

Seclusion and restraint are crisis intervention strategies that are used in many schools. Because they are dangerous interventions, there are laws governing their use in Michigan. These laws are <u>MCL 380.1307a-h</u>. However, there is not a monitoring system to ensure that these laws are being followed properly, so it is important that you (parents & guardians) understand them so that you can advocate for your child if they are secluded or restrained at school.

**Seclusion** is the involuntary confinement of a child to a room or other space from which the child is physically prevented from leaving.

It Is **NOT** considered seclusion if the child is permitted to leave if desired, if it is part of an emergency lockdown drill, or if a child is receiving 1-on1 instruction as part of their education plan.

It **IS** considered seclusion even if an adult is present or if the door is not fully shut; if a child is physically prevented from leaving by a partially closed door, an adult's body blocking the exit, or any other means.

**Restraint** is an action that prevents or significantly restricts a child's movement.

There is a <u>list of situations</u> that are **NOT** considered restraint like an adult briefly holding a child to comfort, to remove a weapon, or to prevent an impulsive behavior that threatens their immediate safety like running out in front of a car.

The law requires that restraint is done by trained staff members called <u>Key Identified</u> <u>Personnel.</u>

Over 92% of seclusions & restraints in Michigan are used on students with disabilities<sup>1</sup>.

Seclusion and restraint are dangerous and traumatic not only to the individuals subjected to these practices, but also for the staff implementing them<sup>2</sup>.

There is no evidence that using seclusion or restraint is effective in reducing the occurrence of behavior problems<sup>3</sup>. Some studies indicate that seclusion and restraint use leads to an increase in the behaviors that staff members are attempting to eliminate<sup>4</sup>.

The forceful assertion of another person's will over one's own, along with the loss of control over one's body and environment, generates very negative emotions and has deep psychological and traumatic impacts on  $people^{5}$ .

A school's use of restraint or seclusion may have a traumatic impact on a student, such that if she were never again restrained or secluded, she might nevertheless have new academic or behavioral difficulties that, if not addressed properly could constitute a denial of FAPE (Free Appropriate Public Education)<sup>6</sup>.

Students in Michigan have died as a result of being restrained by trained staff<sup>2</sup>.

# If your child has a history of aggressive behavior, you can be proactive:

- Insist that <u>an Emergency Intervention</u> <u>Plan (EIP)</u> for avoiding the use of seclusion or restraint be put in place before a crisis situation arises.
- 2) Familiarize yourself with the <u>Michigan Department of Education's</u> <u>Guidelines</u> so that if your child is secluded or restrained, you are prepared to be a collaborator in the solution process

# If your child has been secluded or restrained, there are things you can do:

- Ask questions so that you understand what your child went through.
- 2) Make the debrief meeting a priority. Come with ideas that help your child when they are upset, as well as a list of the things that make the upset worse. Insist that a <u>Functional</u> <u>Behavior Assessment (FBA)</u> is done and changes made to your child's <u>Positive Behavioral Intervention and Supports (PBIS).</u>
- Be emotionally available for your child by expressing love, concern, and support, rather than blame.
- Find a counsellor or therapist who can help you and your child process the experience of seclusion or restraint.
- 5) Look for signs of trauma.
- If you believe that seclusion or restraint have been used in appropriately or that there is a systematic problem, report it.

**Emergency Intervention Plan (EIP)** is a thorough plan that is developed in partnership with parents or guardians and outlines exactly what strategies will be used in order to prevent the type of behavior that creates an emergency situation

An EIP is required if your child exhibits a pattern of behavior that poses a substantial risk of creating an emergency situation in the future that could result in seclusion or restraint.

**Emergency Seclusion and Restraint** are last resort interventions that are permitted only when a pupil's behavior poses imminent risk to the safety of the individual or others.

Seclusion or restraint may **NOT** be used as a form of discipline or punishment or in place of less restrictive alternatives.

Seclusion should generally not last more than 15 minutes for an elementary student or 20 minutes for older students

Restraint should generally not last longer than 10 minutes.

