Chatfield High School

Restrictive Procedures Plan

(Minnesota Statutes, Section 125A.0942, Subd. 1)

- (a) Schools that intend to use restrictive procedures shall maintain and make publicly accessible in an electronic format on a school or district web site or make a paper copy available upon request describing a restrictive procedures plan for children with disabilities that at least
 - (1) Lists the restrictive procedures the school intends to use;
 - (2) Describes how the school will implement a range of positive behavior strategies and provide links to mental health services;
 - (3) Describes how the school will monitor and review the use of restrictive procedures, including:
 - (i) conducting post-use debriefings, consistent with subdivision 3, paragraph (a) clause (5); and
 - (ii) 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 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 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 nonemergency situations; the need for additional staff training; and proposed actions to minimize the use of restrictive procedures; and
 - (4) Includes a written description and documentation of the training staff completed under subdivision 5.
- (b) Schools annually must publicly identify oversight committee members who must at least include:

FOR SCHOOL YEAR: 2024 - 2025

i. mental health professional, school psychologist, or school social worker;

Name: Shannon Love

ii. an expert in positive behavior strategies;

Name: Sara Duxbury

iii. a special education administrator; and

Name: Zach Selnes

iv. a general education administrator.

Name: Eric Nelson

Adopted:

October 2016

Revised:

August, 2024

School Building Restrictive Procedures Plan

- **Restrictive procedures** means the use of <u>physical holding</u> or <u>seclusion</u> in an <u>emergency</u>. Restrictive procedures must not be used to punish or otherwise discipline a child.
- An emergency means a situation where immediate intervention is needed to protect a child or other
 individual 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 may be used only in response to behavior that constitutes an emergency, even if written into a child's Individualized Education Program or Behavior Intervention Plan.

I. This school intends to use the following restrictive procedure:

A. Physical holding:

- "Physical holding" means physical intervention intended to hold a child immobile or limit a
 child's movement, where body contact is the only source of physical restraint, and where
 immobilization is used to effectively gain control of a child in order to protect a child or
 other individual from physical injury.
- 2. The term physical holding does not mean physical contact that:
 - a) Helps a child respond or complete a task;
 - b) Assists a child without restricting the child's movement;
 - c) Is needed to administer an authorized health-related service or procedure; or
 - d) Is needed to physically escort a child when the child does not resist or the child's resistance is minimal.
- 3. Physical holding or seclusion may be used only in an emergency.
 - a) Physical holding or seclusion is the least intrusive intervention that effectively responds to the emergency;
 - b) physical holding or seclusion is not used to discipline a noncompliant child;
 - c) physical holding or seclusion ends when the threat of harm ends and the staff determines the child can safely return to the classroom or activity;
 - d) staff directly observes the child while physical holding or seclusion is being used.
- 4. This school/district intends to use the following types of physical holding:
 - a) CPI's Children's Control Position™
 - b) CPI's Standing Control Position^{sм}
 - c) CPI's Sitting Control Position^{sм}
 - d) CPI's Team Control Position^{sм}
 - e) The school will not use "prone restraint".
- B. At this writing, this school **does not intend to use** "seclusion" as a restrictive procedure.
 - "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.
 - 2. Removing a child from an activity to a location where the child cannot participate in or y o u observe the activity is not seclusion.
 - 3. If this school/district has informed director of special education about its intent to use 'seclusion.' The Director will ensure that statutory compliance standards are followed.

