

## Barrington Public Schools

# Procedures Regarding Prevention and Crisis Intervention/Physical Restraint for Safety Promotion

### Intent

The intent of these procedures is to ensure that every student participating in The Barrington school district is free from unreasonable and unnecessary physical restraint and that such an intervention is used only in emergency situations after other less intrusive alternatives have failed or been deemed inappropriate. These procedures reflect a policy prohibiting corporal punishment. They promote the use of positive, preventive behavioral supports that significantly limit the need for physical intervention, restrict the use of physical force, and ensure that physical restraint is administered in the least intrusive manner possible. These procedures delineate appropriate practice in those instances where physical restraint is absolutely necessary to protect a student or students, staff and/or other school members from imminent, serious physical harm.

The Barrington School District has established the procedures described in this document for the purposes of:

- (a) Promoting student safety and preventing student violence, self-injurious behavior and suicide, including de-escalation of potentially dangerous behavior that may occur with an individual student or among groups of students;
- (b) Establishing effective crisis intervention practices and, when necessary to ensure safety, appropriate physical intervention procedures;
- (c) Keeping all school members informed regarding these procedures as well as preventive interventions, de-escalation, types of restraints and related safety considerations, administering physical restraint in accordance with behavioral intervention plans and/or known medical or psychological limitations;
- (d) Identifying staff that is authorized to serve as a school-wide resource to assist other staff in proper administration of these practices, and provide these staff with advanced training beyond the basic information provided to all staff.
- (e) Reporting crisis intervention/physical restraint incidents to parents, the administration, and the Rhode Island Department of Education.

### Emergency Situations

The District is committed to maintaining a safe school environment. While the procedures contained herein direct the use of crisis intervention/physical restraint, they do not prohibit any teacher, employee or agent from using reasonable force to protect students, other persons or themselves from imminent, serious physical harm.

A. Keeping All School Members Informed

Annual Professional Development

Each school year, District policies and procedures described in this document are reviewed with all school staff and parents. Others wishing to review a copy of this document can access it by contacting the office of the Superintendent.

Within the first month of school, the staff training is conducted as outlined below.

Staff who are employed after the school year begins are provided this training as part of their initial orientation within the first month of their employment.

Annually	District Procedures (as further outlined in document)	Review with staff at beginning of school year; share annually with parents in school/ student handbooks.
On-going	Positive Behavioral Supports for all Students	Staff participation in professional development targeted at positive behavioral support systems; Parenting activities (through PTO) targeted at positive behavioral support systems
On-going (as needed on individual basis)	Behavioral Interventions for Challenging Behavior, including Functional Behavioral Assessment	Recommendations developed through Teacher Support Team or Evaluation Team meetings held at each school
On-going	De-escalation during crises	Staff participation in professional development targeted at prevention and de-escalation behaviors and procedures
Annually	Types of Physical Restraint and Related Safety Considerations	School-based training and/or review of appropriate types of and conditions for physical restraint
On-going	Administering Physical Restraint in Accordance with Individual Student Behavioral Intervention Plans and with Known Medical or Psychological Limitations	School based plan and procedures delineating persons responsible for administering physical restraint for individual Student Behavioral Intervention Plans

## **B. Methods for Promoting Safety and Preventing Violence**

### **1. Social and Emotional Learning for All Students**

Social and emotional learning and positive behavioral supports for students are addressed as appropriate as part of ongoing school improvement and professional development plans at all levels. The district is committed to ensuring that systems are in place to focus on personal growth and development where children develop social skills, coping skills, and effective problem-solving and decision making skills in real world settings.

Each school in the district implements practices and procedures that promote their school's mission statement and articulate environment and articulate procedures outlined in the school's Crisis Intervention Plan. Information is shared with families in the district through each school's home-school communications.

