Minnetonka Public Schools
Restrictive Procedures Plan

Minnetonka Public Schools promotes the use of positive approaches for behavioral interventions for all students. When restrictive procedures are employed in an emergency situation with any student, the School District will adhere to the standards and requirements of Minnesota Statute § 125A.094: Restrictive Procedures for Children with Disabilities. This plan specifically outlines the list of restrictive procedures the school intends to use in the case of an emergency, how the school will monitor and review the use of restrictive procedures, documentation requirements; the convening of a District Oversight Committee; and staff training requirements.

Minnetonka Public Schools uses restrictive procedures only in response to behavior that constitutes an emergency, even if written into a child's Individualized Education Plan (IEP) or Positive Behavior Support Plan (PBSP). Emergency means a situation where immediate intervention is needed to protect a child or other individual from physical injury.

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Minnesota Statues

In accordance with Minn. Stat. §§ 125A.094 and 125A.0942 as amended effective July 1, 2013, 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 schoolwide 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 non-emergency 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.

Definition of Restrictive Procedures:

Restrictive Procedures means the use of physical holding in an emergency. Restrictive procedures must not be used to punish or otherwise discipline a child. Minnesota Statute § 125A.0941(f).

Minnesota Statute § 125A.094, Subd 1a:

Schools that intend to use restrictive procedures shall maintain and make publicly accessible a restrictive procedures plan for students that includes at least the following: the list of restrictive procedures the school intends to use; how the school will monitor and review the use of restrictive procedures, including conducting post-use debriefings and convening an oversight committee; and a written description and documentation of the training staff completed under subdivision 5.

Minnetonka Public Schools promotes the use of positive approaches for behavioral interventions for all students. When restrictive procedures are employed in an emergency situation with any student, the School District will adhere to the standards and requirements of Minnesota Statute § 125A.094: Restrictive Procedures for Children with Disabilities.

Minnesota Statute § 125A.094, Subd. 2:

Restrictive procedures may be used only by a licensed special education teacher, school social worker, school psychologist, behavior analyst certified by the National Behavior Analyst Certification Board, a person with a master's degree in behavior analysis, other licensed education professional, paraprofessional under section § 120B.363, or mental health professional under section § 245.4871, subd. 27, who has completed the training program under subd. 5.

Minnesota Statute § 125A.0941 (c):

Physical holding means physical intervention intended to hold a child immobile or limit a child's movement and where body contact is the only source of physical restraint. The term physical holding does not mean physical contact that: 1) helps a child respond or complete a task; 2) assists a child without restricting the child's movement; 3) is needed to administer an authorized health-related service or procedure; or 4) is needed to physically escort a child when the child does not resist, or the child's resistance is minimal.

Minnesota Statute § 125A.0941 (g):

Seclusion means confining a child alone in a room from which egress is barred. Egress may be barred by an adult locking or closing the door in the room or preventing the child from leaving the room. Removing a child from an activity to a location where the child cannot participate in or observe the activity is not seclusion.

Minnesota Statute § 125A.0942, Subd. 3:

Physical holding or seclusion may be used only in an emergency. A school that uses physical holding or seclusion shall meet the following requirements: (1) the physical holding or seclusion must be the least intrusive intervention that effectively responds to the emergency; (2) physical holding or seclusion must end when the threat of harm ends and the staff determines that the child can safely return to the classroom or activity; (3) staff must directly observe the child while physical holding or seclusion is being used; (4) each time physical holding or seclusion is used, the staff person who implements or oversees the physical holding or seclusion shall document, as soon as possible after the incident concludes, the following information: (i) a description of the incident that led to the physical holding or seclusion; (ii) why a less restrictive measure failed or was determined by staff to be inappropriate or impractical; (iii) the time the physical holding or seclusion began and the time the child was released; and (iv) a brief record of the child's behavioral and physical status.

Minnesota Statute § 121A.67, Subd. 2:

If a pupil who has an individual education plan 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 pupil's individual program team must meet to determine if the pupil's individual education plan is adequate or if additional evaluation is needed.

Minnetonka Public Schools uses restrictive procedures only in response to behavior that constitutes an emergency, even if written into a child's individual education plan (IEP) or Positive Behavior Support Plan (PBSP). "Emergency" means a situation where immediate intervention is needed to protect a child or other individual from physical injury. The intervention will be used as a last resort and will be considered the safest option for all.

