



Physical Restraint Procedures and Preventions

46.01 Purpose of Policy

Hill View Montessori Public Charter School (HVM) seeks to promote an orderly, positive, productive learning environment in which all students are provided an opportunity to grow academically, emotionally, and socially. That being said, the purpose of *603 CMR 46.00*, as it pertains to HVM students, is to ensure that every student participating in a Massachusetts public education program is free from the use of physical restraint that is inconsistent with 603 CMR 46.00. Physical restraint shall be used *only* in emergency situations, after other lawful and less intrusive alternatives have failed or been deemed inappropriate, and with extreme caution. School personnel shall use physical restraint with two goals in mind:

- (a) To administer a physical restraint only when needed to protect a student and/or a member of the school community from assault or imminent, serious, physical harm; and
- (b) To prevent or minimize any harm to the student as a result of the use of physical restraint.

Nothing in *603 CMR 46.00* precludes any teacher, employee or agent of a public education program from using reasonable force to protect students, other persons or themselves from assault or imminent, serious, physical harm.

This policy shall be provided to staff and made available to parents and guardians of HVM students annually. Through it and other communication with parents, HVM will engage parents in discussion about restraint prevention and the use of restraint solely as an emergency procedure.

46.02 Definitions

Consent shall mean agreement by a parent who has been fully informed of all information relevant to the activity for which agreement is sought, in his or her native language or other mode of communication, that the parent understands and agrees in writing to carrying out of the activity, and understand that the agreement is voluntary and may be revoked at any time, and describes the activity and lists the records (if any) which will be released and to whom. In seeking parental consent, HVM will not condition admission or continued enrollment upon agreement to the proposed use of any restraint.

Department shall mean the Department of Elementary and Secondary Education.

Mechanical restraint shall mean the use of a device or equipment to restrict a student's freedom of movement. The term does not include devices implemented by trained school personnel, or utilized by a student that has been prescribed by an appropriate medical or related service professional, and are used for the specific and approved positioning or protective purposes for which such devices were designed. Examples of such devices include: adaptive devices or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; vehicle safety restraints when used as intended during the transport of a student in a moving vehicle; restraints for medical immobilization; or orthopedically prescribed devices that permit a student to participate in activities without risk of harm.

Medication restraint shall mean the administration of medication for the purpose of temporarily controlling behavior. Medication prescribed by a licensed physical and authorized by the parent for administration in the school setting is not medication restraint.

Physical escort shall mean a temporary touching or holding of a student without the use of force, of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is agitated to walk to a safe location.

Physical restraint shall mean direct physical contact that prevents or significantly restricts a student's freedom of movement. Physical restraint does not include: brief physical contact to promote student safety, providing physical guidance or prompting when teaching a skill, redirecting attention, providing comfort, or physical escort.

Prone restraint shall mean a physical restraint in which a student is placed face down on the floor or another surface, and physical pressure is applied to the student's body to keep the student in the face-down position.

School working day shall mean a day or partial day that students are in attendance at the public education program for instructional purposes.

Seclusion shall mean the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving. The use of "time out" procedures during which a staff member remains accessible to the student shall not be considered a seclusion restraint.

Time-out shall mean a behavioral support strategy in which a student temporarily separates from the learning activity or the classroom, either by choice or by direction from staff, for the purpose of calming. The Dean of Students is responsible for implementing these procedures including approval if longer than 30 minutes. The guidelines for staff will be posted in the designated area. During time-out, a student will be observable by a staff member at all times. Staff shall directly observe the student every 15 minutes. The space used for the time-out must be unlocked, physically safe, clean, sanitary, and appropriate for the purpose of calming. Time-out shall cease as soon as the student has calmed. The Dean of Students will work with staff involved to document the length of time, reasons for this intervention, who approved the procedure and who directly observed the student every 15 minutes.

46.03 Use of Restraint

Schools are prohibited from:

1. Mechanical restraint, medication restraint, and seclusion,
2. Prone restraint, except on an individual student basis, and only under the following circumstances:
 - a. The student has a documented history of repeatedly causing serious self-injuries and/or injuries to other students or staff;
 - b. All other forms of physical restraints have failed to ensure the safety of the student and/or the safety of others;

- c. There are no medical contraindications as documented by a licensed physician;
- d. There is psychological or behavioral justification for the use of prone restraint and there are no psychological or behavioral contraindications, as documented by a licensed mental health professional;
- e. The program has obtained consent to use prone restraint in an emergency as set out in 603 CMR 46.03(2)(b), and such use has been approved in writing by the principal; and,
- f. The program has documented 603 CMR 46.03 (2) a-e in advance of the use of prone restraint and maintains the documentation.