### **2. Behavioral Intervention to Support Students Facing or Posing Behavioral Challenges**

To support productive relationships and learning and to enhance connection to school for students who face or pose emotional or behavioral challenges, the following procedures are established in the district. The district recommends the use of behavioral intervention strategies that exemplify the following characteristics: there is an emphasis on learning; they promote safety, respect, and responsibility; they are designed to be preventative and proactive; they are potentially effective for all students; they reflect a belief that positive results can be achieved with appropriate strategies and supports.

Additionally, each school has developed a plan for providing professional development to ensure that all staff is proficient in providing positive behavioral supports for all students to support positive, respectful learning communities. Appropriate staff is provided with a range of behavioral interventions for dealing with and redirecting challenging behavior, including Functional Behavioral Assessment. Support for staff is made available at all levels through Teacher Support Team and Evaluation Team meetings.

### **3. Crisis Intervention: De-escalation Procedures**

Despite the use of positive behavioral supports and interventions, there may be instances when the behavior of one or more students escalates beyond the student's immediate control, creating danger of violence or self-injury. Safety precautions considered, the first course of action should be the application of specific intervention strategies designed to diffuse the situation by addressing students' emotional needs and de-escalating the immediate behavior. The intent of de-escalation is to restore the student(s) capacity to control the immediate impulse/behavior and move toward safer or more constructive resolution of the immediate problem situation.

In the event of student behavior representing a crisis, the following de-escalation procedures should be employed:

- Redirection using structured behavioral support strategies;
- Active listening and acknowledge of feelings;
- Review of expectations;

- Development of alternative strategies to address central issues;
- Removal of student;
- Removal of self and/or others.

#### 4. Crisis Intervention: Physical Restraint Restraint Procedures

It is the policy of the district that physical restraint/crisis intervention is used only in the following circumstances:

- Non-physical interventions were not or would not be effective; **and**
- The student's behavior poses a threat of imminent, serious physical harm to self and/or others; **and**, where applicable,
- In circumstances where a behavioral intervention plan is already developed for the student, the plan has been fully implemented as specified.

The district limits the use of such force to the amount and duration necessary and reasonable to protect a student or another member of the school community from assault or imminent, serious physical harm.

#### In the event that physical restraint becomes necessary:

- 1) Every attempt should be made to alert additional school personnel for observation or assistance.
- 2) Only the safest physical restraint methods are to be used.
- 3) Every effort should be made to isolate the restraint situation, to avoid prolonging or escalating the situation.
- 4) If the duration of a physical restraint is prolonged, or student becomes deliberately and dangerously assaultive, the students' parent(s) or guardian(s) must be notified to remove him/her from school as soon as possible to avoid further danger. Any contact with police should follow the district's policies.
- 5) If the student exhibits suicidal or homicidal indicators, the school crisis team must be contacted for further intervention in accordance with district policy.
- 6) The student should be released slowly from the restraint, in stages, to ensure that she/he has regained self-control and no longer presents an apparent danger.
- 7) The school nurse must treat any injury occurring during a restraint immediately. Injuries must be recorded in the Physical Restraint Report.
- 8) As soon as possible following the incident, but no later than the end of the school day, the staff member(s) who administered the restraint will document the incident in a Physical Restraint Report and inform the building principal or his designee. A copy of the report must be forwarded to the Superintendent's Office no later than the end of the next day.
- 9) Follow-up steps include parent notification, review of restraint with student, staff involved and building principal, and consideration of further action, including preventive behavioral interventions.

#### Restraint Prohibitions

Physical restraint is prohibited in the following circumstances, consistent with [Rhode Island Physical Restraint Regulations effective September 1, 2002](#):

- (a) As a means of punishment;
- (b) As in any intervention which is designed to subject, used to subject, or likely to subject the student to verbal abuse, ridicule or humiliation, physical pain, or which can be expected to cause excessive emotional trauma;
- (c) As in any intervention which denies adequate sleep, food, water, shelter, bedding or access to bathroom facilities;
- (d) As in a restrictive intervention which employs a device or material or objects that simultaneously immobilize all four extremities, including the procedure known as prone containment, except that prone containment may be used by trained personnel as a limited emergency intervention when a documented part of a previously agreed upon written behavioral intervention plan;
- (e) As in seclusion, unless under constant surveillance and observation when documented as part of a previously agreed upon written behavioral intervention plan;
- (f) As in any intervention that precludes adequate supervision of the student;
- (g) As in any intervention, which deprives the student of one or more of his or her senses.