II. This school will monitor and review the use of restrictive procedures in the following manner:

A. Documentation

- 1. Each time physical holding or seclusion is used, the staff person who implements or oversees the physical holding or seclusion documents, as soon as possible after the incident concludes, the following information:
 - a) A description of the incident that led to the physical holding or seclusion;
 - b) Why a less restrictive measure failed or was determined by staff to be inappropriate or impractical;
 - c) The time the physical holding or seclusion began and the time the child was released; and
 - d) A brief record of the child's behavioral and physical status.
- 2. The school shall make reasonable efforts to notify the parent on the same day a restrictive procedure is used on the child, or if the school is unable to provide sameday notice, notice is sent within two days by written or electronic means or as otherwise indicated by the child's parent within the student's individualized education program.
- 3. Attached, as *Appendix A*, is this school's form used to document the use of physical holding and Seclusion. (*This form is also located electronically in the district's/school's internet version of due process documents,* "SpEd Forms". <u>Team members will be using the electronic version of this form after using a physical hold and printing it for the student's file.</u>)

B. Post-use debriefings

- 1. Each time physical holding is used, a post-use debriefing meeting will be conducted. This meeting will include:
 - a) the staff person who implemented or oversaw the physical holding,
 - b) team member(s) who were involved with the holding,
 - c) team member(s) responsible to observe the holding,
 - d) and one individual not involved in the incident.
 - e) The director of special education will be notified when a physical hold has been done.
- 2. This debriefing will be conducted:
 - a) within 24 hours after the incident concludes, whenever possible,
 - b) but no more than 2 school days after the incident.
- 3. The post-use debriefing will review the following requirements to ensure the physical holding was used appropriately:
 - a) Whether the physical holding was used in an emergency.
 - b) Whether the physical holding was the least intrusive intervention that effectively responds to the emergency.
 - c) Whether the physical holding ended when the threat of harm ended and the staff determined that the child could safely return to the classroom or activity.
 - d) Whether the staff directly observed the child while physical holding was being used.
 - e) Whether the documentation was completed correctly.
 - f) Whether the parents were correctly notified.
 - g) Whether an IEP team meeting needs to be scheduled.
 - h) Whether the appropriate staff used physical holding.
 - i) Whether the staff that used physical holding was appropriately trained.

- j) If the post-use debriefing reveals that the use of physical holding was not used appropriately, the team will determine if corrective action is needed, and if so, what it will include.
- 4. Attached, as **Appendix B**, is this district's/school's form used to document the *Staff Debriefing Meeting*. (This form is also located electronically in the district's/school's internet version of due process documents, "SpEd Forms". <u>Team members will be using the electronic version of this form after using a physical hold and printing it for the student's file.)</u>

C. Individualized Education Program Team Meetings

- 1. When: The district must hold a meeting of the individualized education program team,
 - a) within ten calendar days after district staff use restrictive procedures on two separate school days within 30 calendar days or
 - b) a pattern of use emerges and the child's individualized education program or
 - c) the behavior intervention plan does not provide for using restrictive procedures in an emergency; or
 - d) at the request of a parent or the district after restrictive procedures are used.
- 2. What: The district must hold a meeting of the individualized education program team,
 - a) conduct or review a functional behavioral analysis,
 - b) review data,
 - c) consider developing additional or revised positive behavioral interventions and supports,
 - d) consider actions to reduce the use of restrictive procedures,
 - e) and modify the individualized education program or behavior intervention plan as appropriate.
 - must review any known medical or psychological limitations, including any medical information the parent provides voluntarily, that contraindicate the use of a restrictive procedure,
 - i. consider whether to prohibit that restrictive procedure,
 - ii. and document any prohibition in the individualized education program or behavior intervention plan.
 - g) If the individualized education program 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 ten or more school days during the same school year, the team, as appropriate, either
 - i. must consult with other professionals working with the child;
 - ii. consult with experts in behavior analysis, mental health, communication, or autism;
 - iii. consult with culturally competent professionals;
 - iv. review existing evaluations, resources, and successful strategies; or
 - v. consider whether to reevaluate the child.
 - h) The district must review use of restrictive procedures at a child's annual individualized education program meeting when the child's individualized education program provides for using restrictive procedures in an emergency.
 - i) The individualized education program or behavior intervention plan shall indicate how the parent wants to be notified when a restrictive procedure is used.

