

Lake Crystal-Wellcome Memorial Schools Restrictive Procedures Plan

Lake Crystal-Wellcome Memorial (LCWM) 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.

Lake Crystal-Wellcome Memorial 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 *Nonviolent Crisis Intervention* model. Restrictive procedures are only used in an emergency situation LCWM 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. The use of restrictive procedures may include the use of physical holding and/or the use of seclusion. Lake Crystal-Wellcome Memorial adheres to the standards and requirements of Minnesota Statutes 125A.094 *Restrictive Procedures for Children with Disabilities*.

Law	Restrictive Procedures Plan
Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)	Schools that intend to use restrictive procedures are required to 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.
Definition found at Minnesota Statutes, section 125A.0941(f)	Restrictive procedures means the use of physical holding or seclusion in an emergency. Restrictive procedures must not be used to punish or otherwise discipline a child.
Definition found at Minnesota Statutes, section 125A.0941(b)	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.

<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 2(f)</p>	<p>Restrictive procedures may be used only in response to behavior that constitutes an emergency, even if written into a child's Individual Education Plan (IEP) or Behavior Intervention Plan (BIP) / Positive Behavior Support Plan (PBSP)</p>
<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)(1)</p>	<p>I. Lake Crystal-Wellcome Memorial Schools intends to use the following restrictive procedure: Physical Holding.</p>
<p>Definition found at Minnesota Statutes, section 125A.0941(c)</p>	<p>A. Physical holding:</p> <ol style="list-style-type: none"> 1. 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.

Definition found at
Minnesota Statutes, section
125A.0941(c)

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. Lake Crystal-Wellcome Memorial intends to use the following types of physical holding:
 - a. ***CPI Children's Control Position*** is a physical hold that is designed to be used with a student that is smaller than the adult. Additional staff need to be present to assist the adult implementing the hold, monitor the safety of the student and staff and take other safety precautions as necessary.
 - b. ***CPI Team Control Position*** is a physical hold that is used to manage students who have become dangerous to themselves or others. Two staff hold the individual and additional staff assess the student and staff for signs of distress and take other safety measures as necessary.
 - c. ***CPI Transport*** is a physical hold that is a temporary, upright position that is used when the student is calm and needs to be moved to a safer place. Two staff assist with this position, one on either side of the student, with additional staff support as needed.
 - d. ***CPI Interim Control Position*** is a physical hold that is a temporary, upright position that allows staff to maintain control of both of the individual's arms for a short period of time. One staff is needed to implement this position, however additional staff are working as a part of the team to monitor and assist the student and staff with any other safety precautions.
 - e. ***CPI Physical Holding in a Standing Position*** is a physical hold that can include lower-level holding with one person placing their hands just above the elbows; a medium-level hold with two staff using the outside/inside principle of placing their inside arm to the inside of the student's arm and their outside arm holding the students arm just above the elbow or a higher-level holding position using the outside/inside principle where staff grasp their own inside arm with their outside hand.
 - f. ***CPI Physical Holding in a Seated Position*** uses the same outside/inside principles and levels of holding while all three individuals (two staff and the student) are all seated.

<p>Definition found at Minnesota Statutes, section 125A.0941(g)</p>	<p>B. Seclusion</p> <ol style="list-style-type: none"> 1. Seclusion means confining a child alone in a room from which egress is barred. 2. Egress may be barred by an adult locking or closing the door in the room or preventing the child from leaving the room.
<p>Definition found at Minnesota Statutes, section 125A.0941(g)</p>	<ol style="list-style-type: none"> 3. Removing a child from an activity to a location where the child cannot participate in or observe the activity is not seclusion.
<p>Requirements found at Minnesota Statutes, section 125A.0942, Subdivision 3(a)(6)</p>	<ol style="list-style-type: none"> 4. Lake Crystal-Wellcome Memorial does not use seclusion.
<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)(2)</p>	<p>II. Lake Crystal-Wellcome Memorial will implement a range of positive behavior strategies and provide links to mental health services.</p>
<p>Definition found at Minnesota Statutes, section 125A.0941(d)</p>	<p>A. Positive behavioral interventions and supports means interventions and strategies to improve the school environment and teach children the skills to behave appropriately.</p>

