

Appendix 19

Restrictive Procedures:

Schools are to avoid the use of Physical Holds unless the student is posing an imminent risk of harm to themselves or to others. Per §MN Statute 125A.0941, 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 is yelling and screaming profanities or other words that disrupt the classroom, hallways, gyms, cafeteria or playground, a child who is tearing posters and school work from the walls, clearing desks, breaking electronic equipment, a child who may be running around the classroom or hallways 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.

"Physical holding" (as defined by §MN Statute 125A.0941) 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. The term physical holding does not mean physical contact that:

- (1) helps a child respond or complete a task;
- (2) assists a child without restricting the child's movement;
- (3) is needed to administer an authorized health-related service or procedure; or
- (4) is needed to physically escort a child when the child does not resist, or the child's resistance is minimal.

School districts should use positive behavioral supports and interventions that teach skills to student to promote prosocial and effective problem skills rather than focus solely on the suppression of negative or maladaptive behavior.

If a District does use a restrictive procedure (physical hold) in an emergency and as a last measure in order to maintain safety for the student or others, only trained staff (special education teacher or paraprofessional) should implement the hold. A hold may be needed if other less intrusive methods (e.g., verbal de-escalation, proximity, self-removal to another space) have not been successful. A physical hold may not be used to discipline a noncompliant student. The physical hold ends when the threat of harm ends, and staff determines the student is calm enough to process and be able to return to the classroom or activity.

Per statute, if a restrictive procedure is used in an emergency, the parent must be notified within 24 hours by phone and within 48 hours by written correspondence if phone contact was not made.

The incident will be documented with the following elements included in the report:

- (1) The antecedents to the incident
- (2) Staff response to the student prior to the decision to use a physical hold
- (3) A description of the hold, including a 'stick-figure' drawing indicating where each staff member was during the hold.
- (4) The length of time the hold was used
- (5) A summary of the debriefing of the incident with the student once the student has regained control

- (6) Time of parent notification, including whether parent responded to the call or if message was left.

The executive Director and the Director of Special Education will be notified of the use of a hold within one hour of the conclusion of the incident. The staff involved with the incident will have a debriefing/check-in at the end of the day.

Copies of the report will be made and sent to the Director of Special Education, the Executive Director, the student's Special Education teacher, and a copy will be placed in the student's special education file.

The Director of Special Education will log and track the use of physical holds for the annual report made to the Minnesota Department of Education (MDE) Commissioner per instructions provided by MDE Division of Compliance.

The district will hold a meeting of the student's Individualized Education Program (IEP) team, within ten calendar days after district staff use restrictive procedures on two separate school days within 30 calendar days or a pattern of use emerges, and the student's IEP or behavior intervention plan does not provide for using restrictive procedures unless in an emergency; or at the request of a parent or the district after restrictive procedures are used. The district will review the use of restrictive procedures at a student's annual IEP meeting when the child's individualized education program provides for using restrictive procedures in an emergency.

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, will either 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.

At the IEP meeting the team must review any known medical or psychological limitations, including any medical information the parent provides voluntarily, 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.

The IEP team may plan for using restrictive procedures and may include these procedures in the student's IEP or behavior intervention plan; however, the restrictive procedures may be used only in response to behavior that constitutes an emergency, consistent with this section. The IEP or behavior intervention plan shall indicate how the parent wants to be notified when a restrictive procedure is used.

While the District does not plan to use restrictive procedures as part of formal plan, staff will be trained in verbal de-escalation techniques, emphasizing recognizing escalating signs of student distress and corresponding positive staff interventions to calm the student. If the student's behavior does escalate to where there are concerns for the safety of the student or of others, the use of a physical hold will be implemented, with the least intrusive hold to maintain the student safely to be used.

A District should establish a "Restrictive Procedures" oversight committee. The committee will 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 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.

The oversight committee should consist of:

- (1) a school psychologist;
- (2) the Director of Special Education;
- (3) a Special Education Teacher; and
- (4) the Executive Director Building Principal

An additional Restrictive Procedure defined in § MN Statute 125A is “seclusion time out” or “seclusion space.” The statute clearly outlines the necessary physical dimensions and protections that space must have and to have been inspected by the Fire Marshall. Unless a school has met all the requirements for a seclusion space, a student CAN NOT be placed in any room, closet, or space by themselves and be barred from exiting that space.

Finally, school districts must acknowledge certain actions or procedures are prohibited and will not use the following:

- (1) requiring a child to assume and maintain a specified physical position, activity, or posture that induces physical pain;
- (2) totally or partially restricting a child's senses as punishment;
- (3) presenting an intense sound, light, or other sensory stimuli using smell, taste, substance, or spray as punishment;
- (4) 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;
- (5) interacting with a child in a manner that constitutes sexual abuse, neglect, or physical abuse under MN Statute 626.556;
- (6) withholding regularly scheduled meals or water;
- (7) denying access to bathroom facilities;
- (8) 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; and
- (9) prone restraint.

**Point of Clarification:*

Beginning with the 2023-2024 school year, any physical hold, whether done with a general ed or special ed student, must be reported to the Minnesota Department of Education on a yearly basis. The report includes the student's MARSS, age, grade, gender, ethnicity, and disability (if applicable). The total number of physical holds for that student is the number reported.