Selected Minnetonka Public Schools staff will participate in Crisis Prevention Institute's (CPI) Nonviolent Crisis Intervention Training. CPI's nonviolent crisis intervention training (NVCI) is an evidence-based program intended to provide training related to recognizing, preventing, and managing crisis behaviors. The philosophy of NVCI is to ensure the Care, Welfare, Safety, and Security of all.

Staff selected to attend this training on a continual basis include Special Education Licensed Staff, Special Education Paraprofessionals, School Social Workers, School Psychologists and Building and Special Education Administrators.

Minnetonka Public Schools Restrictive Procedures

Minnetonka Public Schools is committed to using positive behavioral intervention and support as defined in Minnesota Statute § 125A.0941 (d). This involves incorporating environmental changes and skill building strategies proactively to maintain a supportive and safe learning environment. If a student's challenging behavior should escalate to an emergency situation, Minnetonka Public Schools staff may use procedures which are considered restrictive under Minnesota Statute § 125A.0942 in order to maintain a safe environment when less restrictive procedures are ineffective. In accordance with Minnesota Statute § 125A.0942, Subd. 1, Minnetonka Public Schools discloses the following on the use of restrictive procedures:

Minnesota Statutes on Restrictive Procedures

1. Restrictive Procedures: Minnesota Statute § 125A.0941 (e) includes physical holding and seclusion as restrictive procedures.
2. Prohibited Procedures: Minnetonka Public Schools will never use any of the procedures designated as prohibited under Minnesota Statute § 125A.0942, Subd. 4(1-9).
3. Emergency: Minnesota Statute § 125A.0941 (b) states that a restrictive procedure may only be utilized in an emergency situation. An emergency is defined as a situation where immediate intervention is needed to protect a student or others from physical injury.

Restrictive Procedures Not Used in Minnetonka Public Schools

Seclusion: Seclusion means confining a student alone in a room from which egress is barred. This does not include removing a child from an activity to a location where the child cannot participate or observe the activity. In the event that an emergency situation should unexpectedly occur, and use of physical holding is deemed unsafe, staff may remove others and themselves from the current room while barring egress in order to prevent injury as use of reasonable force under Minnesota Statutes § 125A.582; 609.06, Subd.1; and § 609.379.

Restrictive Procedures Used in Minnetonka Public Schools

Physical Holding: Physical holding means physical intervention intended to hold a child immobile or limit a child's movement and where body contact is the only source of physical restraint. Minnetonka Public Schools Special Education Licensed Staff, Special Education Paraprofessionals, School Social Workers, School Psychologists and Building Administrators participate in Nonviolent Crisis Intervention (NVCI) training. This training covers appropriate use of physical holds. The term physical holding does not mean physical contact that:

- ✓ Helps a child respond or complete a task;
- ✓ Assists a child without restricting the child's movement
- ✓ Is needed to administer an 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

Prohibited Procedures

1. Corporal Punishment which include conduct involving: 1) hitting or spanking a person with or without an object; or 2) unreasonable physical force that causes bodily harm or substantial emotional harm.
2. Requiring the student to assume and maintain a specified physical position, activity, or posture that induces physical pain.
3. Presenting an intense sound, light or other sensory stimuli using taste, smell, substance, or spray as punishment.
4. Denying or restricting the student's access to equipment and devices such as wheelchairs, hearing aids or communication boards that facilitate the student's functioning except when temporarily removing the
equipment or device is needed to prevent injury to the student or others or serious damage to the equipment or device, in which case the equipment or device shall be returned to the student as soon as possible.
5. Interacting with a student in a manner that constitutes sexual abuse, neglect, or physical abuse under section § 626.556.
6. Totally or partially restricting a student's senses as punishment.
7. Withholding regularly scheduled meals or water.
8. Denying the student access to bathroom facilities, and/ or.

9. Physically holding that restricts or impairs a student's ability to breathe.
10. Use of tasers or threatened use of tasers.
11. Prone Restraint

General Information Regarding Restrictive Procedures

What is considered an "Emergency"?

An emergency is a situation where immediate intervention is needed to protect a child or other individual from physical injury.

- ✓ Jumping in front of a bus IS an emergency.
- ✓ A student not responding to verbal intervention during a fight MAY BE an emergency.
- ✓ Screaming obscenities in the hallway is NOT an emergency.
- ✓ Property destruction may NOT be an emergency.

Staff need to assess the level of risk and potential severity of harm involved in the current situation to ensure that a physical hold is utilized as a last resort in an emergency situation.

Restrictive Procedures - Basic Procedures:

Can be used ONLY in an emergency. It must be the safest option and the last resort.

