



Model Restraint and Seclusion Policy

Girls Global Academy PCS policy is designed to ensure that our students, regardless of disability status, are free from unreasonable use of physical restraint or seclusion, that any use of those interventions complies with OSSE's regulations and US Department of Education guidance and are used only in emergency circumstances when needed to protect the student or other students and staff from imminent, serious physical harm, and that such use is administered so as to prevent harm to the student.

Every effort will be made to prevent the use of restraint. Any behavioral intervention put in place at Girls Global Academy must be consistent with the child's rights to be treated with dignity and to be free from abuse.

ESTABLISHMENT AND TRAINING OF CRISIS TEAM

At the start of the school year, a Crisis Team will be established and members of that team will be trained and certified in the appropriate use of specific, evidence-based crisis management techniques. Training will include:

- Use of positive behavior supports and interventions
- An emphasis on verbal de-escalation – reducing tension and causing a situation to become more controlled, calmer, and less dangerous
- Use of non-restrictive interventions, such as how to safely evacuate bystanders, remove environmental threats, and use disengagement techniques (techniques which allow staff to protect themselves from physical harm without use of restrictive interventions)
- The safe administration of restrictive physical interventions. Training will also include understanding the physical and psychological risks associated with restraint, and how to recognize signs of physical or psychological distress.

Only staff who are trained and certified in the use of evidence-based techniques may administer physical restraint. Copies of staff training certifications will be maintained.

All crisis team members must maintain up-to-date certification in accordance with the training requirements of their certification program.

In the event that an untrained staff member or school-based contractor is involved in use of a physical restraint, that staff member will receive training and certification in crisis management, as outlined above, within 7 business days of the incident.

EMERGENCY SITUATIONS AND RISK OF IMMINENT PHYSICAL HARM

Restraint and seclusion may only be used as a last resort in emergency situations when:

- The intervention is believed reasonably necessary to protect the student or other person from imminent, serious physical harm.
- Other less intrusive, non-physical interventions, including but not limited to verbal de-escalation, removal of others from the environment, removal of potentially harmful objects, and use of disengagement strategies have been attempted and failed, or have been determined inappropriate because serious physical harm would occur without immediate physical intervention.

Restraint or seclusion are never to be used in non-emergency situations, or in the following circumstances:

- Physical restraint and seclusion are prohibited as a response to property destruction, disruption of school order, a student's refusal to follow school rules or staff directions, or inappropriate language that does not constitute a threat of imminent, serious physical harm. A verbal threat or verbally aggressive behavior does not in itself constitute a risk of imminent, serious physical harm.
- Restraint and seclusion will never be used to discipline or "correct" a student's behavior. They cannot be used as punishments or to coerce a child into complying, for staff convenience, or as a form of retaliation by staff.

RESTRAINT

Physical restraint is defined as the use of bodily force to limit a student's freedom of movement, including immobilizing or reducing the ability of a student to move their torso, arms, legs, or head freely. "Therapeutic holds" are considered physical restraints.

Physical restraint does not include a physical escort (i.e. temporarily touching or holding a student's hand, wrist, arm, shoulder, or back for the purpose of assisting a student in moving to a safe location).

Prohibited Restraints

The use of mechanical or chemical restraints may never be used to control a child's behavior or restrict their movement. Mechanical and chemical restraints, along with supine or prone restraints or any restraint on the floor or that restricts a child's breathing, are categorically unsafe and are **strictly prohibited**:

- A mechanical restraint is the use of a physical device (i.e. tape, ropes, straps or belts, weights, handcuffs, or similar items) to restrict the movement of a child or the movement or normal function of a portion of their body. A physician-ordered protective or stabilizing device is not considered a mechanical restraint when used appropriately for the specific purpose for which it was prescribed.
- A chemical restraint is the use of any medication or drug to control a student's behavior or restrict freedom of movement. A medication or drug ordered by a licensed physician as part of an ongoing medical treatment plan or determined by a licensed physician to be medically necessary is not considered a chemical restraint, if voluntarily taken in accordance with physicians' instructions and with parental permission.
- A prone restraint is the use of force, physical device, or both, to hold a child face down or stomach down on the floor.
- A supine restraint is restraining a student face up on their back or on a horizontal surface such as a floor or table.

Physical restraint will not be used if the student has a known physical or psychological condition, including history of trauma, that would make use of restraint inadvisable or harmful.

Use of Physical Restraint

Only staff trained and certified in the appropriate use of specific, evidence-based techniques may administer physical restraint during emergency situations involving threat of imminent, serious physical harm.

The use of physical restraints in cases of an emergency shall be limited to the use of **the least amount of force necessary** to protect the student or other person from imminent, serious physical harm.

