

## Use of Restraint and Seclusion

### A. General Guidelines

1. Parents will be provided verbal or written notification by the school staff following the use of physical restraint or seclusion by the end of the day on which the incident occurred;
2. A building administrator will be notified as soon as practicable whenever physical restraint and/or seclusion has been used;
3. A district Physical Restraint and/or Seclusion Incident Report must be completed and copies provided to those attending the debriefing meeting for review and comment;
4. A documented debriefing meeting must be held within two school days after the use of restraint and/or seclusion; staff members involved in the intervention must be included in the meeting. The debriefing team shall include a building administrator.
5. School principals, counselors and special education employees working with students at heightened risk for restraint shall received initial training consistent with the training standards of the selected training program. Subsequent training will include completion of refresher training, by a certified trainer, on a biennial schedule.

### B. The completed Physical Restraint and/or Seclusion Incident Report Form shall include the following:

1. Name of the student;
2. Name of staff member(s) administering the physical restraint or seclusion;
3. Date of the restraint or seclusion, and the time the restraint or seclusion began and ended;
4. Location of the restraint or seclusion;
5. A description of the restraint or seclusion;
6. A description of the student's activity immediately preceding the behavior that prompted the use of restraint or seclusion;
7. A description of the behavior that prompted the use of restraint or seclusion;
8. Efforts to de-escalate the situation and alternatives to restraint or seclusion that were attempted;

9. Information documenting parent contact and notification;
10. A summary of the debriefing meeting held;and
11. Completed the Physical Restraint and/or Seclusion Incident Report form should be copied to the Director of Special Services for review and filing.

**C. Physical restraint/seclusion as a part of a behavioral support plan in the student's Individual Education Program (IEP) or section 504 plan.**

1. Parent participation in the plan is required;
2. The IEP team that develops the behavioral support plan shall include knowledgeable and trained personnel, including a behavioral specialist and a district representative who is familiar with the physical restraint training practices adopted by the district;
3. Prior to the implementation of any behavioral support plan that includes restraint and/or seclusion a functional behavioral assessment must be completed. The assessment plan must include an individual threshold for reviewing the plan;

**D. Use of restraint and/or seclusion in an emergency by school administrator, staff or volunteer to maintain order or prevent a student from harming his/herself, other students, school staff or property:**

Use of restraint and or seclusion under these circumstances with a student who does not have restraint and/or seclusion as a part of their IEP or 504 plan is subject to all of the requirements established by this administrative regulation with the exception of those specific to plans developed in an IEP or a 504 plan, 3.(a), (b), 9(c) and (d).

**OREGON CITY SCHOOL DISTRICT  
PHYSICAL RESTRAIN OR STUDENT SECLUSION INCIDENT REPORT**

<b>Name of the Student:</b>			<b>Grade:</b>			<b>School:</b>		
<b>Date of the Restrain:</b>			<b>Time Restrain started:</b>			<b>Time restraint ended:</b>		
<b>Date of Behavior support plan:</b>								
Location of the restrain or seclusion:								
Name of staff member(s) administering the physical restraint or seclusion:								
Describe the restraint or seclusion method or technique:								
Describe the activity in which the student was engaged immediately preceding the behavior that prompted the use of restraint or seclusion:								
Describe the behavior that prompted the use of restraint or seclusion:								
Describe the efforts to de-escalate the situation and alternatives to restraint or seclusion that were attempted:								
When were the student's parents contacted (date and time): _____ How were they contacted: _____ Who contacted the parent or guardian? _____								
Debrief meeting participants:								
Meeting decisions: (change BSP, request consultation, additional functional behavioral analysis)								
What was decided?								
Form completed by: _____ Date: _____								