<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)(2)</p> <p>Encouragement found at Minnesota Statutes, section 125A.0942, Subdivision 6¹</p>	<p>B. Lake Crystal-Wellcome Memorial implements the following positive behavior strategies</p> <p>LCWM Elementary School is in the sixth year of a Minnesota Department of Education grant to participate in a school-wide Positive Behavioral Interventions and Support Program. The program is a systems approach to discipline that emphasizes prevention, social skills, instruction, and data based decision making to reduce problem behaviors and improve academic performance. Our slogan is “Noble Knights: Be Respectful, Be Responsible, Be Safe.” Our school focuses on the positive behaviors of all students. Recognition slips are handed out to individual students and classrooms that are following the rules of the school and being good citizens. Slips are collected in the school and student names are drawn each week for a special recognition award. The committee recognizes positive lunchroom and playground behavior throughout the year. Students that receive zero referrals during the school year are also recognized. A behavior expectation matrix was designed for the classroom, hallway, bathroom, lunchroom, recess, media center, music/band, physical education, and assemblies. Forms are available for staff use for reporting Level 1 Minor and Level 2 Major behavior incidents. Parents will be notified with the slip being sent home with the student for Level 1 incidents. Students that receive a Level 2 slip meet with the principal. Each child’s consequences for behavior are determined by the teacher or principal. Staff is given a variety of choices of interventions to help change the student’s behavior. Many of the interventions/consequences are taken care of during recess or after school. The PBIS Team will meet with students and/or parents of students that receive multiple referrals to work as a team to change a student’s behavior.</p>
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¹ Minnesota Statutes, section 125A.0942, Subd, 6 encourages school districts to establish effective school-wide systems of positive behavior interventions and supports.

<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)(2)</p>	<p>C. Lake Crystal-Wellcome Memorial provides the following links to mental health services</p> <p>LCWM Elementary employs a School Social Worker who works with teachers, administrators, counselors, psychologists, nurses and other staff. School Social Workers link home, school and community through the use of assessment, consultation, and coordination of services and referrals to community resources. School Social Workers are professionally trained to understand the needs of students who present problems that interfere with learning.</p> <p>Ashleigh Foster, L.S.W. can be reached at (507) 726-2320 extension 225.</p> <p>Additional children’s mental health services can be accessed through the child’s county of residence including: Blue Earth County: (507) 304-4444 or http://www.blueearthcountymn.gov/index.aspx?NID=273</p>
<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)(3); <i>See also</i>, Minnesota Statutes, section 122A.09, Subdivision 4(k) and Minnesota Rule 8710.0300</p>	<p>III. Lake Crystal-Wellcome Memorial will provide training on de-escalation techniques.</p> <p>A. Minnesota Valley Education District provides the following training on using positive behavior interventions for Lake Crystal-Wellcome Memorial:</p> <ol style="list-style-type: none"> 1. Crisis Prevention Institute (CPI) Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. Positive Behavior Support Plan Development and Implementation 3. Social Skills Curriculum Development and Instruction 4. Conducting Functional Behavioral Assessments <p>B. Minnesota Valley Education District provides Lake Crystal-Wellcome Memorial staff 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:</p> <ol style="list-style-type: none"> 1. Special Education Due Process and Compliance 2. Reading Intervention Strategies and Curriculum Development 3. Writing Effective Goals 4. Assistive Technology

