The Timeout and Physical Restraint Policy

This policy addresses administrative practices and procedures for use of physical restraint in The School at Springbrook. ***Time out is prohibited.***

At Springbrook, we believe that challenging behavior exhibited by students is an attempt to communicate a message, and is a function of the person in their environment. We believe that behavior can be changed through functional communication training, positive reinforcement, and the systematic and consistent application of behavioral theory and technique.

Springbrook's priority is protecting the health and safety of our students while promoting functional skill acquisition, academic achievement and independence. In order to accomplish this, we have implemented a program based on the use of positive behavioral supports and interventions. Classroom environments have been structured to foster learning and minimize behaviors which might interfere (such as aggression, self-injury or property destruction). Behavioral intervention and support at Springbrook is designed to allow each individual to function as independently as possible, enabling the person to reach his or her highest potential and enjoy life to the fullest.

In the School at Springbrook, students may be provided with individualized behavior support plans which are implemented consistently by all staff members to prevent and replace behaviors targeted for reduction. These plans make use of proactive interventions, active interventions, reinforcement contingencies and, in some cases, the use of emergency/restrictive interventions. For our residential students, we ensure that these plans are carried out in the residence and the school setting each day. For day students, parents are provided with a copy and encouraged to implement the techniques at home if feasible and applicable.

We value quality therapy services at Springbrook. Each student who has need is assigned to a behavior specialist/analyst who is either board certified and NYS licensed or actively seeking licensure/certification. These behavior specialists design treatment plans and work closely with teachers, educational staff, house managers, parents, and direct support professionals to oversee the implementation and training of staff on the behavior plans across environments.

This team consults with NYS licensed psychologists/BCBA-D for supervision as appropriate. We emphasize the use of data-based decision making. Therefore, Springbrook staff members record behavioral data on every shift to allow for the objective evaluation of behavioral interventions.

Use of Physical Intervention in The School at Springbrook

In keeping with state and federal regulations, we may utilize physical interventions/restraint (SCIP-R) only when such intervention or force is necessary to prevent imminent danger or harm to people. Factors which may precipitate the use of physical restraint include: imminent physical injury or potential physical injury to any individual; property damage which will result in imminent danger or serious harm; and/or situations in which alternative procedures and methods not involving force cannot be reasonably employed to ensure safety.

- The least restrictive technique for the briefest duration (in accordance with developmentally appropriate limitations) needed to ensure such safety will be utilized. One physical restraint may not exceed ten minutes.
- Physical restraint is never used in a manner that restricts the ability to breathe or communicate or harms the student. Staff using physical intervention are dually certified in CPR and First Aid and must monitor students for safety, discontinuing interventions if safety is compromised.
- **The following are prohibited:**

  Corporal punishment: Any act of physical force upon a student for the purpose of punishment.

  Aversive intervention: Intended to induce pain or discomfort for the purpose of decreasing/eliminating student behavior

  Timeout: A behavior management technique that involves the monitored separation of a student in a non-locked setting and is implemented for the purpose of de-escalating, regaining control, and preparing the student to meet expectations to return to their education program.

  Time out does not include:

A student initiative or requested break to use coping skills, sensory input or self-regulation strategies

Use of a room or space containing coping tools or activities to assist a student to calm, self-regulate, or use intervention strategies consistent with the student with a disability's behavior plan

A teacher removal, in school-suspension or other appropriate disciplinary action

We adhere to section 200.22(c) of the NYSED regulations re: use of time out.

Seclusion: The involuntary confinement of a student alone in a room or space that they are physically prevented from leaving or may perceive

they cannot leave at will. Also, placing a student in a locked room or space where they cannot be continuously observed and supervised.

Prone Physical restraint: Physical or mechanical Physical restraint in a face down position

- Physical restraint is only used when there is no known medical contraindication to its use for a particular student. A body check will follow the use of physical restraint. Nursing will be contacted immediately if students are injured.
- Physical restraint is not used as discipline, punishment, retaliation or a substitute for appropriate positive intervention or replacement behaviors.
- Physical restraint is not used to prevent property damage except in situations where there is imminent danger of harm and the student has not responded to positive, proactive interventions.

Data collection to monitor patterns

- All physical restraints are documented. Following a physical restraint, an administrator or their designee shall review the documentation and debrief with staff members, and where appropriate, the student, regarding the use of physical restraint. The debriefing will be recorded on the Restrictive Intervention Application (RIA) form.
- The SCIP-R reduction committee will review data on the use of physical restraints on a quarterly basis, addressing any trends, noteworthy patterns, problems or concerns and actively working to reduce physical restraints to the safest level possible. The committee includes school administrators, behavior analysts, department heads, and Quality Assurance Dept. representatives. Behavior analysts will also generate a quarterly progress monitoring review noting the number of physical restraints and the use of the behavior intervention plan including but not limited to fidelity, efficacy, data, necessity for the plan, and any recommended changes.

NYSED regulations state that "physical restraint shall not be used as a planned intervention on a student's IEP, 504, behavior plan or other plan." In contrast, OPWDD's regulations state that physical restraints categorized as "intermediate and/or restrictive physical intervention techniques" are specified on a person's behavior support plan. For residential school students whose programs are

regulated by both NYSED and OPWDD, NYSED regulations pertain to the school day and school sponsored functions while OPWDD's regulations pertain to non-school hours during residential care.

Staff training

- Staff who utilize interventions/physical restraints will be trained annually in accordance with the physical restraint curriculum which includes evidence based, positive, proactive strategies for student support, prevention techniques, and de-escalation, in addition to safe and proper physical restraint. We currently utilize SCIP-R. All school staff will be trained on policies and procedures pertaining to the use of physical restraint and the prohibition of corporal punishment, aversive interventions, seclusion, prone physical restraint and timeout in the School at Springbrook.

Parent communication: We believe that parents are an integral part of all treatment teams and we value their input.

- Parents or guardians must be notified on the day that a physical restraint takes place in the school setting. Failed attempts to reach a parent will be documented and reported to the student's CSE. Parent notifications and attempts are recorded on the RIA. CSE notification is documented by school administrators. Parents will be offered a copy of the data collection form which details the demographic information for the student, factors precipitating the physical restraint, the proactive and positive interventions utilized prior to the need for physical restraint, and the details regarding the physical restraint itself (location, technique, duration, etc.), in addition to whether the student has a behavior plan, 504, or IEP and whether that plan was followed. Such documentation must be provided within three school days. Parents are offered the opportunity to meet with an Administrator regarding the use of physical restraint. Tracking forms/documentation are maintained by Springbrook.
- This policy will be posted on our website at www.springbrookny.org and provided upon request for public viewing and/or for parents or persons in parental relationships of students. An annual report on the use of physical restraint, timeout, substantiated and unsubstantiated allegations of corporal punishment, mechanical physical restraint and aversive interventions, prone physical intervention and/or seclusion will be submitted to NYSED and/or a child's home school district in a manner prescribed by the Commissioner in accordance with the regulations.

7.2024