3. **Removal by a Peace Officer:** In addition, if a pupil who has an individualized education program 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 individualized education program team must meet to determine if the pupil's individualized education program is adequate or if additional evaluation is needed. (*MN Statute 121A.67 Subd. 2*)

D. Oversight committee

- 1. This school's oversight committee consists of the following individuals:
 - a) A general education administrator: Eric Nelson
 - b) A special education administrator: Zach Selnes
 - c) A mental health professional, school psychologist, or school social worker: Shannon Love
 - d) An expert in positive behavior strategies: Sara Duxbury
 - e) Other team members, as appropriate: Sean Trewin, Matt Mauseth, Kirstin Johnston, Tom Moody
- 2. The oversight committee meets: Put in the dates you meet December 11, March 17, and May 25 (7:30am-8:10 am)
 - a) quarterly (whether or not restrictive procedures have been used) AND
 - may be called at other times, if necessary, to address excessive or inappropriate use of restrictive procedures and determine and recommend training needs or other corrective action.
- 3. The oversight committee will review the following:
 - a) The School Restrictive Procedures Plan, to ensure procedures are being followed.
 - b) Review the Administrative Quick Report generated in *SpEd Forms* that identifies all restrictive procedures used in the school/district during that school year. **The** committee will ensure that the data is accurate and complete, and report it as such to the director of special education by the end of the school year.
 - c) It is the responsibility of the director of special education to report this data to the Minnesota Department of Education each year through the secure compliance website. This report is filed, even if no procedures were used.
 - d) 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;
 - e) the number of times a restrictive procedure is used schoolwide and for individual children;
 - f) the number and types of injuries, if any, resulting from the use of restrictive procedures
 - g) whether restrictive procedures are used in nonemergency situations;
 - h) the need for additional staff training;
 - i) and proposed actions to minimize the use of restrictive procedures.
- E. The committee will include a written description and documentation of the training staff completed.
- F. Attached, as **Appendix C**, is a copy of the template used to document the Oversight Committee's meeting. (The elements of this form will be used as an agenda for each meeting and a copy of it and the meeting outcomes will be kept in the district's Restrictive Procedures file for 5 years.)

III. This school will receive training

- A. **Personnel development activities** will be provided to district staff and contracted personnel who have routine contact with students and who may use restrictive procedures in the following 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. 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;
 - 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. schoolwide programs on positive behavior strategies.

B. The training will be conducted

- 1. at least annually for all team members.
- 2. via Hiawatha Valley Education District's (HVED's) CPI's Nonviolent Crisis Intervention® trained instructors.
- 3. via delivery of CPI's course materials and additional materials providing overview and emphasis of the 12 strands listed in *III.A*.
- 4. In addition, all participants will be required to review the district's/school's Restrictive Procedures Plan.
- C. When trained, **only the following employee job classifications** are authorized and certified to use restrictive procedures:
 - 1. Licensed special education teacher
 - 2. School social worker
 - 3. School psychologist
 - 4. Behavior analyst certified by the National Behavior Analyst Certification Board
 - 5. A person with a master's degree in behavior analysis
 - 6. Other licensed education professional
 - 7. Highly qualified education paraprofessional
 - 8. Mental health professional
- D. **Verification of all training** will be kept on file at Hiawatha Valley Education District for a minimum of 5 years. The following team members were trained by (Insert CPI trainers and date trained): List staff on this plan that were trained: Eric Nelson, Kirstin Johnston, and Matt Mauseth.

IV. This school is committed to using positive behavioral interventions and supports.

- A. **Positive behavioral interventions** and supports means interventions and strategies to improve the school environment and teach children the skills to behave appropriately.
- B. The school boards and staff employed by HVED schools believe that all students can experience

success. We believe that behavior that is rewarded is more likely to be repeated. We believe that encouragement and positive reinforcement are effective techniques for changing behavior. Our goal is to model and shape prosocial behavior for the students under our care, using positive approaches that focus on skill acquisition.