<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)(4)</p>	<p>IV. Minnesota Valley Education District and Lake Crystal-Wellcome Memorial will monitor and review the use of restrictive procedures in the following manner:</p>
<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 3(a)(5)</p>	<p>A. Documentation:</p> <ol style="list-style-type: none"> 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: <ol style="list-style-type: none"> 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.
	<ol style="list-style-type: none"> 2. Attached, as Appendix A, is Lake Crystal-Wellcome Memorial's forms used to document the use of physical holding or seclusion.
<p>Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 1(a)(4)(i)</p>	<p>B. Post-use debriefings, consistent with documentation requirements:</p> <ol style="list-style-type: none"> 1. 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 the student's case manager, within <i>24 hours</i> after the incident concludes.
	<ol style="list-style-type: none"> 2. The post-use debriefing will review the following requirements to ensure the physical holding was used appropriately (Appendix B) and addresses the following information:

Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 3(a) ²	a) Whether the physical holding was used in an emergency.
Requirement found at Minnesota Statutes, section 125A.0942, Subdivision. 3(a)(1) ³	b) Whether the physical holding was the least intrusive intervention that effectively responds to the emergency.
Requirement found at Minnesota Statutes, section 125A.0942, Subdivision 3(a)(2) ⁴	c) Whether the physical holding was used to discipline a noncompliant child.

² Minnesota Statutes, section 125A.0942, Subd. 3(a) requires that restrictive procedures only be used in response to behavior that constitutes an emergency.

³ Minn. Stat. § 125A.0942, Subd. 3(a)(1) requires physical holding or seclusion be the least restrictive intervention that effectively responds to the emergency.

⁴ Minn. Stat. § 125A.0942, Subd. 3(a)(2) requires physical holding or seclusion NOT be used to discipline a noncompliant child.

Requirement found at Minn. Stat. § 125A.0942, Subdivision 3(a)(3) ⁵	d) 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.
Requirement found at Minn. Stat. § 125A.0942, Subdivision 3(a)(4) ⁶	e) Whether the staff directly observed the child while physical holding was being used.

⁵ Minn. Stat. § 125A.0942, Subd. 3(a)(3) requires the physical holding or seclusion end when the threat of harm ends and the staff determines the child can safely return to the classroom or activity.

⁶ Minn. Stat. § 125A.0942, Subd. 3(a)(4) requires staff to directly observe the child while physical holding or seclusion is being used.

Requirement found at Minn. Stat. § 125A.0942, Subdivision 3(a)(5) ⁷	f) Whether the documentation was completed correctly.
Requirement found at Minn. Stat. § 125A.0942, Subdivision 2(b) ⁸ and Minn. § 125A.0942, Subdivision 2(f) ⁹	g) Whether the parents were properly notified.

⁷ Minn. Stat. § 125A.0942, Subd. 3(a)(5) requires the staff person who implements or oversees the physical holding or seclusion to document, each time physical holding or seclusion is used, 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.

⁸ Minn. Stat. § 125A.0942, Subd. 2(b) requires a school to 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 is sent within two days by written or electronic means or as otherwise indicated by the child's parent.

⁹ Minn. Stat. § 125A.0942, Subd. 2(f) provides that an IEP team may plan for using restrictive procedures and may include these procedures in a child's IEP or BIP; however, the restrictive procedures may be used only in response to behavior that constitutes an emergency. The IEP or BIP shall indicate how the parent wants to be notified when a restrictive procedure is used.

Requirement found at Minn. Stat. § 125A.0942, Subdivision 2(c) ¹⁰	h) Whether an IEP team meeting needs to be scheduled. Staff are trained that a meeting needs to be scheduled after two incidents of restraint and/or seclusion for a child.
Requirement found at Minn. Stat. § 125A.0942, Subdivision 2(a) ¹¹	i) Whether the appropriate staff used physical holding or seclusion.
Requirement found at Minn. Stat. § 125A.0942, Subdivision 5	j) Whether the staff that used physical holding or seclusion was appropriately trained.
	3. If the post-use debriefing reveals that the use of physical holding or seclusion was not used <i>appropriately</i> Lake Crystal-Wellcome Memorial will ensure immediate corrective action is taken, by requiring a mandatory re-training of all staff involved in the use of Restrictive Procedures and a review of the district's Restrictive Procedure Plan within one week of the incident. This training and review will be facilitated by one of the district's CPI instructors. In addition the Director of Special Education will meet with any identified staff to discuss additional supervision and/or procedures to prevent any future incidents of non-compliance.

