **Name Wendy Draves**
- (ii) *an expert in positive behavior strategies;*
  - **Name Cheryl Polachek**
- (iii) *a special education administrator; and*
  - **Name Amber Kulib**
- (iv) *a general education administrator.*
  - **Name Henry Schantzen/Lori Cloutier**

**Adopted: October 2013**  
**Revised: October 2017**

## **School Building Restrictive Procedures Plan**

- ❓ **Restrictive procedures** means the use of physical holding or seclusion in an emergency. 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:**

#### **A. Physical holding:**

1. "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*<sup>SM</sup>
  - b) CPI's *Team Control Position*<sup>SM</sup>
  - c) CPI's *Transport Position*<sup>SM</sup>
  - d) CPI's *Interim Control Position*<sup>SM</sup>
  - e) **At this writing, this school does not intend to use "prone restraint". ("Prone restraint" means placing a child in the face down position.)**

#### **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;
  - c) 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". Team members will be using the electronic version of this 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". Team members will be using the electronic version of this form after using a physical hold and printing it for the student's file.)*

**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
  - c) 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**) 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.**
  - d) 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;
  5. 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.
  2. via 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. (*Name of trained instructor, participants, dates, time in training, etc.*)

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

- A. **Positive behavioral interventions** and supports means interventions and strategies to improve the school environment and teach children the skills to behave appropriately.

- B. 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.
- C. **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 schoolwide plan includes

**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*


**Use of Restrictive Procedures: Physical Holding**

Student: \_\_\_\_\_ ID: \_\_\_\_\_ Date:-----  
 School: \_\_\_\_\_ Grade: \_\_\_\_\_ **DOB:**-----  
 Gender: \_\_\_\_\_ Primary Disability: \_\_\_\_\_

Part A. Is the student Hispanic/Latino?  Yes  No  
 Part B. What is the student's race? (*Choose one or more*)  
 American Indian or Alaska Native  Asian  
 Black or African American  White  
 Native Hawaiian or Other Pacific Islander

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

Staff involved: \_\_\_\_\_

Person completing this form: \_\_\_\_\_ Position: \_\_\_\_\_ Phone: \_\_\_\_\_

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**EMERGENCY**


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Was physical holding used to protect student or others from physical injury?  Yes  No

Description of the emergency situation:

Description of the incident that led to physical holding:

**type in a description of the emergency that...**

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**PHYSICAL HOLDING**


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Description of the physical holding and a brief description of the student's behavioral and physical status:  
**students behavior and physical status described here...**

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:  
**description ...**

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:





**STAFF DEBRIEFING MEETING**

Date of Incident: \_\_\_\_\_

Date of Debriefing: \_\_\_\_\_

Student: \_\_\_\_\_

ID: \_\_\_\_\_

DOB: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

Student was on an IEP: **DYes DNo**      Was IEP implemented correctly? **DYes DNo**  
 Was a BIP in place: **DYes ONo**      Was BIP implemented correctly? **OYes DNo**

Identify the antecedents, triggers and proactive interventions used prior to escalation:

Description, , , details

Briefly describe the impact of these less restrictive interventions:

Description, , .details

What behavior necessitated the use of a restrictive procedure?

Description. . , details

Describe student and staff behavior during the incident:

Description. . . details

What actions helped or didn't help?

Description. . . details

Describe the procedure used to return the student to his/her routine activity:

Description. . . details

Was the hold/seclusion the response to an emergency situation? **DYes DNo**

Was the hold/seclusion the least restrictive intervention? **DYes DNo**

Did the hold/seclusion end when the threat of hann ended? **OYes DNo**

Is corrective action needed? **DYes DNo**

Is the behavior likely to reoccur? **OYes DNo**

Follow-up action to prevent the need for future use of restrictive procedures:

Description, , . details

**Behavior History:**

Other restrictive procedures used in the last 4 weeks: **DYes DNo**

Restrictive procedures used twice in a month: **DYes DNo**

Does the team see this as a p ttern? **DYes DNo**

Does the child's IEP team need to meet? **DYes DNo**

Staff Attending Debriefing (should include one individual not involved in the incident)

(Facilitator)

Did staff directly observe the child during the physical hold:

Yes  No

Explain:

Time physical hold began: \_\_\_\_\_ iEnded: \_\_\_\_\_ Total Time: \_\_\_\_\_

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**PARENT NOTIFICATION**

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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.