C. **Promotion of the use of positive approaches:** The school promotes the use of positive interventions and strategies. The use of positive approaches and procedures, such as: praise and encouragement, planned ignoring, contracts, monitoring sheets, modeling of appropriate behavior, and proximity control are implemented as appropriate. In addition to individualized approaches to positive intervention, the school's school-wide plan includes:

Insert school Positive Approaches

- 1. Teaching students of expected behaviors during the school day
- 2. Positive praise
- 3. Social Skills trainings
- 4. Project based learning
- 5. Sensory needs met
- 6. Task analysis and breaking apart larger tasks
- 7. Positive phone calls home
- 8. Activity passes

V. This school will never use the following prohibited procedures on a child:

- A. Engaging in conduct prohibited under section 121A.58 (corporal punishment);
- B. Requiring a child to assume and maintain a specified physical position, activity, or posture that induces physical pain;
- C. Totally or partially restricting a child's senses as punishment;
- D. Presenting an intense sound, light, or other sensory stimuli using smell, taste, substance, or spray as punishment;
- E. 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;
- F. Interacting with a child in a manner that constitutes sexual abuse, neglect, or physical abuse under section 626.556 (reporting of maltreatment of minors);
- G. Withholding regularly scheduled meals or water;
- H. Denying access to bathroom facilities; and
- I. 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.

References:

Minnesota Department of Education's "Sample Restrictive Procedures Plan with Legal Citations and Suggestions" (April 2012); MN Statutes: §125A.0941 and §125A.0942

X	,	Ose of Restrictive Proce	edures: Physical Holding
Student Fred Sample	ID: 053555555	5555	Date: MMDD/YY
School: Gender ** *	Grade: Primary Disability:		DOB
Directions: The staff person who implem sold is utilized. Staff involved:	ented or oversaw a physic	al hold must complete this	s form each time a physical
Person completing this form:		Position:	Phone:
	EMERGENO	Y	
		cal injury/	□ Yes □ No
Description of the emergency situation:	ysical holding: PHYSICAL HOL	LDING	
Description of the emergency situation:	ysical holding: PHYSICAL HOL	LDING	
Description of the emergency situation: Description of the incident that led to ph Description of the physical holding and a	ysical holding: PHYSICAL HOL a brief description of the st	LDING udent\'s behavioral and ph	tysical status:
Was physical holding used to protect sta Description of the emergency situation: Description of the incident that led to physical holding and a Was physical holding the least intrusive in Explain why a less restrictive intervention	ysical holding: PHYSICAL HOL brief description of the st intervention to effectively re	LDING udent('s behavioral and ph espond to the emergency?	rysical status:
Description of the emergency situation: Description of the incident that led to ph Description of the physical holding and a Was physical holding the least intrusive i Explain why a less restrictive intervention Did the physical holding end when the the determined that the student could safely	ysical holding: PHYSICAL HOL a brief description of the st intervention to effectively re in failed or was determined reat of hum ended and st	DENG udent's behavioral and ph espond to the emergency? to be inappropriate or im	rysical status:
Description of the emergency situation: Description of the incident that led to ph Description of the physical holding and a Was physical holding the least intrusive i Explain why a less restrictive intervention Did the physical holding end when the the determined that the student could safely Explain:	ysical holding: PHYSICAL HOI a brief description of the st intervention to effectively re in failed or was determined reat of humm ended and st return to the classroom or	DENG udent's behavioral and ph espond to the emergency? to be inappropriate or im	hysical status: Yes □ No
Description of the emergency situation: Description of the incident that led to ph Description of the physical holding and a Was physical holding the least intrusive i Explain why a less restrictive intervention Did the physical holding end when the th determined that the student could safely Explain: Did staff directly observe the child during	ysical holding: PHYSICAL HOI a brief description of the st intervention to effectively re in failed or was determined reat of humm ended and st return to the classroom or	DENG udent's behavioral and ph espond to the emergency? to be inappropriate or im	hysical status: Pes No
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Description of the emergency situation: Description of the incident that led to plus Description of the physical holding and a Was physical holding the least intrusive i	psical holding: PHYSICAL HOI a brief description of the st intervention to effectively re in failed or was determined areat of hum ended and st return to the classroom or ig the physical holding:	DENG udent's behavioral and ph espond to the emergency? to be inappropriate or im	rysical status: Yes No practical: Yes No
Description of the emergency situation: Description of the incident that led to phe Description of the physical holding and a Was physical holding the least intrusive i Explain why a less restrictive intervention Did the physical holding end when the the determined that the student could safely Explain: Did staff directly observe the child during Explain:	psical holding: PHYSICAL HOI a brief description of the st intervention to effectively re in failed or was determined areat of hum ended and st return to the classroom or ig the physical holding:	DENG udent's behavioral and ph espond to the emergency? to be inappropriate or im	rysical status: Yes □ No practical: □ Yes □ No □ Yes □ No □ Yes □ No