#### Restraint Safety Procedures

The following safety procedures are in effect, consistent with [Rhode Island Physical Restraint Regulations effective September 1, 2002](#):

- (a) Restraint is administered in such a way so as to prevent or minimize physical harm. If, at any time during a physical restraint/crisis intervention, the student demonstrates significant physical distress, the student is released from the restraint immediately, and school staff is directed to take steps to seek medical assistance.
- (b) Program staff must review and consider any known medical or psychological limitations and/or behavioral intervention plans regarding the use of physical restraint/crisis intervention on an individual student.
- (c) Restraint is administered in such a way that the student is never at any time prevented from breathing or speaking. During the administration of a restraint, a staff member will continuously monitor the physical status of the student, including skin color and respiration. A restraint ceases immediately upon determination by the staff member administering the restraint that the student is no longer at risk of causing imminent physical harm to him or herself or others.
- (d) Following the release of a student from a restraint, the following follow-up procedures are implemented:
  - Appropriate staff will review the incident with the student, as appropriate, to address the behavior that precipitated the restraint;
  - The principal, or his designee, will review the incident with the staff person(s) who administered the restraint to discuss whether proper restraint procedures were followed and consider whether any follow-up is appropriate for the student and for students who witnessed the incident.

- The principal, or his designee, will review the incident with the student and consider whether and what follow-up is appropriate for the student and for students who witness the incident.
- School personnel will meet to determine whether the student requires a behavioral intervention plan as part of his/her education program, or, if one already exists, whether that plan needs to be modified or adjusted.

**C. Authorized Staff**

Only trained personnel authorized by the district may administer physical restraint/crisis intervention with students. Whenever possible, the administration of a physical restraint/crisis intervention shall be witnessed by at least one adult who does not participate in the restraint. This training requirement does not preclude any teacher, employee or agent of the district from using reasonable force necessary to protect students, other persons, or themselves from imminent, serious physical harm.

The following staff have received advanced training in the use of crisis intervention/physical restraint and are authorized either to administer restraint or to also serve as a school-wide resource to assist staff in ensuring proper administration of crisis interventions and physical restraint:

School	Staff	Designation/Authorization/Role
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High School	Principal, Asst. Principals, and other designees identified in school CIP	Trained to administer crisis intervention/physical restraint
Middle School	Principal, Asst. Principal, School Counselor Special Education staff, P.E. Teachers	Trained to administer crisis intervention/physical restraint
Hampden Meadows Nayatt Primrose Hill Sowams	Principal, School Counselor, School Nurse/Teacher, Special Education Staff	Trained to administer crisis intervention/physical restraint
District	School Psychologist	Qualified as district-wide trainer

#### Advanced Training for Authorized Staff: Training Requirements

In addition to the basic training provided all staff regarding these procedures, advanced training is required for staff considered by the district to be qualified to administer physical restraint/crisis intervention procedures with students:

##### Crisis Prevention

Standard - Prevention content must address the need to ensure the health and safety of all students, prior to and in avoidance of, physical restraint.

Main Components (including but not limited to):

- Analysis and organization of physical environment;
- Decision making in crisis situations;
- Non-threatening, non-verbal communication;
- Relationship building;
- Staff issues of self-awareness/self-control;
- Cultural sensitivity

##### Crisis Intervention

Standard - Intervention content must address the need to ensure the health and safety of students when it has been determined that physical restraint is required.

Training experiences must be responsive to needs and abilities of the individuals being trained.

#### Crisis Termination

Standard - Termination content must address the need to prepare the student for release from restraint and to prepare both the student and the environment for the student's re-entry into regular programming.

