

In accordance with Minn. Stat. § 125A.0941 and § 125A.0942 as amended effective 07/01/13, every school district is required to develop and make publicly accessible in an electronic format on a school or district website or make a paper copy available upon request, a plan that discloses its use of restrictive procedures with special education students. The plan must list the restrictive procedures that the school district intends to use; describe how the school district will implement a range of positive behavior strategies and provide links to mental health services, describe how the school district will monitor and review the use of restrictive procedures, including post-use debriefings and 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 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 procedures is used school-wide 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 includes a written description and documentation of the training any staff members who will be using restrictive procedures have completed to show they have the skills set out in Minn. Stat. § 125A.0942, subd. 5.

This document can be found at the Beacon Academy website at:

<http://www.beaconacademy.com/>

Restrictive Procedures

Beacon Academy uses restrictive procedures only in emergency situations. “Emergency” means a situation where immediate intervention is needed to protect a student or other individuals 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 must not be used to punish or otherwise discipline a child.

- **Restrictive Procedures Used:** The restrictive procedure that authorized Beacon Academy staff may use in an emergency situation is **physical holding**.



Physical holding is a physical intervention intended to hold a student immobile or limit a student's movement, where body contact is the only source of physical restraint, and where immobilization is used to effectively gain control of a student in order to protect a student or other individual from physical injury.

The physical holding must: (1) be the least intrusive intervention that effectively responds to the emergency; (2) not be used to discipline a noncompliant student; (3) end when the threat of harm ends and the staff determines the child can safely return to the classroom or activity; (4) be observed directly by staff while the physical holding is being used; and (5) be documented as soon as possible after the incident concludes by the person who implemented the physical hold or oversaw the hold.

The term physical holding does **not** mean physical contact that: helps the child respond or complete a task, assisting a child without restricting the child's movement, is needed to administer and authorized health related service or procedure, or is needed to physically escort a child when the child does not resist or the child's resistance is minimal.

Beacon Academy intends to use physical hold techniques consistent with [Crisis Prevention Institute \(CPI Training\)](#). Key staff at Beacon Academy has been trained in CPI. CPI training emphasizes the use of de-escalation techniques to avoid the use of physical restraint whenever possible. This is consistent with the practices and principles of Beacon Academy.

Restrictive Procedures Not Used: Beacon Academy does not use the following restrictive procedures:

- a. Seclusion: confining a student alone in a room from which egress is barred, including by an adult locking or closing the door in the room or preventing the student from leaving the room. Removing a student from an activity to a location where the student cannot participate in or observe the activity is not seclusion if the student is not confined alone in a room from which egress is barred.
- b. Prone Restraint: placing a student in a face down position.

Mechanical Restraint: Physical holding does not include the use of mechanical restraints for transportation, sensory needs, or medical needs as these procedures are documented in the student's Individual Education Program (IEP). An example is the use of a seat belt on the bus.

Prohibited Procedures: Beacon Academy will not use any of the following prohibited procedures:

- 1) engaging in conduct prohibited under section Minnesota Statute [121A.58](#);
- (2) requiring a child to assume and maintain a specified physical position, activity, or posture that induces physical pain;
- (3) totally or partially restricting a child's senses as punishment;
- (4) presenting an intense sound, light, or other sensory stimuli using smell, taste, substance, or spray as punishment;
- (5) 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;
- (6) interacting with a child in a manner that constitutes sexual abuse, neglect, or physical abuse under section Minnesota Statute 626.556;



- (7) withholding regularly scheduled meals or water;
- (8) denying access to bathroom facilities; and
- (9) 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.

Range of Positive Behavior Strategies Used at Beacon Academy

Beacon Academy will only use physical holds in emergency situations. Beacon Academy staff implements a range of positive behavior strategies as a proactive approach to teaching positive behavior skills to students, thereby reducing the need for the use of physical holds. These positive behavior strategies include:

- [Responsive Classroom](#) positive behavioral intervention strategies
- Redirection
- Correction
- Staff escort to buddy room break
- Allow student to go to safe place to relax/regroup (take a break)
- Peer mediation with staff
- Peer mediation with peer
- Non-Verbal Cues
- Verbal de-escalation
- Process with staff and/or administration
- Exit peers from the classroom/situation
- Offer alternative activities
- Offer sensory tools or breaks
- Social skills practice
- Proximity control
- Transition student to alternative administrator
- Working with a team to create a behavior plan
- Restorative Justice Room
- Second Step
- Zones of Regulation