- The restraint will be limited to the shortest time period necessary and will end as soon as the student and other people are no longer in imminent danger;

- Staff will provide the student with a developmentally appropriate explanation of the behavior that resulted in the restraint and instructions on the behavior required to be released from the restraint.
- Staff will personally observe the student during the entire duration of the restraint in order to assess the need for continued restraint.
- Physical restraint shall not be administered in such a way that the student's breathing or speaking is restricted. During the restraint, staff members will continuously monitor the physical status of the student, including skin color and respiration, as well as monitor for signs of increased emotional distress.
- A staff member shall continuously assess the student to determine that they are able to speak and breathe freely, or if medical attention is required.
- If at any time during the restraint the student displays signs of significant physical distress, the restraint will be immediately terminated and medical assistance sought. If the student displays increased emotional distress, staff must assess whether the level of physical restraint can be safely reduced or terminated and provide emotional support to the student.
- If the student uses sign language or an augmentative mode of primary communication, the student shall be permitted to have their hands free of restraint for brief periods, unless trained staff determines that such freedom appears likely to result in harm to self or others. The restraint shall end as soon as the student is no longer at risk of causing imminent, serious physical harm
- During a restraint, staff will continue to talk to and engage the student in an attempt to de-escalate behavior and to end the restraint as soon as possible.
- The restraint shall be released immediately upon a determination by the staff member that the student is no longer at risk of causing imminent, serious physical harm. Staff do not need to wait until the student is completely calm prior to releasing the restraint, as long as imminent, serious physical danger is no longer present.
- To the greatest degree possible, another adult who does not participate in the restraint should carefully and continuously visually monitor the administration of a restraint to assist in determining whether the restraint remains necessary, assess the student's condition, and ensure the appropriateness of its use and safety of the child, other children, teachers, and other personnel.

SECLUSION

Seclusion means the involuntary confinement of a student alone in a room or area from which they are physically prevented from leaving, or from which the child believes they may not leave, whether or not in a locked area.

Seclusion does not include a time out or similar behavior management technique that may involve the separation of the student from the group, in an unlocked setting, for the purpose of calming.

Students may not be secluded except in emergency circumstances in which this intervention is reasonably believed necessary to protect the student or other persons from risk of imminent, serious physical harm, and may only be used by staff who are trained and certified in the appropriate use of specific, evidence-based techniques.

In the event of seclusion, staff will at all times remain within sight of the student and be able to view the student continuously. The use of video-monitoring is not sufficient to meet this monitoring requirement.

Staff will provide the student with a developmentally-appropriate explanation of the behavior that resulted in the seclusion and instructions on the behavior required to be released from the seclusion.

Seclusion will end as soon as the student no longer poses a threat of imminent, serious physical harm to others.

- Staff will personally observe the student during the entire duration of the use of the seclusion in order to assess the need for continued seclusion and will speak with the student every ten (10) minutes at a minimum. After thirty (30) minutes, the Principal, Assistant Principal, Dean of Students or Special Education Coordinator will personally observe the student to assess the need for continued seclusion. No seclusion shall continue longer than one (1) hour.
- Seclusion should not be used if the student has a known psychological condition that contraindicates use of restraint.

Seclusion Spaces

The use of a locked door in the seclusion room is prohibited. A space used for seclusion must, at a minimum, meet these standards:

- Be free of objects and fixtures with which a student could self-inflict bodily harm;

- Provide school staff with an adequate view of the student from an adjacent area for the full duration of the seclusion;
- Be of reasonable size to permit the student to lie or sit down;
- Provide adequate lighting, ventilation, and appropriate temperature controls; and
- Meet current fire and safety codes.

POST-INCIDENT

Following any incidents involving the use of restraint or seclusion, the following steps will be followed:

- Staff will support the student in regaining emotional control
- Staff will ensure that no physical injuries have been sustained by the student, and will document any signs of physical injury
- When the student is emotionally ready, staff will use restorative practices to help the student process the incident, taking care not to re-escalate the student

All staff involved in the crisis, as well as a member of school leadership will meet as soon as feasible, and no more than two (2) school days following the incident, to debrief the incident, including whether the use of restraint or seclusion was conducted properly in accordance with this Restraint and Seclusion policy.

The meeting will include:

- Determining what triggered the student's behaviors
- Discussing any steps that could have been taken to de-escalate the situation prior to use of restraint and seclusion; whether current school-wide or student-specific strategies to address the student's behaviors were followed and whether additional or different strategies need to be implemented
- Reviewing staff actions during the use of the restraint or seclusion, and any different actions the team will take if a crisis reoccurs

The use of restraint, particularly when there is repeated use for an individual child, multiple uses within the same classroom, or multiple uses by the same individual, will trigger a review and, if appropriate, revision of strategies currently in place to address the student's dangerous behavior to ensure that positive behavioral strategies are in place.