Students must be continually observed for indications of distress and have access to staff members who can use a student's primary mode of communication.

Seclusions & restraints must be documented in writing, provided to the parent within 1 school day, and a debriefing meeting held with parents **Prohibited Practices** are never allowed under any circumstances including emergency situations.

Corporal punishment (physical pain)

Deprivation of basic needs (bathroom)

Child abuse

Application of noxious substances that result in pain or extreme discomfort

Mechanical restraint (use of devices)

Chemical restraint (use of medications)

Restraint that negatively impacts breathing

Floor restraints, facedown position, or positions in which a child is bent over in such a way that it is difficult to breathe

Seated or kneeling restraints in which a child is bent over at the waist or that involves sitting or lying across a child's back or stomach

Prone restraint (lying flat chest down)

*Functional Behavior Assessment (FBA)* is a process schools use to figure out what's causing a challenging behavior.

An FBA leads to a plan with strategies to improve the behavior.

Be sure that the team looks at the classroom environment, your child's relationship with other students, teachers, and staff, as well as physical needs. Look for Signs of Trauma:

School Refusal: trying to avoid going to school

Hypervigilance: sensing threats when others don't see them

Trouble Sleeping or Nightmares: sometimes about the seclusion, restraint, or otherwise feeling trapped or helpless

Increased Behavioral issues or Aggression

Fear of School Staff Members

Flashbacks of the experience

Mentioning the experience over and over

Any distinct changes in personality or behavior

#### Be Emotionally Available:

Focus on managing your own stress around this experience. Having a child be secluded or restrained can be emotionally draining and stressful.

If your child is able to talk about the experience, try to listen without judgement. Realize that they did not want to be secluded or restrained. The behavior that resulted in the intervention was likely a stress response to an overwhelming experience rather than a deliberate choice. Try to be empathetic, stay calm, and believe them.

## **Asking Questions**

#### General questions for seclusion and restraint:

What behavior did my child have that made you believe seclusion or restraint was necessary?

- In order for seclusion or restraint to be legal, this must be something that poses immediate risk to the safety of your child or others.
- It is not legal for seclusion or restraint to be used as a punishment after somebody is hurt or for the destruction of property, for causing a disturbance, for non-compliance, for making a threat, for wandering off or running away, or any other behavior that is not an immediate, ongoing threat to the safety of your child or others.

What strategy did you try first? Why did you try that first? What was my child's response? Why do you think it didn't work? What strategy did you try next? Why did you try that next? What was my child's response? Why do you think it didn't work?

Did you try \_\_\_\_\_? (fill in the black with every calming strategy that you know works with your child, including eliminating a demand, task, or requirement, reading to him/her, watching a video on a screen, calling in a favorite staff member, offering a drink or snack, clearing other students out of the space to allow the meltdown to play out without needing seclusion or restraint)

 In order to be legal, seclusion or restraint may not be used in place of appropriate less restrictive interventions

Do you know why the key identified personnel weren't able to use proactive practices to prevent this behavior? Why didn't the de-escalation techniques work? Were these de-escalation techniques specific to my child (had they worked with my child before) or were they just generic techniques? How can we get these key identified personnel better training, support, or experiences so that their proactive practices and de-escalation techniques will work next time? What can be changed based on knowing that they didn't work this time?

 In order to be legal, staff members who use seclusion or restraint must be specially trained in proactive practices and de-escalation techniques and the prevention of emergency situations

### Questions specific to restraint:

Who were the staff members who were involved in restraining my child? What system were they trained in?

- o Many schools use Crisis Prevention Institute (CPI) techniques
- You can Google Crisis Prevention Institute holds to see image example of various holds

What hold did they use? Can you show me how it was done so that I can understand? What was my child's response? What did s/he say and do?

How long was my child in the hold? Why was it that long? How did you decide to let go?

• Restraint should end as soon as there is no longer a threat to safety and should not exceed 10 minutes. If it does, specific guidelines from MCL 380.1307c must be followed.