3. All physical restraints, including prone restraint where permitted, shall be administered in compliance with 603 CMR 46.05.

Physical restraint shall not be used:

1. As a means of discipline or punishment;
2. When the student cannot be safely restrained because it is medically contraindicated for reasons including, but not limited to, asthma, seizures, a cardiac condition, obesity, bronchitis, communication-related disabilities, or risk of vomiting;
3. As a response to property destruction, disruption of school order, a student's refusal to comply with a public education program rule or staff directive, or verbal threats when those actions do not constitute a threat of assault, or imminent, serious, physical harm; or
4. As a standard response for any individual student. No written individual behavior plan or individualized education program (IEP) may include use of physical restraint as a standard response to any behavior. Physical restraint is an emergency procedure of last resort.

Physical restraint shall be limited to the use of such reasonable force as is necessary to protect a student or another member of the school community from assault or imminent, serious, physical harm.

46.04 Staff Training Requirements

HVM uses the Safety-Care® Behavioral Safety Training program to train selected staff members in the appropriate use of physical restraint. ***Only trained HVM staff or agents shall administer physical restraints on students.*** As stated in the Safety-Care® Behavioral Safety training packet: "*The Safety-Care® Behavioral Safety Training program provides the skills and competencies necessary to effectively prevent, minimize, and manage behavioral challenges with dignity, safety, and the possibility of change. Safety-Care provides the tools you need to be safe when working with behaviorally challenging individuals. Using up-to-date and effective technologies from Applied Behavior Analysis (ABA) and Positive Behavior Interventions & Supports (PBIS), the Safety-Care program will provide your staff with strategies for preventing and managing behavioral challenges, and teaching replacement*

behaviors. These strategies are appropriate for individuals experiencing developmental, neurologic, psychiatric, and other impairments. Safety-Care promotes a positive reinforcement-based approach, and the development of new skills, resulting in fewer restraints.” Appropriate procedures for preventing the need for physical restraint include the de-escalation of problematic behavior, and/or relationship building, such as:

- Utilizing an empathic, nonjudgmental approach upon noticing an increase or change in student behavior, (validating, acknowledging, offering comfort, giving space, listening and asking questions)
- Being direct (characterized by setting limits) upon noticing a further escalation in student behavior, (identify the behavior, explain why it is inappropriate, offer choices and options, allowing processing time) and/or
- Removing the student or other students to a more private and safe area in order for the student to de-escalate.

At the beginning of each new school year, the Executive Director shall provide information to all HVM staff members about the Safety-Care Behavioral Safety plan. Additionally, for all new HVM employees that are hired after the start of the school year, the Executive Director shall, upon hire, provide information about the Safety-Care Behavioral Safety plan. Faculty and staff will be informed who is on the Safety-Care Behavioral Safety team and who has received in-depth training pursuant to 603 CMR 46.00.

46.05 Proper Administration of a Physical Restraint

Whenever possible, the administration of a physical restraint shall be witnessed by at least one other adult who does not participate in the physical restraint. When administering a physical restraint, school personnel shall use only the amount of force necessary to protect the student or others from physical injury. Additionally, school personnel administering a physical restraint shall use the safest method available and appropriate to the situation pursuant to the safety requirements detailed below, and shall discontinue the restraint as soon as possible. Floor or prone restraints shall be prohibited unless the staff member administering the restraint has received in-depth training according to regulation 603 CMR 46.03(3) and the judgement of the trained staff member is that such method is required to provide safety for the student or others present.

Safety Requirements for the Use of Physical Restraints

No restraint shall be administered in such a way that the student is prevented from breathing or speaking. Additionally, restraint shall be administered in such a way so as to prevent or minimize physical harm. During the administration of a restraint, a staff member shall continuously monitor the physical status of the student, including skin temperature and color, and respiration. A restraint shall be released immediately upon a determination by the staff member that the student is no longer an immediate danger to him or herself or others, or the student indicates that he or she cannot breathe, or if the student is observed to be in severe distress such as having difficulty breathing or sustained or prolonged crying or coughing. If, at any time during a physical restraint, the student demonstrates or expresses significant physical distress including, but not limited to difficulty breathing, the student shall be released from the restraint immediately, and school staff shall seek

medical assistance. School personnel shall review and consider any known medical or psychological limitations and/or behavioral intervention plans regarding the use of physical restraint on an individual student.

For any restraint lasting for a period of longer than twenty (20) minutes, the program staff shall obtain the approval of the Dean of Students or their designee and approval shall be based upon the student's continued agitation during the restraint.