To obtain services or a referral to a service provider, the family should contact their primary care clinic, physician or insurance provider. Listed below are links to mental health resources in the community:

- Hennepin County Children's Mental Health Services (612) 348-4111
<http://www.hennepin.us/residents/health-medical/childrens-mental-health-services>
- The Family Partnership (612) 339-9101
<http://www.thefamilypartnership.org>
- North Point Health and Wellness Center (612) 543-2500
www.northpointhealth.org
- African American Family Service (612) 871-7878
<http://www.aafs.net>
- Nystrom & Associates (In Home Counseling) (651) 628-9566
<https://www.nystromcounseling.com>
- Washburn Center for Children (612) 871-1454
<mailto:https://washburn.org/contact-us/>
- [Minnesota Warmline: 651-288-0400](tel:651-288-0400) [Peer Support Connections Warmlines: 1-844-739-6369](tel:1-844-739-6369)

The following provide general information about mental health issues and provide access to a variety of resources:

- Minnesota Association for Children's Mental Health (MACMH) 1-800-528-4511
<http://www.macmh.org/>
- National Alliance on Mental Illness – MN Division 1-888-626-4435
<http://www.namihelps.org/>
- The Children's Mental Health Division at the MN Department of Human Services
http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_000162
- [Minnesota Mental Health Emergency Resources](#)
- [Youth Suicide Warning Signs](#)
- [SAVE- Suicide Awareness Voices of Education](#)
- [Teen Line Online](#)
- [National Suicide Prevention Lifeline](#) 1-800-273-8255
- [Prevention Lifeline: 1-800-273-8255](#)
- [Crisis Text Line: text "HOME" to 741741](#)
- [Hennepin County Crisis Response: 612-348-2233](#)
- [The Trevor Lifeline \(for LGBTQ youth\): 1-866-488-7386](#)
- [Trans Lifeline: 1-877-565-8860](#)



Monitoring the Use of Restrictive Procedures at Beacon Academy

Who May Use Restrictive Procedures

Restrictive procedures may be used in emergency situations only by staff who have been properly trained in the skills and knowledge areas described in Minn. Stat. § 125A.0942, subd. 5, which are set out subsequently in this plan. Staff may include the following:

Licensed special education teacher

Licensed teacher

Administrator

School social worker

Other licensed education professional

Paraprofessional

Procedures When a Restrictive Procedure is Used

1. Internal Communication: Following a physical restraint, the qualified staff member who uses the restrictive procedure, is responsible to inform the appropriate administrators via e-mail. The appropriate administrators include: Dean of Students, School Social Worker, Special Education Coordinator and Principal. Within the e-mail the staff member will list multiple available times for the debriefing meeting.

2. Reporting Use of Restrictive Procedure: The staff person who implements the restrictive procedure shall inform the appropriate administrator/staff member of the use of the restrictive procedure immediately and shall complete the restrictive procedures report form no later than the end of the working day. If the staff person who implements the physical hold is not the student's IEP manager, the IEP manager also needs to be informed immediately and will participate in completion of the *Use of Restrictive Procedure: Physical Hold* reporting form.

See Attachment A: *Use of Restrictive Procedure: Physical Hold* reporting form. The restrictive procedures report form includes:

- a) A description of the incident that led to the use of the restrictive procedure;
- b) A description of why a less restrictive measure failed or was determined by staff to be inappropriate or impractical;
- c) The time the restrictive procedure began and the time the student was released from the hold; and
- d) A brief record of the student's behavioral and physical status during and after the use of the restrictive procedure.

3. Parent Notification: School staff will make reasonable efforts to notify the parent by phone on the same day a restrictive procedure is used on the student. If staff are unable to provide same-day notice by phone, notice is sent to the parent in a written parent letter or electronic format (e-mail) within two (2) days of the procedure being used or as otherwise indicated in the student's IEP. This notification is documented on the *Use of Restrictive Procedure: Physical Hold* reporting form

4. Staff Debriefing after Using a Restrictive Procedure: The staff involved in using the restrictive procedure are required to debrief after every use of a restrictive procedure. The IEP manager must be at the meeting even if he/she was not engaged in the hold. This debriefing could include completing and discussing the restrictive procedures reporting form. A building administrator is required to attend the debriefing and conduct a review of the completed restrictive procedures reporting form.