¹⁰ Minn. Stat. § 125A.0942, Subd. 2(c) requires the district to hold a meeting of the IEP team: within ten calendar days after district staff use restrictive procedures on two separate school days within 30 calendar days or a pattern of use emerges and the child's IEP or BIP does not provide for using restrictive procedures in an emergency; or at the request of a parent or the district after restrictive procedures are used. The district must review use of restrictive procedures at a child's annual IEP meeting when the child's IEP provides for using restrictive procedures in an emergency.

¹¹ Minn. Stat. § 125A.0942, Subd. 2(a) requires restrictive procedures only be used 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, or mental health professional, who has completed training.

<p>Requirement found at Minn. Stat. § 125A.0942, Subdivision 1(b)¹²</p>	<p>C. Oversight committee</p> <p>1. Minnesota Valley Education District and Lake Crystal-Wellcome Memorial publicly identifies the following oversight committee members <i>[list below the name and title of the staff who will participate on the oversight committee]</i>.</p> <ul style="list-style-type: none"> a) Amy Johnson: L.I.C.S.W.; b) Melissa Wagner: expert in positive behavior intervention; c) Bob Vaadeland: special education administrator; d) John Lustig: Minnesota Valley School administrator; e) Dan Beert: Lake Crystal-Wellcome Memorial Elementary Principal.
<p>Requirement found at Minn. Stat. § 125A.0942, Subdivision 1(a)(4)(ii)¹³</p>	<p>2. Minnesota Valley Education District/ Lake Crystal-Wellcome Memorial's oversight committee meets quarterly on:</p> <ul style="list-style-type: none"> a) First Monday in November b) First Monday in February c) First Monday in April d) First Monday in June

¹² Minn. Stat. § 125A.0942, Subd, 2(b) requires schools to annually publicly identify oversight committee members who must at least include: (1) a mental health professional, school psychologist, or school social worker; (2) an expert in positive behavior strategies; (3) a special education administrator; and (4) a general education administrator.

¹³ Minn. Stat. § 125A.0942, Subd. 1(a)(4)(ii) requires that an oversight convene to undertake a quarterly review of the use of restrictive procedures.

<p>Requirement found at Minn. Stat. § 125A.0942, Subdivision (1)(a)(4)(ii)</p>	<p>3. Minnesota Valley Education District/ Lake Crystal-Wellcome Memorial’s oversight committee will review the following:</p> <ul style="list-style-type: none"> a) 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 restrictive procedure, the individuals involved, or other factors associated with the use of restrictive procedures; b) The number of times a restrictive procedure is used school wide 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; and f) Proposed actions to minimize the use of restrictive procedures.
<p>Requirement found at Minn. Stat. § 125A.0942, Subdivision 1(a)(5) and Subdivision 5</p>	<p>V. Lake Crystal-Wellcome Memorial staff who use restrictive procedures, including paraprofessionals, received training in the following skills and knowledge areas:</p> <p>A. Positive behavioral interventions</p> <ul style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI. <p>B. Communicative intent of behaviors</p> <ul style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.

	<p>C. Relationship building</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.
	<p>D. Alternatives to restrictive procedures, including techniques to identify events and environmental factors that may escalate behavior</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.
	<p>E. De-Escalation methods</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.
	<p>F. Standards for using restrictive procedures only in an emergency</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.

	<p>G. Obtaining emergency medical assistance</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.
	<p>H. The physiological and psychological impact of physical holding and seclusion</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.
	<p>I. Monitoring and responding to a child’s physical signs of distress when physical holding is being used</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.
	<p>J. Recognizing the symptoms of and interventions that may cause positional asphyxia when physical holding is used</p> <ol style="list-style-type: none"> 1. CPI Trainings: Initial Foundations Training; Keypoint Refresher Integrating PBIS; Effective Limit Setting; The Power of Listening; Bullying Behaviors. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.