- Must be the least intrusive effective intervention.
- Must end when the threat of harm ends.
- Must be documented EVERY time.
- Parent notification is required the same day a restrictive procedure is used on a child.
- A post-use debriefing must occur within 24 hours of the procedure.
- A Staff Debriefing Form must be completed and finalized in our IEP management system, Sped Forms.

Staff Training Requirements

All Minnetonka Public Schools special education staff receive training on the skills and knowledge areas in accordance with Minnesota Statute § 125A.0942, Subd. 1(3) and Subd. 5. Staff who use restrictive procedures, including paraprofessionals, shall complete training in the following skills and knowledge areas:

1) positive behavioral interventions.
2) communicative intent of behaviors.
3) relationship building.
4) alternatives to restrictive procedures, including techniques to identify events and 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 and responding to a child's physical signs of distress when physical holding is being used.

and

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.

Non-Violent Crisis Prevention Interventions (NVCI)

Selected Special Education staff participate in NVCI training. Newly hired staff participate in the initial NVCI training. Staff that have already received NVCI training maintain their certification by attending a refresher training every 18 months. Staff who design and use behavioral interventions will complete training in the use of positive approaches as well as restrictive procedures. Training records will identify the content of training, attendees, and training dates.

Authorized Staff

Staff who are trained and current with their NVCI training and who are authorized to use restrictive procedures may include:

- Licensed special education teachers
- Special education paraprofessionals
- Building administration
- Licensed school social workers
- School psychologists
- Other licensed special education staff members (speech, OT, DAPE, etc.)

Additionally, Minnetonka Public Schools implements a wide range of training related to positive behavior strategies for staff. These strategies vary by building and individual needs. Some strategies include Positive Behavior Support Plans (PBSP), De-escalation Trainings, Responsive Classroom, and character education. Training records are maintained at the district office.

Mental Health Resources

Mental/Behavioral/Developmental Health Resources

The following is a compilation of resources to address mental, behavioral and developmental health.

National Institute on Mental Health: NIMH Website

National Alliance on Mental Health (NAMI) –Minnesota: National Alliance on Mental Health

Nystrom & Associates
(Maple Grove 763-274-3120)

(Eden Prairie 763-274-3120):
Nystrom & Associates Website

Hennepin County mobile crisis teams Child Crisis –
612-348-2233
Hennepin County Crisis

Children's Hospital and Clinics of Minnesota: Psychological Services
Minneapolis: 612-813-6224
St. Paul: 651-220-6753
www.childrensmn.org

Fraser Child and Family Center
Minneapolis: 612-861-1688
www.fraser.org

Park Nicollet Behavioral Health St. Louis Park:
952-993-3307
www.parknicollet.com/Medical-Services/Behavioral-Health

Relate Counseling Center Minnetonka:
952-932-7277
www.relatemn.org

The Center for Behavior and Learning Minnetonka:
952-236-6188
www.centerforbehaviorandlearning.com

Washburn Child Guidance
Minneapolis and Minnetonka: 612-871-1454
www.washburn.org

Autism Society of Minnesota
St. Paul:
651-647-1083
www.ausm.org

Ridgeview Pediatric Integrative Medicine
Chaska: 952-361-2476

St. David's Child Development and Family Services
Minnetonka:952-548-8700

www.stdavids.net

University of Minnesota Pediatric Clinical Behavioral Neuroscience
Neurology, Neuropsychology, Autism Program Minneapolis: 612-625-7466
http://www.med.umn.edu/peds/clinneuro/

Headway
https://www.headway.org/children_and_adolescents/
Intake: 612-798-8167 or 612-861-1675

West Suburban Teen Clinic
Excelsior: 952-474-3251
www.westsuburbanteenclinic.org

Abbott Northwestern Hospital
Mental Health Services Minneapolis: 612-863-8633
http://www.allinahealth.org/ahs/anw.nsf/page/anw_mental_health

Crisis Resources

- First Call for Help: simply dial 211
- Hennepin County Suicide Prevention Hotline: 612-347-2222
- Hennepin County Crisis line: 612-348-2233
- Carver and Scott Counties Mental Health Crisis line: 952-442-7601
- Crisis Connection: 612-379-6363 or www.crisis.org
  Crisis(accessible for support via phone or can come to your home)
- Hennepin County mobile crisis: 612-348-2233
- Washburn Crisis: 612-871-1454 (can help connect with additional resources and stays involved for 30 days).