Parent: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Notified by: \_\_\_\_\_

How notified: **Phone**

**Writing**

**Email**

## Quarterly **Restrictive Procedures Review** Oversight Committee

**School Name** \_\_\_\_\_

(date)	(time)	(location)
<u>Members Required</u>	<u>Present?</u>	<u>Name</u>
General Education Administrator	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Special Education Administrator	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Ment hlth prof, sch psych, or sch soc wrkr	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Expert in positive behavior strategies	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Others, as appropriate	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
		_____
		_____

		NOTES
<ul style="list-style-type: none"> <li>• Review/Accept/Revise Agenda</li> </ul>		<ul style="list-style-type: none"> <li>• Notes</li> </ul>
<ul style="list-style-type: none"> <li>• Purpose of Meeting:</li> </ul>	<ul style="list-style-type: none"> <li>• To review district/school restrictive procedures plan</li> <li>• To review restrictive procedures used this quarter</li> <li>• To plan for the future</li> </ul>	<ul style="list-style-type: none"> <li>• Notes</li> </ul>
<ul style="list-style-type: none"> <li>• Review Elements of Plan</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness: Reacquaint team with plan requirements</li> <li>• Are procedures being followed?</li> <li>• Any need to revise the plan?</li> </ul>	<ul style="list-style-type: none"> <li>• Notes</li> </ul>

		NOTES
<ul style="list-style-type: none"> <li>Review Student Data</li> </ul>	<ul style="list-style-type: none"> <li>SpEd Forms Report (<i>Review Administrative Quick Report: Procedures Used</i>)</li> <li>Verify data: Complete? If not, amend data.</li> <li>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;</li> <li>the number of times a restrictive procedure is used schoolwide and for individual children;</li> <li>the number and types of injuries, if any, resulting from the use of restrictive procedures</li> <li>whether restrictive procedures are used in nonemergency situations;</li> <li>the need for additional staff training;</li> <li>and proposed actions to minimize the use of restrictive procedures.</li> </ul>	<ul style="list-style-type: none"> <li>Notes</li> </ul>
<ul style="list-style-type: none"> <li>Discuss Training</li> </ul>	<ul style="list-style-type: none"> <li>What is our current training plan?</li> <li>Who is currently trained?</li> <li>Is training adequate and appropriate? (<i>Only trained folks are holding?</i>)</li> </ul>	<ul style="list-style-type: none"> <li>Notes</li> </ul>
<ul style="list-style-type: none"> <li>Complete Overview Process</li> </ul>	<ul style="list-style-type: none"> <li>Current issues to address</li> <li>Task: Complete Meeting Summary</li> <li>Task: Storage of records (<i>district file</i>)</li> <li>Plan for the future</li> </ul>	<ul style="list-style-type: none"> <li>Notes</li> </ul>
<ul style="list-style-type: none"> <li>Other</li> </ul>		<ul style="list-style-type: none"> <li>Notes</li> </ul>

**\*All Restrictive Procedures Data is to be Verified for the Special Education Director by the end of the school year. The Director is responsible for reporting this data annually to the MN Department of Education.**

**Hiawatha Valley Education District's Member Districts' and Charter Schools  
Restrictive Procedures Plan**

**Local Mental Health Resources**

**Counseling Clinic, La Crescent**

33 Walnut St, Suite 100  
La Crescent, MN 55947  
(507)895-6666

**Counseling Resource Center Services**

506 W 5th St  
Winona, MN 55987  
(507)454-3880

**Family and Children's Center**

601 Franklin St  
Winona, MN 55987  
(507)453-9563 (Call this number to access contact information for local satellite sites.)

**Hiawatha Valley Mental Health Center**

166 Main St  
Winona, MN 55987  
(507)454-4341 (Call this number to access contact information for local satellite sites.)

**Mayo Clinic Health System**

200 First Street SW  
Rochester, MN 55905  
(507)284-2511 (Call this number to access contact information for local satellite sites.)

**Winona Health Psychiatric and Counseling Services**

825 Mankato Ave, Suite 214  
Winona, MN 55987  
(507)454-2606

**Fillmore County Social Services**

902 Houston St NW  
Preston, MN 55965  
(507)765-2175

**Houston County Social Services**

304 S Marshall St  
Caledonia, MN 55921  
(507)725-5811

**Olmsted County Social Services**

2117 Campus Dr SE, Suite 200  
Rochester, MN 55904  
(507)328-6400

**Wabasha County Social Services**

411 Hiawatha Dr E  
Wabasha, MN 55981  
(651)565-3351

**Winona County Human Services**

202 W 3rd St  
Winona, MN 55987  
(507)457-6200