46.06 Follow-Up Procedures and Reporting Requirements

Following the release of a student from a restraint, HVM implements follow-up procedures which include: review of the incident with the student to address the behavior that precipitated the restraint; review of the incident with the staff who administered the restraint; consideration of the appropriate follow-up for students who witnessed the incident; and examination by the school nurse.

All restraints will be logged and shared with both the Dean of Students and the Executive Director of the school as soon as possible and no later than the next working school day.

Reasonable efforts will be made to verbally notify parents within **24 hours** of the event. Written notification to the parents/guardians regarding the use of the physical restraint will be provided within **three school working days**. Any parent who receives information from the school in another language shall be provided with this information in their native language. The student and parent will be given an opportunity to comment orally and in writing on the use of the restraint and on information written in the report. The attached "**Physical Restraint Form**" will be completed and signed by the Dean of Students.

A formal written report to the Department of Elementary and Secondary Education is required for all physical restraints which result in an injury to a student or HVM staff member. This report shall be postmarked no later than three school working days of the administration of the restraint. In addition, the Department of Elementary and Secondary Education will be provided with a copy of the record of physical restraints maintained by the Dean of Students for the thirty-day period prior to the date of the reported restraint.

All physical restraints will be reported to the Department of Elementary and Secondary Education annually.

Ongoing Review of Restraint Data

The Dean of Students shall review restraint data weekly. The information will be shared with the Executive Director and available to the Department of Elementary and Secondary Education if requested.

If there are multiple restraints in a week, a Student Success Team (SST) review will be convened to assess the student's progress and needs. The team review will include:

- Review and discussion of the written reports and any comments provided by the student and parent about such reports and the use of restraints,
- An analysis of the circumstances leading up to each restraint including factors such as time of day, day of week, antecedent events and individuals involved,

- Consideration of the factors that may have contributed to escalation behaviors, consideration of alternatives to restraint, including the de-escalation techniques and interventions, with the goal of reducing or eliminating the use of restraint in the future,
- Agreement on a written plan of action by the program.

The Dean of Students shall review the school-wide restraint data monthly. This data will include:

- Patterns
- The number and duration of restraints
- The number and types of injuries
- Determine if modifications to this policy and/or staff training on this policy is necessary

Complaints Regarding Restraint Practices

A student or his/her parent/guardian who has concerns regarding a specific use of a physical restraint should discuss and seek to resolve his/her concerns with the Dean of Students or designee within ten (10) days of the parent/guardian's receipt of the written report from the school detailing the administered physical restraint. The Dean of Students or designee, within their authority, shall attempt to work with the individual(s) to resolve the complaint fairly and expeditiously. If the student and/or his/her parent/guardian are not satisfied with the resolution, then the student and/or his/her parent/guardian may proceed with the formal complaint process detailed below.

A student or his/her parent/guardian who has a complaint regarding a specific use of a physical restraint may submit a written complaint to the HVM Executive Director. This letter should be submitted to the Executive Director within twenty (20) days of the parent/guardian's receipt of the written report from the school and include the following:

- The name of the student
- The name of the individuals involved in the physical restraint, if known
- The basis of the complaint or concern
- The corrective action being sought.

The Executive Director or his/her designees shall conduct an investigation into the complaint in a timely manner upon receipt. The Executive Director or his/her designee shall write a report regarding the merits of the complaint and a proposed resolution and will send the report to the individual submitting the complaint. A parent or guardian may appeal the decision to the Executive Director to the Board of Trustees.

Policy and Data Review

The Executive Director shall annually review this policy and its procedures.

Hill View Montessori Charter Public School

Physical Restraint Reporting Form

All physical restraints will be formally recorded no later than the next working school day and distributed to the Executive Director and the Dean of Students. Parents will be notified verbally within 24 hours, and in writing within three working school days.

IDENTIFYING INFO

Name of Person Filling out Form/ Restraint Administrator: (and position):

Observers or other personnel involved in the incident (and position):

Today's Date:

Date of Event (if different):

Location of Incident:

Student Name:

RESTRAINT INFO

Description of activity immediately preceding the event:

Behavior that prompted the event:

Efforts made to de-escalate/attempted alternatives including specific de-escalation strategies used and alternatives attempted:

Reason for Restraint:

- Non-physical interventions were unsuccessful
- Protect student from imminent, serious physical harm
- Protect other(s) from imminent, serious, physical harm

Description of Hold:

Beginning Restraint Time:

Ending Time:

Length of Hold:

How did the restraint end?

- Staff determination that student no longer at risk to himself or others
- Intervention by others
- Law enforcement arrival
- Medical assistance
- Other _____

