# Arkansas Department of Education Special Education Unit

Courtney Salas-Ford, Attorney

#### Restraint and Seclusion of Students in Arkansas Public Schools

- ADE Special Education and Related Services, Procedural Requirements, Section 20.00
  Time-Out Seclusion Room
- ADE formed a committee to research the issue of restraint of students and draft guidelines for proposal to ADE administration.
- The committee met from November 2012 until May 2013.
- A final draft was submitted to the committee members in June 2013 for final approval.

#### **Committee Members**

- Vicki Holt, AASEA, Conway SD LEA
- Sandy Wortham, AAEA, Valley View LEA
- Donna Morey, AEA, Board President
- Wanda Horton, Arkansas Disability Coalition (PTI), Director
- Kimberly Parker, Parent and Advocate
- Kristen Gould, ASBA, Attorney
- Dr. Howard Knoff, SPDG, Director
- Jennifer Gonzales, SPDG, PBS Coordinator
- Dr. Tracy Tucker, ADE Director of Curriculum & Instruction
- Chris Ewing, Behavior Intervention Consultant
- Kathryn Duncan, Special Ed Teacher, Ft. Smith SD
- Courtney Salas-Ford, ADE Special Ed Unit Attorney

## Committee Research

- Federal guidance and proposed legislation:
  - Restraint and Seclusion: Resource Document (2012)
  - Keeping All Students Safe Act, H.B. 1381 (2011)
  - Keeping All Students Safe Act, S.B. 2020 (2011)
- State statutes and regulations:
  - Kentucky, Wisconsin, Vermont, Massachusetts, Utah, Maine, Ohio, Minnesota, Oregon and Florida
- Arkansas school district policies and practices:
  - Bryant, Ft. Smith, Bentonville, Conway, and Valley View

# ADE Advisory Guidelines for the Use of Student Restraints in Public School or Educational Settings

- Restraint should only be used in an emergency situation and as a last resort by a trained individual authorized by school district administration.
- Physical restraint should not be used except in situations where the student's behavior poses imminent danger of serious physical harm to self or others, and it should be discontinued as soon as the imminent danger has dissipated.
- Chemical and mechanical restraint should never be used in a school setting.

Serious physical harm – bodily injury which involves a substantial risk of death, extreme physical pain, protracted and obvious disfigurement, or protracted loss or impairment of the function of a bodily member, organ, or mental faculty. 18 USC Sec. 1365(h)

Physical restraint – a personal restriction that immobilizes or reduces the ability of a student to move his or her torso, arms, legs, or head freely. This does not include a physical escort. 42 USC 290jj(d)(3)

Physical escort – a temporary touching or holding of the hand, wrist, arm, shoulder, or back for the purpose of redirecting or inducing a student to move to a safe location. 42 USC 290jj(d)(2)

Chemical restraint – the use of a drug or medication to control a student's behavior or restrict his freedom of movement. This does not include medications prescribed by a licensed physician, or other qualified health professional acting under the scope of the professional's authority under state law, for the standard treatment of a student's medical or psychiatric condition, and administered as prescribed by the licensed physician or other qualified health professional acting under the scope of the professional's authority under state law. (Keeping All Students Safe Act, H.B. 1381 (2011))

Mechanical restraint – the use of any device or equipment to restrict a student's freedom of movement. 42 USC 290jj(d)(1). This does not include devices used by trained school personnel, or used by a student, for the specific and approved therapeutic or safety purposes for which such devices were designed and, if applicable, prescribed, nor does it include vehicle safety restraints when used as intended during the transport of a student in a moving vehicle. (Keeping All Students Safe Act, S.B. 2020 (2011)) (The use of a weighted vest, bean bag chair, muffling earphones, or deep pressure/sensory stimulation, are examples of devices that should be included in the IEP if necessary and prescribed by a licensed physician or other qualified health professional acting under the scope of the professional's authority under state law.)

#### Prevention

- Positive Behavioral Supports
- SPRINT Team
- FBAs and BIPs

#### Guidelines for proper use

- Do not use if medically contraindicated
- Do not use as punishment or discipline
- Do not use to prevent property damage unless accompanied by imminent danger of serious physical harm
- Restraints should only be administered by trained personnel

#### Documentation / Notification / Debriefing

- ADE recommended Physical Restraint/Seclusion Incident Record and Debriefing Report
- Verbal or electronic communication to parent within 24 hours
- Debriefing meeting within 2 school days
- Debriefing report to parent(s) within 2 school days after meeting

#### Personnel training

- Positive behavior interventions and strategies
- Crisis prevention and response
- De-escalation strategies
- Physical restraint training for core team

#### Training program criteria

- Evidence-based prevention techniques
- Evidence-based skills training
- Competency-based, measurable objectives
- Minimum biennial re-certification

#### Data collection and reporting\*

- Annual reporting to ADE for each incident
- Notice within one school day of death or serious physical harm of student



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