	<p>K. District policies and procedures for timely reporting and documenting each incident involving use of a restrictive procedure; and</p> <ol style="list-style-type: none"> 1. During all CPI trainings and refreshers, staff are given additional instruction for the district's procedures for timely reporting and documenting of each incident involving the use of a restrictive procedure. This includes how to document and who to notify. 2. See Appendix C for list of staff, and dates they attended Initial Foundation and Refreshers. All staff who attend and pass initial training for eight hours and attend at least three hours of refresher training are certified by CPI.
	<p>L. Schoolwide programs on positive behavior strategies</p> <ol style="list-style-type: none"> 1. All staff are trained on the use of positive behavior strategies as a part of mandatory before school meetings, during ongoing staff meetings and PLC (Professional Learning Community) meetings throughout the school year. In addition, all special education teachers are trained annually in mandatory due process, which includes the creation and implementation of Positive Behavior Support Plans (PBSP). 2. All special education staff at the school are automatically trained in all of the strategies listed in this plan (See Section II, B on page 4).

Prohibitions found at Minn. Stat. § 125A.0942, Subdivision 4(1-9)

- VI. Lake Crystal-Wellcome Memorial 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.**

Appendix A: Forms Documenting the Use of Restrictive Procedures

Use of Restrictive Procedures: Physical Hold

Student: ID: Date:

School: Grade: DOB:

Gender: Primary Disability:

Part A. Is the student [Hispanic/Latino](#)?




Yes No

Part B. What is the student's race? (Choose one or more)


- [American Indian or Alaska Native](#)
- [Asian](#)
- [Black or African American](#)
- [White](#)
- [Native Hawaiian or Other Pacific Islander](#)

Directions: The staff person who implemented or oversaw a physical hold must complete this form each time a physical hold is utilized.

Staff involved:

Order	Name of Team Member First/Last	Title		Remove
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	

* Your team member list can be edited in "Your Setup". [[Print team member list.](#)]

Person completing this form: 

Position:

Phone:

EMERGENCY

Was physical holding used to protect student or others from physical injury?

Yes No

Description of the emergency situation:

Description of the incident that led to physical holding:

PHYSICAL HOLDING

Description of the physical holding and a brief description of the student's behavioral and physical status:

Was physical holding 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 physical holding end when the threat of harm ended and staff determined that the student could safely return to the classroom or activity:

Yes No

Explain:

Did staff directly observe the child during the physical hold:

Yes No

Explain:

Did staff sustain an injury as a result of the physical holding:

Yes No

Did the student sustain an injury as a result of the physical holding:

Yes No

Time physical hold began: : AM Ended: : AM Total Time:

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 home within two (2) days if unable to notify on the same day.


Parent:

Date: 

Time: : AM

Notified by: 

How notified: 



Appendix B: Form Documenting Staff Debriefing

Staff Debriefing Meeting Documentation Form

Date of Incident:

Date of Debriefing:

Student:

ID:

DOB:

School:

Grade:

Directions: Within two (2) school days following the use of a restrictive procedure, 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 who was not involved in the incident.

Student was on an IEP: Yes No

Was IEP implemented correctly? Yes No

Was a BIP in place: Yes No

Was BIP implemented correctly? Yes No

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



Briefly describe the impact of these less restrictive interventions:

An empty video player interface with a large rectangular frame, a vertical stack of four control buttons on the right side, and a horizontal progress bar at the bottom with left and right arrow buttons.

What behavior necessitated the use of a restrictive procedure?

An empty video player interface with a large rectangular frame, a vertical stack of four control buttons on the right side, and a horizontal progress bar at the bottom with left and right arrow buttons.

Describe student and staff behavior during the incident:

An empty video player interface with a large rectangular frame, a vertical stack of four control buttons on the right side, and a horizontal progress bar at the bottom with left and right arrow buttons.

What actions helped or didn't help?