The IEP manager team member will print out the completed *Use of Restrictive Procedure: Physical Hold* form and give to the Special Education Administrative Assistant to file in the student's due process file and to maintain the file for annual reporting of use of restrictive procedures. The file will be reviewed at each quarterly oversight committee meeting.

See Attachment B: *Staff Debriefing Form* used to record the Debriefing meeting.

5. Including Plan for Use of a Restrictive Procedure in Student's IEP: A student's IEP team may include a plan for using a restrictive procedure in the student's IEP but may only use the restrictive procedure in situations that constitute an emergency. If a plan is included in the student's IEP, the IEP must also indicate how the parent wants to be notified when a restrictive procedure is used. The district must review use of restrictive procedures at a student's annual IEP meeting when the student's IEP provides for using restrictive procedures in an emergency.

6. Use of Restrictive Procedure Twice in 30 Days: If a restrictive procedure is used on two separate days within 30 calendar days or if a pattern of use of the restrictive procedure emerges and the student's IEP or behavior intervention plan does not provide for using restrictive procedures in an emergency, the district must hold an IEP meeting within ten (10) calendar days after district staff use the second restrictive procedure. This meeting can also be requested by the parent or the district after restrictive procedures have been used. At this meeting the team must:

- a. Review the student's Functional Behavior Assessment (FBA);
- b. Review other data connected to the behavior(s) that prompted the use of the restrictive procedure;
- c. Consider developing additional or revised positive behavioral interventions and supports;
- d. Consider actions that could be taken to reduce the use of restrictive procedures;
- e. Consider developing a Behavior Intervention Plan (BIP) or modifying an existing BIP or consider other revisions to the student's IEP;
- f. Review any known medical or psychological limitations, including any medical information the parent provided voluntarily, that contraindicate the use of a restrictive procedure; and
- g. Consider whether to prohibit a restrictive procedure and, if so, document any prohibition in the student's IEP.

→ 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 10 or more school days during the same school year, the team, as appropriate, either must consult with other professionals working with the student; 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 student.

Summary of When an IEP Team Meeting is Required

- a. When an emergency procedure is used twice in 30 days - within 10 days of the 2nd incident, whether the procedure is in the IEP or not.
- b. If a pattern of use of the emergency procedure emerges, whether it is in the IEP or not.
- c. If the procedure is used on 10 or more days during the year and must meet to consider bringing in an expert (as identified in subsection under 6 above) or re-evaluate the student and conduct new functional behavior assessment.
- d. If the student 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 team must consider if the IEP is adequate or determine if additional evaluation is needed.

Oversight Committee

At least quarterly, provided that at least one use of a restrictive procedure has occurred since the last quarterly meeting, the District will convene an oversight committee meeting, which includes an agenda and minutes. The district will review the membership annually. Minimally, the oversight committee must include at least the following individuals:

- A mental health professional, school psychologist, or school social worker
- An expert in positive behavior strategies
- Special education administrator
- General education administrator

The Oversight Committee meetings will be held during the following months: August, November, February, May. The oversight committee will review the aggregate data on the use of restrictive procedures in the District. Included in this review will be:

- Examination of 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 school-wide 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;
- Whether additional staff training on behavior interventions and restrictive procedures is needed; and
- Proposed actions to minimize the use of restrictive procedures.



Annual Professional Development

Staff members who use or who could potentially use restrictive procedures based on the nature of the students with whom they work shall complete training in the following skills and knowledge areas:

1. Positive behavior interventions;
2. Communicative intent of behaviors;
3. Relationship building;
4. Alternatives to restrictive procedures, including techniques to identify events 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. The physiological and psychological impact of physical holding and seclusion;
9. Monitoring/responding to a student'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. School-wide programs on positive behavior strategies.

The District will maintain records of all trainings and training participants to ensure that staff meet the twelve skill and knowledge areas described above. The principal's administrative assistant maintains all staff development records and calendar.

Nothing in this plan precludes the use of reasonable force as allowed under Minn. Stat. §§ 121A.582, 609.06, subd. 1, and 609.379 (these laws are set out in Attachment C).