The Board is committed to the District-wide use of Positive Behavior Intervention and Supports with students, and to limit the use of restraint and seclusion by student personnel. “Student” means a child or adult aged three to twenty-one enrolled in the district. “Student personnel” means teacher, principal, counselor, social worker, school resource officer, teacher’s aide, psychologist or other school district staff who interacts directly with students.

**POSITIVE BEHAVIOR INTERVENTIONS AND SUPPORTS**

“Positive Behavior Interventions and Supports” (“PBIS”) means

(1) a school-wide systematic approach to embed evidence-based practices and data-driven decision-making to improve school climate and culture in order to achieve improved academic and social outcomes, and increase learning for all students, and that

(2) PBIS encompasses a range of systemic and individualized positive strategies to reinforce desired behaviors, diminish reoccurrences of challenging behaviors, and teach appropriate behavior to students.

Training in methods of PBIS will be provided to all professional staff and support staff deemed appropriate by the Superintendent. PBIS shall include:

(1) Trained school staff who will identify conditions such as where, under what circumstances, with whom, and why specific inappropriate behavior may occur.

(2) Preventative assessments that include review of existing data, interviews with parents, family members, and students, and examination of previous and existing behavioral intervention plans.

(3) Development and implementation of preventative behavioral interventions, and the teaching of appropriate behavior, including modification of environmental factors that escalate inappropriate behavior, supporting the attainment of appropriate behavior, and use of verbal de-escalation to defuse potentially violent, dangerous behavior.

The Superintendent or designee shall develop emergency procedures for the District which shall be part of the District’s Safety Plan.

**RERAINT**

“Physical restraint” means the use of physical contact in a way that immobilizes or reduces the ability of an individual to move the individual’s arms, legs, body, or head freely. Such term does not include a physical escort, mechanical restraint, or chemical restraint. Physical restraint does not include brief physical contact for the following or similar purposes:
(1) To break up a fight;
(2) To knock a weapon away from a student’s possession;
(3) To calm or comfort;
(4) To assist a student in completing a task/response if the student does not resist the contact; or
(5) To prevent an impulsive behavior that threatens the student’s immediate safety (e.g., running in front of a car).

“Physical escort” means the temporary touching or holding of the hand, wrist, arm, shoulder, waist, hip or back for the purpose of inducing a student to move to a safe location.

“Mechanical restraint” means

(1) any method of restricting a student’s freedom of movement, physical activity or normal use of the student’s body by using an appliance or device manufactured for this purpose but

(2) does not mean a device used by trained school personnel, or used by a student, for the specific and approved therapeutic or safety purpose for which the device was designed and, if applicable, prescribed, including:

a. restraints for medical immobilization,

b. adaptive devices or mechanical supports used to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; or

c. vehicle safety restraints when used as intended during the transport of a student in a moving vehicle.

“Chemical restraint” means a drug or medication used to control a student’s behavior or restrict freedom of movement that is not:

(1) prescribed by a licensed physician, or other qualified health professional acting under the scope of the professional’s authority under Ohio law, for the standard treatment of a student’s medical or psychiatric condition; and

(2) administered as prescribed by the licensed physician or other qualified health professional acting under the scope of the professional’s authority under Ohio law.
Physical restraint may be used only if:

(1) A student’s behavior poses an immediate risk of physical harm to the student or others and no other safe or effective intervention is available;

(2) The physical restraint does not obstruct the student’s ability to breathe;

(3) The physical restraint does not interfere with the student’s ability to communicate in the student’s primary language or mode of communication; and

(4) By school personnel who are trained in safe restraint techniques, except in the case of rare and unavoidable emergency situations when trained personnel are not immediately available.

If a staff member uses physical restraint, the staff member must:

(1) Be appropriately trained to protect the care, welfare, dignity, and safety of the student, except in the case of rare and unavoidable emergency situations when trained personnel are not immediately available;

(2) Continually observe the student in restraint for indications of physical or mental distress and seek immediate medical assistance if there is a concern;

(3) Use verbal strategies and research-based de-escalation techniques in an effort to help the student regain control as quickly as possible;

(4) Remove the student from physical restraint immediately when the immediate risk of physical harm to the student and/or others has dissipated;

(5) Conduct a debriefing including all involved staff to evaluate the trigger for the incident, staff response, and methods to address the student’s behavioral needs; and

(6) Complete all required reports and document their observations of the student.

Physical restraint may not be used for punishment or discipline or as a substitute for other less restrictive means of assisting a student in regaining control.

SECLUSION

“Seclusion” means the involuntary isolation of a student in a room, enclosure, or space from which the student is prevented from leaving by physical restraint or by a closed door or other physical barrier.

Seclusion may be used only under the following conditions:

(1) If a student’s behavior poses an immediate risk of physical harm to the student or others and no other safe or effective intervention is available;
(2) As a last resort to provide an opportunity for the student to regain control of his/her actions;

(3) For the minimum amount of time necessary for the purpose of protecting the student and others from physical harm;

(4) In a room or area that is not locked;

(5) Does not prevent the student from exiting the area should staff become incapacitated or leave the area;

(6) Provides adequate space, lighting, ventilation and the ability to observe the student; and

(7) Under constant supervision by staff who are trained to be able to detect indications of physical or mental distress that requires removal and/or immediate medical assistance and who document their observations of the student.