Main components (including but not limited to):

- Debriefing;
- Terminating restraint;
- Problem resolution.

#### Crisis Documentation

Standard - documentation content addresses the need to ensure that proper procedural, medical, due process, and proficiency documentation outlined in this brief has been followed.

### **D. Reporting Instances of the Use of Physical Restraint/Crisis Intervention**

As soon as possible following the incident, but no later than the end of the school day, the staff member(s) who administered the restraint will document the incident in a Physical Restraint Report (Appendix A) and submits it to the building principal or his designee. A copy of the report must be forwarded to the Superintendent's Office no later than the end of the next day. Each principal as well as the Superintendent's Office maintains an ongoing written record of all reported instances of physical restraint.

As soon as possible, but not later than the end of the next school day, the student's parent(s) or guardian(s) are notified either by telephone or individual conference of the restraint incident. A copy of the Physical Restraint/Crisis Intervention Report is to be sent to parent/guardian no later than two days after the incident (date copy sent is to be noted in appropriate area on report). Each year, as part of its reporting requirements, the district submits a report regarding all incidents of the use of physical restraint/crisis intervention to the Rhode Island Department of Education.

### **E. Procedures for Investigating Complaints**

Parents or guardians wishing to register a complaint regarding an individual Physical Restraint/Crisis Intervention Report may do so by completing a complaint form (Appendix B) and submitting it to the office of the Superintendent.

The Superintendent will designate an individual, or team, to investigate and resolve any concerns addressed in the complaint.

## Physical Restraint/Crisis Intervention Report

Name of Student: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Date of Report: \_\_\_\_\_

Person Completing Report: \_\_\_\_\_ (name)  
\_\_\_\_\_ (title/position)

Person(s) who administered restraint: \_\_\_\_\_ (name)  
\_\_\_\_\_ (title/position)

Physical restraint began at: \_\_\_\_\_ (time)

and ended at: \_\_\_\_\_ (time).

Duration: \_\_\_\_\_ (minutes)

Administrator informed following the restraint: \_\_\_\_\_ name (please  
initial) \_\_\_\_\_ title/position

Observers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location and activity in which restrained student, other students and staff in the vicinity were engaged when the restraint occurred:

Behavior prompting the restraint:

Description of de-escalation efforts and alternatives attempted:

Justification for initiating physical restraint/crisis intervention:

**Description of the physical restraint/crisis intervention implemented**

(a) Hold(s) utilized and rationale for type of hold:

(b) Student's behavior/reactions during restraint:

(c) How restraint ended:

(d) Did an injury occur in the process of restraint? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes: Student and/or Staff injured:

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Nature of the injury:

(e) Medical care provided (Include care provided, to whom, by whom):

**Follow-up Action**

(a) Further action(s) that the school has taken or will take:

(b) (if applicable) Development or modification of a behavior intervention plan as a result of the physical restraint (Include reference to any such plans contained in separate documents.):

Parent(s) or guardian(s) of the student referenced in this report were informed about this restraint incident on

Date: \_\_\_\_\_

Method of initial notification: \_\_\_\_\_ Conference \_\_\_\_\_ Phone  
(check one)

\_\_\_\_\_ Copy of report mailed to parent/guardian

CONTACT Name/position of staff member

(date mailed)

Barrington Public Schools  
PO Box 95  
283 County Road  
Barrington, RI 02806  
(401) 245-5000

Date: \_\_\_\_\_

Name of Complainant: \_\_\_\_\_

Address: \_\_\_\_\_

Child's Name: \_\_\_\_\_

School: \_\_\_\_\_

Specific Nature of Complaint:

\_\_\_\_\_  
Signature

Daytime telephone number: \_\_\_\_\_

Evening telephone number: \_\_\_\_\_

Please attach a copy of the **Physical Restraint/Crisis Intervention Report** that was mailed to you to this form. Approved 02/06/03