RESTRAINT AND SECLUSION: REPORTING

After each incident of restraint or seclusion, the student's parent/guardian must be verbally notified, a written report prepared and shared with parents/guardians, and a meeting held to review the incident and determine appropriate next steps.

Same-Day Parent Notification

Parents/Guardians will be notified verbally by a school official of any use of restraint or seclusion on the day the incident occurs. This notification will include a description of the behavior that precipitated the restraint or seclusion, how long the restraint or seclusion lasted, where it occurred, and the names and title of all adults who participated in or observed the restraint or seclusion.

Written Incident Report

A written incident report must be completed and placed in the child's educational record, and a copy sent to the parent/guardian and to any District of Columbia agency involved in the student's placement no later than one (1) school day after the incident. The written report will include the following information:

- (a) The student's name;
- (b) The date of the incident;
- (c) The beginning and ending times of the incident, and the beginning and ending times of actual restraint or seclusion;
- (d) The location of the incident;
- (e) A description of relevant events leading up to the restraint or seclusion, including how the child's behavior presented a risk of imminent, serious physical harm;
- (f) A description of the prevention, de-escalation, or other interventions used prior to the implementation of restraint or seclusion;
- (g) A description of the restraint technique(s) used;
- (h) A log of events during the restraint or seclusion, including how the child was monitored. If seclusion lasted longer than 30 minutes, the log will include a description of who monitored the seclusion,

what they observed, and the basis for determining that the seclusion continued to be warranted;

- (i) A description of any injuries that occurred to the student or other individuals and/or property damage during the incident;
- (j) The names and signatures of all personnel who participated in the implementation, monitoring, and supervision of the restraint or seclusion event, and whether any of those individuals lacked proper certification at the time of the incident;
- (k) How the student was monitored after the event;
- (l) A description of the short-term planned approach to addressing the student's behavior in the future; and
- (m) The contact information the parent or guardian should use to request an initial evaluation for special education eligibility or an IEP meeting, as applicable.

In addition, parents will be provided with a copy of this policy, along with copies of applicable laws and regulations on the use of restraint and seclusion.

TEAM MEETING FOLLOWING USE OF RESTRAINT OR SECLUSION

Following any incident of restraint or seclusion, the team involved in the incident, including a member of the school leadership, shall meet with the student's parent or guardian. The meeting will be held at a date and time mutually agreed upon with the parent within ten (10) school days of the incident. If the student has an IEP or 504 plan, the meeting will include all relevant members of the IEP or 504 team.

Sign-in sheets and meeting notes from this meeting will be uploaded into the student's educational record, including into the Special Education Data System (SEDS) for students with an IEP, and in the 504 file of students with a 504 plan.

At the meeting, the team will review the written incident report and consider the following:

- Whether the use of restraint or seclusion was conducted properly in accordance with this policy.
- Whether current strategies are effective in increasing appropriate behaviors and decreasing inappropriate behaviors.
- Any new or revised school-wide strategies needed to address the behavior.

- Any new or revised student-specific strategies, including environment adaptations or other supports, needed to address the student's needs and behavior.
- For students without a disability, whether the student needs to be referred for MTSS support, or for evaluation for a 504 plan or special education services.
- For students with an IEP or 504 plan, the need for a functional behavior assessment (FBA) and behavior intervention plan (BIP). If the student has a current BIP in place, the IEP or 504 team shall review and revise as appropriate.
- Non-physical and non-restrictive de-escalation strategies that will be applied should future behaviors occur.
- Any additional medical and/or psychological assessment or consultation needed.

Behavioral strategies to address dangerous behavior that results in the use of restraint should address the underlying cause or purpose of the dangerous behavior.

If the student is unable or unwilling to attend the team meeting, a member of the team will meet with the student individually to discuss the incident as developmentally appropriate.

If additional incidents of restraint or seclusion occur within ten (10) school days of the original incident, and if agreed to by the parent, meetings to discuss all incidents may be consolidated into one meeting to be scheduled no later than fifteen (15) school days after the original incident.

If the team determines that the student's behaviors are likely to result in ongoing safety concerns, the team shall develop a safety plan with parental input. As the use of restraint and seclusion are only permitted for emergency situations, the use of these procedures will not be included in a student's individualized education program (IEP), 504 plan, behavior intervention plan (BIP), or in any other educational planning document.