				PARENT NOTE	EICATION		
			e day a restri notify on the s		ased. A written	or electronic notice	must be sent hom
Parent:	Date:	Time:					
Notified by:							
Notified by:							

¥			Use of l	Restrictive I	Procedure	s: Physical Holding
Student: School:	Fred Sample	ID: Grade:	12		Date: DOB:	
Gender:	Male	Primary Disability:	11:Autism	m spectrum o	iisorder	Setting: 0
Directions:	The staff person who implemented or oversa	w a physical hold must co	implete this fo	rm each time a p	hysical hold i	s utilized.
Staff involv						
Person com	apleting this form:			Position:		Phone:
		EMEDICEN	797	•		•
		EMERGENO	LY			
Was physic	cal holding used to protect student or others	from physical injury?			Yes	□ No
Description	n of the emergency situation:					
Description	n of the incident that led to physical holding					
PHYSICAL HOLDING						
Description	n of the physical holding and a brief descripti	on of the student's behavio	oral and physic	cal status:		
Was physic	cal holding the least intrusive intervention to	effectively respond to the	emergency?		☐ Yes	□ No
Explain wh	ny a less restrictive intervention failed or was	determined to be inapprop	oriate or impra	ctical:		
	ysical holding end when the threat of harm en e classroom or activity:	ded and staff determined t	hat the studen	t could safely	☐ Yes	□ No
Did staff di Explain:	irectly observe the child during the physical h	nold:			☐ Yes	□ No
Did staff su	ustain an injury as a result of the physical h	olding			☐ Yes	□ No
Did the stu	dent sustain an injury as a result of the phy	sical holding			Yes	□ No
Procedure		Start Time		End Time		Total Time
		REMOVAL FROM	SCHOOL			

Fred Sample

	PARENT NOTIFICATION				
Parents must be notified the same day a restrictive procedure is used. A written or electronic notice must be sent home within two (2) days if unable to notify on the same day.					
Parent: John Sample	Date: Time:				

I				Use of Rest	trictive Procedure	es: Seclusion	
Student: School:	Fred Sample		ID: Grade:	<u>0</u>	Date: DOB:		
Gender:	Male	Primary Disability	: 11:Auti	.sm spectrum disor	rder	Setting:	02
Part A.	Is the student Hispanic/Latino? ☐ Yes ☐ No	Part B.	☐ American Ir ☐ Black or Af	aiian or Other Pacific Isl		Asian White	
threat of hadays and a	Complete this form whenever a arm ends and staff determine that Staff Debriefing Meeting form o	t the student can safely					
Staff involv	ved:						
Signature o	of person completing this form:			Phone:	Position:		
0				_			
			EMERGEN	CY			
Was seclu	sion used to protect student or o	thers from physical in	jury?		□ Y	es 🗆 No	
Description	on of the emergency situation:						

Description of the incident that led to seclusion:

Fred Sample

SECLUSION					
Location of seclusion room:	·				
Did the room meet the requirements of a room used for seclusion?	Yes	No			
Was the room well lit, well ventilated, adequately heated and clean?	☐ Yes	□ No			
Did the room contain objects that a student may use to injure themselves or others?	Yes	No			
Brief description of the student's behavior and physical status during seclusion:					
Was seclusion the least intrusive intervention to effectively respond to the emergency?	Yes	□ No			
Explain why a less restrictive intervention failed or was determined to be inappropriate or impractical:					
Did the seclusion end when the threat of harm ended and staff determined that the student could safely return to the classroom or activity: Explain:	☐ Yes	□ No			
Did staff directly observe the child during the seclusion: Explain:	☐ Yes	□ No			
Did staff sustain an injury as a result of the seclusion:	☐ Yes	□ No			
Did the student sustain an injury as a result of the seclusion:	Yes	No			
Time seclusion began: Ended: Total Time: minutes					
REMOVAL FROM SCHOOL					
Was the student removed from school by a police officer at the request of school personnel:	☐ Yes	□ No			
PARENT NOTIFICATION:					
Parents must be notified the same day a restrictive procedure is used. A written or electronic notice must be sent be notify on the same day.	home within two (2)) days if unable to			
Parent: John Sample Date: Time: Sally Sample					
Notified by:					
How notified:					

Appendix B: Staff Debriefing

X				STAFF DEBRIEFING MEETING			
		Date	e of Incident:	Date of Debriefing:			
Student:	Fred Sample	_	IC	DOB: (
School:				Grade: "			
Student wa	as on an IEP:	⊕ Yes	⊖ No	Was IEP implemented correctly?	⊕ Yes	⊕ No	
Was a BIP	in place:	⊕ Yes	⊕ No	Was BIP implemented correctly?	© yes	O No	
Briefly des What beha Describe s What actio	scribe the impact of rvior necessitated th tudent and staff beh rus helped or didn't	these less re- te use of a res tavior during help?	tive interventions use strictive interventions: strictive procedure? the incident: student to his/her routing				
Was the bo	old/seclusion the res	ponse to an e	emergency situation?		⊕ Yes	⊕ _{No}	
Was the ho	old/seclusion the lea	st restrictive	intervention?		⊕ Ycs	Θ No	
Did the ho	ld/seclusion end wi	en the threat	of harm ended?		⊕ Yes	@ No	
Is correctiv	ve action needed?				⊕ Yes	⊕ No	
Is the beha	rvior likely to reocc	ur?			⊕ Yes	Θ No	
Follow-up	action to prevent th	e need for fu	ature use of restrictive	procedures:			
Behavior l	History:						
Other restr	intive procedures or	sed in the las	t 4 weeks:		○ Yes	⊕ No	
Restrictive	procedures used tw	vice in a mon	rth:		⊕ Ycs	⊕ No	
Does the te	cam see this as a po	ttem?			⊕ Yes	⊕ No	
Does the c	hild's IEP team neo	d to meet?			Θ_{Yes}	⊕ No	
Staff Atter		should includ	le one individual not in	nvolved in the incident)			

Appendix C: Quarterly Oversight Committee Agenda Template

Quarterly Restrictive Procedures Oversight Committee

Meeting Agenda and Notes

School Name:				
Date Time:			Location	
Present		sent		
Members Required	Yes	No	Name	
General Education Administrator				
Special Education Administrator				
Mental Health provider, school psych, or soci	ial			
worker				
Expert in positive behavior strategies				
Others, as appropriate				
				•

Area of discussion	Items to discuss	Notes
Restrictive Procedures Plan	Fall and ongoing Review and update plan as needed	
	Review procedures to inform all staff of plan components and any changes made to the plan during the school year	
Review use of restrictive procedures this quarter	Compare SpEd forms report to actual use Number of Restrictive Procedures used school wide Number used on specific students Review documents from use of restrictive procedures. Completed on time Parents informed Debriefing conducted Recommended changes to staff practices in debriefing	

	What, if any, patterns or problems do you notice on time, location, student, staff involved in restrictive procedures?	
	Were staff or student injured? Corrections needed?	
	Was the event an emergency? How do you know this?	
	If no restrictive procedures used, what strategies are working?	
Training	Training plans for all staff?	
	Training plans for crisis team?	
	Are enough staff trained?	
Other		