Burnsville-Eagan-Savage Public School District
200 West Burnsville Parkway
Burnsville, MN 55337
Last Revision: November, 2026

Minnesota laws encourage the use of positive behavioral supports and strategies and seek to reduce the use of physical holding and seclusion (restrictive procedures). Schools may only use restrictive procedures in response to an emergency 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 or 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 will not be used to punish or otherwise discipline a child.

In compliance with Minnesota statutory provisions pertaining to physical holding and seclusion effective August 1, 2011, the following Restrictive Procedures Plan will be implemented by Burnsville Eagan Savage Public School ISD 191. The district plan is a publicly accessible procedures plan for children including:

(1) A list of the restrictive procedures Independent School District 191 intends to use;

(2) A description of how the district will monitor and review the use of restrictive procedures, including conducting post-use debriefings and the establishment of an oversight committee designated to review all procedures and training;

(3) A written description and documentation of staff training in regard to positive behavior intervention supports and use of restrictive procedures.

An electronic or hard copy version of this plan can be requested by any of the following:

- Contacting the District Office at 952-707-6261
- E-mail requests should be directed to Jennifer Krueger, Ed.D., Director of Special Education (jkrueger@isd191.org)
- Written requests to:
  Burnsville Eagan Savage Public Schools
  Student Support Services Department
  200 West Burnsville Pkwy
  Burnsville, MN 55337
- An electronic version of this plan is also publicly accessible on the district website at www.isd191.org under Special Education.

RESTRICTIVE POLICY AND PROCEDURES

Burnsville-Eagan-Savage (BES) Public Schools is committed to providing for the care, welfare, safety and security of both the students they serve and for the staff and all others who are a part of our programming. This is done through the promoting of positive approaches for behavioral interventions for all students, watching for early warning signs of distress and implementing strategies for early intervention and de-escalation to attempt to interrupt behaviors before individuals become a danger to themselves or others.

Burnsville-Eagan-Savage Special Education staff are trained to identify levels of behavior in individuals in crisis, including children with disabilities, and to respond with appropriate approaches to meet their needs at each level, following the *Safety-Care*® model. In addition, some staff are further trained in Ukeru, which focuses on trauma-informed practices and additional de-escalation techniques to avoid the use of restrictive procedures. Restrictive procedures are only used in an emergency situation by trained staff and as a last resort when staff have determined that an individual is a danger to themselves or others and that the risks of implementing restrictive procedures are less than the danger the individual presents. Burnsville-Eagan-Savage Schools will adhere to the standards and requirements of Minnesota Statute *125A.094 Restrictive Procedures for Children with Disabilities.*

Physical Holds Procedures

1. **Physical Holding** – 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. Burnsville Eagan Savage Public Schools #191 staff are trained to use the following restraint procedures:
    a. *1-Person & 2-Person Stability Hold:* A physical management procedure in which the individual is partially or fully immobilized using manual holding technique by one or two adults.
    b. *Floor Seated Stability Hold:* A low-profile, seated restraint designed to stabilize an individual who is at imminent risk of harming themselves or others.
    c. *Forward or Reverse Transport:* A structured physical procedure used to move an individual from one location to another when the current location is not safe or when de-escalation is more likely to be effective in another location.
    d. *Chair Stability Hold: A* restrictive physical intervention used to stabilize an individual who is currently seated in a chair and exhibiting dangerous behavior, or to transition them into a seated position for safety.

4. A physical hold may be used only in response to behavior that constitutes an emergency, even if written into a child's IEP, IFSP, or BIP.
5. An improper physical hold, a physical hold used by an unauthorized or untrained staff person and any reasonable force which intends to hold a child immobile or limit a child's movement where body contact is the only source of physical restraint will be reported as a physical hold.
6. Each time a physical holding is used, the staff person who implements or oversees the physical holding documents, as soon as possible after the incident concludes, the following information:

    a) a description of the incident that led to the physical holding;
    b) why a less restrictive measure failed or was determined by staff to be inappropriate or impractical;
    c) the time the physical holding began and the time the child was released;
    d) a brief record of the child's behavioral and physical status; and
    e) a brief description of the post-use debriefing that occurred as a result of the use of the physical hold

The schools will 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 same-day notice, notice will be sent within two days by written or electronic means or as otherwise indicated in the Student's IEP.

Burnsville Eagan Savage Schools:

- Edward Neill Elementary
- Gideon Pond Elementary
- Harriet Bishop Elementary
- Hidden Valley Elementary
- Rahn Elementary
- Sky Oaks Elementary
- Vista View Elementary
- William Byrne Elementary
- Eagle Ridge Middle School
- Nicollet Middle School
- Burnsville Alternative High School
- Burnsville High School

Seclusion

Seclusion – 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.

The Burnsville Eagan Savage School District does **NOT** have seclusion rooms registered with the Minnesota Department of Education. The district uses “Calming Spaces” within the schools. Students are encouraged to use the calming spaces as a proactive alternative to remaining in the large group classroom when behavior, including anxiety and frustration, is beginning to impede a student's ability to maintain academic and social success in the classroom environment. Rooms are available at all times during the school day. None of these spaces are used for the purpose of seclusion.