Documentation Procedures

Restrictive Procedures Debriefing Form

Following each use of restrictive procedures, staff involved will complete the "Staff Debriefing Form: Physical Holding" located within Sped Forms which meets the documentation requirements under Minnesota Statute § 125A.0942, subd. 3(4) (see Appendix C).

The School District shall make reasonable efforts to notify the parent on the same day by the parents preferred method when a restrictive procedure is used in an emergency. Parent preferred method of communication in the event of the use of a restrictive procedure will be discussed and noted in the IEP/PBSP at least annually at the IEP meeting if the possibility of restrictive procedures in the case of an emergency are written into a student's IEP/PBSP (consistent with statute § 125A.0942, Subd. 2 (f)). If the school is unable to provide same-day notice, notice will be sent by written or electronic means or as otherwise indicated by the parent. If used twice within 30 days or when a pattern emerges, and it's NOT already

included in student's IEP or PBSP, the district must hold a meeting of the team to conduct a review of the Functional Behavior Assessment (FBA) data and consider developing or revising the behavioral interventions and supports.

The use of restrictive procedures in emergency situations will be documented on the Restrictive Procedure Debriefing Form. This form should be completed as soon as possible after an incident has occurred, no later than 24 hours after the incident has occurred. Once completed, the form will be saved electronically in the student's special education file. The Director of Special Education and building administrator will be informed that a Restrictive Procedure has occurred. A Staff Debriefing Form must be completed every time a restrictive procedure is used.

Each time a restrictive procedure is used, the staff person will conduct a post-use debriefing with the staff members involved in the use of such procedures within 24 hours (See Appendix C). The post-use debriefing will review the requirements for use of restrictive procedures to ensure that staff has implemented them according to the standards in Minnesota Statute § 125A.0942, the form was completed correctly, staff are able to talk through their feelings surrounding the incident, and action-plans are generated. Should the post-use debriefing indicate that uses of restrictive procedures were not used appropriately, Minnetonka Public Schools staff will contact the Building Principal and Director of Special Education immediately.

Within 24 hours of any restrictive procedure, all staff members involved in the restrictive procedure will debrief and complete the Restrictive Procedure Staff Debriefing Form. A district behavior strategist and/or an administrative designee will lead the team involved through the debriefing meeting. A building administrator should be invited to the meeting and should attend whenever possible.

Including Restrictive Procedures in Individual Education Plans (IEP) or Positive Behavior Support Plans (PBSP)

The requirement that physical holding only be used in an emergency situation continues to apply even when restrictive procedures are included in the IEP and PBSP. When physical holding is included in the IEP or PBSP, the IEP team must:

1. Ensure that an FBA has been completed. Use the FBA information along with the present level of performance, needs, goals, and objectives to develop a PBSP.
2. Include positive behavior supports, proactive approaches, de-escalation procedures, instructional strategies related to identified areas of need, and other preventative measures in the PBSP.
3. Document which restrictive procedure is being included and why it is the least restrictive effective intervention. The PBSP must identify the frequency and severity of target behaviors for which the restrictive procedure is being considered; and anticipated criteria for returning the students to the routine activities and regular education environment if the intervention is used.
4. Indicate how the parent wants to be notified when a restrictive procedure is used.

5. The team is expected to debrief after every restrictive procedure within 24 hours and complete the Restrictive Procedure Staff Debrief Form in Sped Forms.

6. The IEP team can include restrictive procedures in the IEP or PBSP
   - ✓ BUT they can only be used in response to an emergency
   - ✓ AND an IEP meeting must be held if they are used twice in 30 days

Review Procedures

The District will monitor and review the use of restrictive procedures. This includes post-use debriefings with those involved, monthly review of restrictive procedures between district behavior strategists and special education administration, as well as quarterly review of completed forms and data with the District Oversight Committee.

In the case of a student with a disability, due process and documentation requirements will be followed a minimum of one time per year during annual IEP meetings.

Oversight Committee: The District Oversight Committee will convene, and review reported uses of restrictive procedures quarterly. This team will review aggregate data, monitor implementation of restrictive and proactive interventions, and provide additional resources if necessary (i.e. training, staff support, materials).

District Oversight Committee

District Wide Restrictive Procedures & Oversight Team:

The District Wide Oversight Committee will meet quarterly to evaluate and review the "Restrictive Procedures District Wide Plan" and review reported uses of restrictive procedures.