### Questions specific to seclusion:

Who were the staff members who were involved in secluding my child? Where was my child secluded? May I see the space?

• You have a right to see it. Do not take "no" for an answer. This is important to understanding your child's experience in case similar locations trigger responses later.

For how long was my child in the seclusion space? Why was it that long? How did you decide to let him/her out?

- Seclusion should end as soon as there is no longer a threat to safety and should not last longer than 15 minutes for elementary students and 20 minutes for older children.
- If it does, specific guidelines from MCL 380.1307c must be followed.

What was my child's response? What did s/he say and do?

#### More general questions for both seclusion and restraint:

When will you be conducting a Functional Behavioral Assessment (FBA)?

• An FBA is a process for trying to figure out the reason behind (function of) a behavior by observing a child over time and documenting what happened right before (antecedent) and right after (consequence) a behavior.

How will the Positive Behavioral Intervention and Support (PBIS) to facilitate the elimination of the use of seclusion or restraint be revised?

- PBIS is required at all Michigan schools to support students and prevent unwanted behavior.
- PBIS in Michigan has 3 tiers with all students receiving basic supports (tier 1), students who are at risk for developing more serious problem behaviors receiving greater supports (tier 2), and students with the greatest, most specific needs receiving intensive, individualized supports (tier 3) to prevent behavior challenges and emergency situations.
- If your student has been secluded or restrained, they should be receiving tier 3 support, meaning they should have a specific plan with formal assessments to identify their specific needs and specific strategies to help your student be successful in their environment both behaviorally and academically. If these tier 3 level supports are not preventing problematic behavior and emergency situations, they should be reevaluated and your student's individual Positive Behavior Interventions and Supports should be changed to better meet your child's needs.

When can we start working together on an Emergency Intervention Plan (EIP)?

• An EIP is a thorough plan that is developed in partnership with parents or guardians and outlines exactly what strategies will be used in order to prevent the type of behavior that creates an emergency situation

Can we please print out the outline in Michigan Law that walks us through the Emergency Intervention Plan (EIP) process?

- $\circ$  MCL 380.1307e outlines the 5 steps that the school must take in writing an EIP
- It outlines what the school must provide to the parent or guardian including the support strategies that will be used to reduce the risk of the student's behavior creating an emergency situation, examples of an emergency situation and a detailed explanation of the Positive Behavior Interventions and Supports (PBIS) that will be provided to your child in order to reduce the risk of behaviors that will create an emergency situation.
- You, as the parent or guardian, can offer ideas and suggestions of things that you know will help your student. The school should be open to using any appropriate intervention in order to prevent the use of seclusion and restraint with your child.

## Getting Help

If you are concerned about your child being secluded or restrained, first express your concerns to the school. If you believe that seclusion or restraint have been used inappropriately with your child, if it is happening repeatedly, or if you are not happy with the way the school is working to resolve the issues through an EIP, PBIS, or other preventing strategies, there are organizations that can help.



Site: <u>cilvilrights.justice.gov</u>

Phone: (202) 514-1247

Complaint: civilrights.justice.gov/report/

#### Citations

- 1) <u>Mischooldata.org/districtschool-data-files</u> Michigan's Official Education Data Source
- 2) U.S. Dept of Health & Human Services: Substance Abuse & Mental Health Service Admin (SAMHSA) Brief #1
- 3) U.S. Department of Education-<u>Restraint and Seclusion: Resource Document page iii</u>
- 4) U.S. Dept of Health & Human Services: Substance Abuse & Mental Health Service Admin (SAMHSA) Brief #1
- 5) Strategies to End Seclusion and Restraint: WHO Quality Rights Specialized Training. Jan 1, 2019 pp. 12-17
- 6) U.S. Dept of Education Office of Civil Rights <u>Fact Sheet: Seclusion & Restraint of Students with Disabilities</u>
- 7) CT Insider: 'He didn't deserve that': <u>Remembering young people who've died from restraint and seclusion</u>



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