Prohibitions

Burnsville Eagan Savage School staff are prohibited from using the following actions or procedures:

1. engaging in corporal punishment - 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 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 the temporary removal of 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 as those terms are defined in chapter 260E;
7. withholding regularly scheduled meals or water;
8. denying access to bathroom facilities;
9. physical holding that restricts or impairs a student’s ability to breathe, restricts or impairs a student’s ability to communicate distress, places pressure or weight on a student’s head, throat, neck, chest, lungs, sternum, diaphragm, back, or abdomen, or results in straddling a child’s torso; and
10. prone restraint.
11. the use of seclusion on children from birth through grade 3.

Implementation of a Range of Positive Behavior Strategies

Positive behavioral interventions and supports are interventions and strategies to improve the school environment by teaching children the skills to prevent problem behavior, providing instruction and support for positive and prosocial behaviors, and supporting social, emotional, and behavioral needs for all students. Staff will implement a range of positive behavior strategies as a proactive approach to addressing student needs and teaching positive behavior skills by:

1. establishing, defining, teaching, and practicing three to five positively stated schoolwide behavioral expectations that are representative of the local community and cultures;
2. developing and implementing a consistent system used by all staff to provide positive feedback and acknowledgment for students who display schoolwide behavioral expectations;
3. developing and implementing a consistent and specialized support system for students who do not display behaviors representative of schoolwide positive expectations;
4. developing a system to support decisions based on data related to student progress, effective implementation of behavioral practices, and screening for students requiring additional behavior supports;
5. using a continuum of evidence-based interventions that is integrated and aligned to support academic and behavioral success for all students; and
6. using a team-based approach to support effective implementation, monitor progress, and evaluate outcomes.

Mental Health Resources

To obtain mental health services or a referral to a mental health service provider, families should contact their primary care clinic, physician or insurance provider. Below is a list of additional mental health resources.

- Children's Mental Health Division of the Minnesota Department of Human Services (DHS): administers policy and practice to ensure effective and accessible mental health services and supports for children and families in Minnesota. The division works together with many public and private partners across the state so that children and youth with mental health needs can develop and function as fully as possible in all areas of their lives. DHS is committed to making sure the right services are available at the right time for children with mental health needs and their families.

- Children's Mental Health Crisis Response Services (CRS)
    - Crisis Text Line offers free help for those who are having a mental health crisis or are contemplating suicide. Services are available 24/7 across Minnesota. Text "MN" to 741741.
    - Call **CRISIS (**274747) from a cell phone to talk to a team of professionals who can help you.

NAMI Minnesota provides support by helping people connect with needed resources and information. An extensive list of resources was gathered to make it easier for people to locate possible sources of help as they navigate through various systems that interface with mental health. You can find that list on the NAMI Information and Resources web page.

Dakota County and Local Support:

- Associated Clinic of Psychology (ACP)
- Dakota County Children's Mental Health
- Dakota County Crisis 952-891-7171
- Text – LIFE to 61222

- Emergency 988
- FACTS MN - Family and Children Therapy Services in Minnesota
- National Alliance on Mental Illness

Staff Training on De-Escalation

The school ensures that staff are trained to identify and appropriately address the needs of all students. Staff who may respond to emergencies are specifically trained 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 using *Safety-Care*®
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;
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;
12. schoolwide programs on positive behavior strategies.

Burnsville Eagan Savage Schools provides the following training on accommodating, modifying, and adapting curricula, materials, and strategies to appropriately meet the needs of individual students and ensure adequate progress toward the state's graduation standards:

1. Differentiated Instructional Practices and Training to support academic and social/emotional needs of students provided through district and site staff development plans
2. IEP Snapshots, outlining specific accommodations and modifications for individual special education students, are provided to teachers and para educators for student teams at the start of each semester (Elementary School) and trimesters (Middle School, High School, and the Community Learning Center), and following any IEP revision.
3. Specific student Behavior Intervention Support Plans are shared with IEP team members including teachers, para educators, and other support staff to assure proactive and support strategies are followed.
4. Staff have ongoing access to online staff development through *Infinitec* which includes courses on accommodating, modifying and adapting materials to meet the needs of students.

The school maintains documentation of staff training through Protraxx.

Monitoring the Use of Restrictive Procedures:

The school will monitor and review the use of restrictive procedures by:

1. Conducting post-use debriefings following the use of a restrictive procedure:

   Each time physical holding or seclusion is used the staff person who implemented or oversaw the physical holding or seclusion shall conduct a post-use debriefing with all staff involved in the incident. Post-use debriefings will be conducted within 48 hours of the incident if appropriate or as soon as it is possible for the team to convene.

2. Convening an oversight committee to review of the use of restrictive procedures each quarter. The oversight committee will identify and address patterns or problems indicated by:
   a. 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;
   b. the number of times a restrictive procedure is used schoolwide and for individual children;
   c. the number and types of injuries, if any, resulting from the use of restrictive procedures;
   d. whether restrictive procedures are used in nonemergency situations;
   e. the need for additional staff training;
   f. proposed actions to minimize the use of restrictive procedures;
   g. any disproportionate use of restrictive procedures based on race, gender, or disability status;
   h. the role of the school resource officer or police in emergencies and the use of restrictive procedures; and
   i. documentation to determine if the standards for using restrictive procedures as described Minnesota Statutes 125A.0941 and 125A.0942 have been met.

3. The oversight committee includes the below members, which are updated annually:
   - Mental Health Practitioner: School Social Worker or School Psychologist
   - Expert in positive behavior strategies: Board Certified Behavior Analyst
   - Special Education Administrator: Director of Special Education or Special Education Supervisor; and
   - Building Administrator: Building Principal or Associate Principal