Administration:	
Shanna Lecy	Director of Special Education
Kristin Laughlin	Director of Special Education
Erin Valenta	Building Administrator
Behavior Strategists:	
Amber Larsen	Elementary Strategist
Kelly Dorothy	Middle School Strategist
Jani Pankoff	High School Strategist
Mental Health Professional:	
Kaitlin Dornbusch-Fenner	BCBA, Mental Health Practitioner
Marit Sisterman	Licensed Professional Clinical Counselor

Appendices

Appendix A: Use of Restrictive Procedures Information Sheet

If it becomes necessary to use physical holding to protect a student or other individual from physical injury or to prevent severe property damage (last resort and safest option for all):

1. Select the least intrusive intervention possible to reasonably react to the emergency situation.
2. Ensure that a staff member directly monitors the student to ensure that the student is safe.
3. End the intervention when the threat of harm ends and staff determine that the student can safely return to the classroom, activity, intervention and/or site determined by the team, PBSP, and/ or administrator.
4. Seclusion should not be used.
5. Complete the *Staff Debriefing Form: Physical Holding* every time a restrictive procedure is utilized, within 24 hours of the incident.
    a. A copy of the *Staff Debriefing Form: Physical Holding* is available on the district webpage under Restrictive Procedures and is included in this manual.
    b. The debriefing process should involve all members of the team that were involved in the restrictive procedure, as well as one person that was not directly involved in the situation.
7. Notify the parents the same day a restrictive intervention is used via phone, or their preferred method of communication.
    a. Provide written or electronic notice within two days if unable to notify parents the same day.
9. Hold a team meeting when a restrictive intervention is used twice in 30 days or when a pattern of behavior emerges.
    a. In the case of a nondisabled student, the team should develop an intervention plan.
    b. In the case of a student with an IEP, conduct or review a functional behavioral analysis, review data, consider developing additional or revised behavior interventions and supports, consider actions to reduce the use of restrictive procedures, and consider modifying the IEP or PBSP.

Appendix B: Definitions

Emergency – A situation where immediate intervention is needed to protect a child or other individual from physical injury.

Physical Holding – Physical intervention intended to hold a child immobile or limit a child's movement and where body contact is the only source of physical restraint. The term physical holding does not mean physical contact that:

- ✓ Helps a child respond or complete a task;
- ✓ Assist a child without restricting the child's movement
- ✓ Is needed to administer an 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

Positive Behavioral Interventions and Supports – Interventions and strategies to improve the school environment and teach children the skills to behave appropriately.

Restrictive Procedures – The use of physical holding or seclusion in an emergency.

Appendix C: Restrictive Procedures Debriefing Form

[redacted]

Minnetonka High School (074)
18301 Highway 7
Minnetonka MN 55345
Tel 952-401-5700

Staff debriefing meeting: Physical holding

Date of incident: Date of debriefing:

Student: [redacted]

School: **Minnetonka High School (074)** Age: [redacted] Grade: [redacted] Birth date: [redacted]

Directions: Following the use of a restrictive procedure, as soon as possible and in accordance with the district plan, the staff person who implemented or oversaw the physical holding or seclusion shall conduct a post-use debriefing. The debriefing must include at least one staff member who has knowledge of behaviors and was not involved in the incident. https://www.revisor.mn.gov/statutes/2009/cite/125A.0942

At the time of the incident

Was student on an IEP?
☐Yes ☐No
Was IEP implemented correctly?
☐Yes ☐No
Was a BIP/PBSP/BSP in place?
☐Yes ☐No
Was BIP/PBSP/BSP implemented correctly?
☐Yes ☐No

Description of incident

Identify the antecedents, triggers, and proactive interventions used prior to escalation

Briefly describe the impact of these less restrictive interventions

What behavior necessitated the use of a restrictive procedure?

Describe student and staff behavior during the incident

What actions helped or didn't help?

Describe the procedure used to return the student to their routine activity

If an injury occurred, name the person injured (student or staff) and describe the injury and the action taken after the injury, follow your district procedure regarding injury to student and staff (ex: work injury hotline, building nurse consulted, hospital visit, etc.)

Was the hold the response to an emergency situation?
☐Yes ☐No
Was the hold the least restrictive intervention?
☐Yes ☐No
Did the hold end when the threat of harm ended?
☐Yes ☐No
Is the behavior likely to reoccur?
☐Yes ☐No
Describe follow-up or corrective action needed to prevent the need for future use of restrictive procedures

Behavior history

Were restrictive procedures used on 2 separate school days in 30 calendar days?
☐Yes ☐No
Does the team see this as a pattern?
☐Yes ☐No
Does the child's IEP team need to meet?
☐Yes ☐No

Staff attending debriefing

(should include one individual not involved in the incident)