If a staff member uses seclusion, the staff member must:

(1) Be appropriately trained to protect the care, welfare, dignity, and safety of the student, except in the case of rare and unavoidable emergency situations when trained personnel are not immediately available;

(2) Continually observe the student in seclusion for indications of physical or mental distress and seek immediate medical assistance if there is a concern;

(3) Use verbal strategies and research-based de-escalation techniques in an effort to help the student regain control as quickly as possible;

(4) Remove the student when the immediate risk of physical harm to the student and/or others has dissipated;

(5) Conduct a debriefing including all involved staff to evaluate the trigger for the incident, staff response, and methods to address the student's behavioral needs; and

(6) Complete all required reports and document their observations of the student.

Seclusion may not be used for punishment or discipline, for the convenience of staff, as a substitute for inadequate staffing, as a substitute for staff training in PBIS, as a substitute for an educational program or other less restrictive means of assisting a student in regaining control, or as a means to coerce, retaliate, or in a manner that endangers a student.

**PROHIBITED PRACTICES**

The following practices are prohibited by school personnel under any circumstance:
1. Prone restraint. “Prone restraint” means the physical or mechanical restraint while the individual is in the face-down position for an extended period of time.

2. Any form of physical restraint that involves the intentional, knowing or reckless use of any technique that involves:

   a. the use of any method that is capable of causing loss of consciousness or harm to the neck or restricting respiration in any way,

   b. the use of pinning down a student by placing knees to the torso, head or neck of the student,

   c. the use of pressure point, pain compliance or joint manipulation techniques,

   d. dragging or lifting of the student by the hair or ear or by any type of mechanical restraint,

   e. the use of other students or untrained staff to assist with the hold or restraint except in the case of rare and unavoidable emergency situations when trained staff are unavailable,

   f. securing a student to another student or to a fixed object, or

   g. techniques that are used to unnecessarily cause pain.

3. Corporal punishment.

4. Child endangerment, as defined by Ohio Revised Code Section 2919.22.

5. Deprivation of basic needs.


7. Chemical restraint.

8. Mechanical restraint (that does not include devices used by trained school personnel, or by a student, for the specific and approved therapeutic or safety purposes for which such devices were designed and, if applicable, prescribed).

9. Aversive behavioral interventions. “Aversive behavioral interventions” means an intervention that is intended to induce pain or discomfort to a student for the purpose of eliminating or reducing maladaptive behaviors, including such interventions as application of noxious, painful and/or intrusive stimuli, including any form of noxious, painful or intrusive spray, inhalant or taste.

10. Seclusion in a locked room or area.
REPEATED DANGEROUS BEHAVIORS

If a student repeatedly engages in dangerous behavior that leads to instances of restraint and/or seclusion, the District shall conduct a functional behavioral assessment to identify the student’s needs and more effective ways of addressing those needs. If necessary, the functional behavioral assessment will be followed by a behavioral intervention plan that incorporates appropriate positive behavioral interventions.

TRAINING AND PROFESSIONAL DEVELOPMENT

The District will train an appropriate number of personnel in each building in crisis management and de-escalation techniques. The District will maintain written or electronic documentation of training provided and lists of participants in each training session.

REPORTING AND NOTIFICATION

Any incident of seclusion or restraint will be immediately reported to the building administrator and the student’s parent. Any incident of seclusion or restraint will be documented in a written report, which is made available to the student’s parent within 24 hours, with a copy placed in the student’s file. The District will maintain written reports of seclusion or restraint. These reports are educational records under the Family Education Rights and Privacy Act.

“Parent,” for purposes of this policy, means (a) a biological or adoptive parent; (b) a guardian generally authorized to act as the child’s parent, or authorized to make decisions for the child (but not the state if the child is a ward of the state; (c) an individual acting in the place of a biological or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child’s welfare (d) a surrogate parent who has been appointed in accordance with paragraph (E) of rule 3301-51-05 of the Administrative Code, or (e) any person identified in a judicial decree or order as the parent of a child or the person with authority to make educational decisions on behalf of a child.

MONITORING

The Superintendent or designee will review the implementation of this policy, and the reports related to restraint and seclusion on an annual basis.

The District will annually report information concerning the use of restraint and seclusion to the Ohio Department of Education in the form and manner as prescribed by the department, and shall make its records concerning restraint and seclusion available to staff of the department upon request.

COMPLAINT PROCESSES

A parent may present a written complaint to the Director of Special Services and Elementary Curriculum to initiate a complaint investigation by the district regarding an incident of restraint or seclusion. The Director of Special Services and Elementary Curriculum shall respond to the
The parent of a student with a disability may choose to file a complaint with the Ohio Department of Education, Office for Exceptional Children, in accordance with the complaint procedures available concerning students with disabilities.

Adoption date: August 15, 2013

LEGAL REF.: ORC 2919.22
OAC 3301-35-15
OAC 3301-37-10

CROSS REFS.: IGBA, Programs for Students with Disabilities JF, Student Rights and Responsibilities JGA, Corporal Punishment JH, Student Welfare JHF, Student Safety