An empty video player interface with a large rectangular frame, a vertical stack of four control buttons on the right side, and a horizontal progress bar at the bottom with left and right arrow buttons.

Describe the procedure used to return the student to his/her routine activity:

An empty video player interface with a large rectangular frame, a vertical stack of four control buttons on the right side, and a horizontal progress bar at the bottom with left and right arrow buttons.

Was the hold/seclusion the response to an emergency situation?

Yes No

Was the hold/seclusion the least restrictive intervention?

Yes No

Did the hold/seclusion end when the threat of harm ended?

Yes No

Is corrective action needed?

Yes No

Is the behavior likely to reoccur?

Yes No

Follow-up action to prevent the need for future use of restrictive procedures:

Behavior History:

Other restrictive procedures used in the last 4 weeks:

Yes No

Restrictive procedures used twice in a month:

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)

Facilitator: 

1	<input type="text"/>	<input type="text"/>		
2	<input type="text"/>	<input type="text"/>		
3	<input type="text"/>	<input type="text"/>		
4	<input type="text"/>	<input type="text"/>		
5	<input type="text"/>	<input type="text"/>		

* Your team member list can be edited in "Your Setup". [[Print team member list.](#)]

Appendix C: Staff Trained in CPI, Including Mandatory Training Requirements

LCWM	Initial	Keypoint	Limit Setting	Bullying
Rose Pierson	8/22/2011	8/24/2015	8/25/2014	
Carol Goebel	3/23/2012	9/19/2014 (8)	11/6/2015	
Kara Wasson	3/23/2012	4/5/2013	11/11/2016	4/15/2015
Whitney Kuehn	3/23/2012	4/5/2013	11/11/2016	4/15/2015
DeDe Peterson	3/23/2012	4/5/2013	11/11/2016	4/15/2015
Lori Friedrichs	3/23/2012	4/5/2013	11/11/2016	4/15/2015
Shawn Lee	3/23/2012	4/5/2013	11/11/2016	4/15/2015
Danielle Deopere	12/10/2012	11/14/2014 (8)	10/5/2015	
Rebecca Sittig	8/19/2013	8/24/2015	8/25/2014	
Nadine Meyer	8/19/2013	8/24/2015	8/25/2014	
Bonnie Barott	8/19/2013	8/24/2015	8/25/2014	
Kaci Wilson	8/19/2013	8/24/2015	8/25/2014	
Becky Schauchrerer	8/19/2013	8/24/2015	8/25/2014	
Cynthia Gaylor	8/19/2013		10/5/2015	
Tammi Born	8/19/2013	8/24/2015	8/25/2014	
Lila Kahmann	11/4/2013		10/5/2015	11/3/2014
Jennifer Bierma	8/19/2013	8/24/2015	8/25/2014	
Tyler Gimmestad	9/19/2014	8/24/2015		
Anna Rollings	9/19/2014	8/24/2015		
Karen McMonagle	9/19/2014	8/24/2015		

Rachel Siebert	9/19/2014	8/24/2015		
Debbie Grant	9/19/2014	8/24/2015		
Teri Grenz	9/19/2014	8/24/2015		
LeAnn Scott	9/19/2014	8/24/2015		
Holly Peterson	10/9/2015			
Kim Merrill	10/9/2015			
Britta Sharkey	10/9/2015			
Jennifer Plasschaert	10/9/2015			
Deann Johnson	10/9/2015			
Tammi Greenough	10/9/2015			
Ashleigh Campbell	10/9/2015			
Nicole Klinkner	12/14/2015			
Tanya Jones	12/14/2015			
Jenny Eilerman	12/14/2015			
Jenny Friedrichs	10/3/2016			
Ryley Becker	10/3/2016			
Linda Costumbrado	10/28/2016			
Monica Grannis	10/28/2016			
Marri Bateman	10/28/2016			
Janet Knakmuhs	10/28/2016			
Carol Dunker	10/28/2016			
Heather Hendriks	10/28/2016			

