AUTHORITY

Pursuant to Chapter 14 Regulations of the Pennsylvania Code, regarding special education services and programs, charge each education agency in the Commonwealth with the primary responsibility for having in effect a written positive behavior support policy for special education students.

REVIEW

This regulation shall be periodically sent to the official designated by the Pennsylvania Department of Education Bureau of Special Education as the District’s “single point of contact” for review and comment.

DEFINITIONS

“Assigned Responsible Employee” means a District employee assigned to implement or monitor a behavior intervention pursuant to this Policy.

“Break Area/Room” means a space inside or very close to an autistic support classroom designated for student use to facilitate sensory de-escalation or regulation.

“Calming Room” means a room designated as a location for students who require frequent and concentrated behavior interventions to de-escalate or regulate their behavior.

“Clear and present danger of imminent physical harm” means the student is acting in a manner as to be a clear and present danger of causing imminent physical harm to himself/herself or another person as the result of acute or episodic aggressive or self-injurious behavior. Imminent means about to happen, but has not yet happened. In other words, a student may be restrained before the student has actually caused harm. Examples of such behavior would include violent actions, such as attempts by the student to hit, kick, scratch or bite, or speech by the student threatening violent actions that the student appears capable of carrying out if not restrained. It does not include simple non-compliance or damage to property that does not also involve danger of physical injury as well.

“Positive Behavior Supports” means supports for students with disabilities who require specific interventions to address behavior that interferes with that student’s or other students’ learning. These include methods that utilize positive reinforcement and other positive techniques to shape a student’s behavior, ranging from the use of positive verbal statements as a reward for good behavior to specific tangible rewards.
“Restraint” means the application of physical force, with or without the use of any device, for the purpose of restraining the free movement of a student’s body. The term does not include briefly holding, without force a student to calm or comfort the student, guiding a student to an appropriate activity, or holding a student’s hand to safely escort the student from one area to another. The term does not include hand-over-hand assistance with feeding or task completion and techniques prescribed by a qualified medical professional for reasons of safety or for therapeutic or medical treatment, as agreed to by the student’s parents/guardians and specified in the IEP.

INTERVENTION RATIONALE

The Lower Merion School District, in order to ensure that each student learns to work cooperatively, be a responsible citizen, and show tolerance to all members of the school community, has made reasonable and necessary rules governing the conduct of students in school which are contained in the Student Rights and Responsibilities, Policy Guides No. 235. If a student is deemed to be an eligible student under Chapter 14, the Student Rights and Responsibilities is followed to the extent that the eligible student’s right to a free and appropriate public education, including special education and services, is not violated.

This Positive Behavior Support Policy utilizes four (4) stages of intervention ranging from less to more restrictive and should be referred to prior to disciplining a student with a disability. Positive techniques for the development, change and maintenance of target behaviors shall be attempted prior to the use of more intrusive strategies. If strategies are unsuccessful at any stage of intervention, the IEP Team will convene to determine if additional strategies are warranted. Parental consent must be obtained through the IEP process before using restraining or intrusive procedures not set forth in the IEP. The following aversive techniques of handling behavior are considered inappropriate at all phases of intervention and are prohibited according to Chapter 14:

1. Corporal Punishment
2. Punishment for a manifestation of a student’s disability
3. Locked rooms, locked boxes, other structures or spaces from which the student cannot readily exit. This prohibition is not to be interpreted to mean that a responsible adult may not position themselves at an exit door to prevent a clear and present danger of imminent physical harm to himself/herself or other persons and other techniques have proven to be effective.
4. Noxious substances
5. Deprivation of basic human rights, such as withholding meals, water or fresh air
7. Treatment of a demeaning nature, such as referring to a student’s disability out of professional context or humiliating a student
8. Electric shock
9. Methods implemented by untrained personnel
10. Methods which have not been outlined in the agency’s policies
11. Prone Restraints in which a student is held face down on the floor
12. Mechanical restraints except as used to control involuntary movement or lack of muscular control for students when due to organic causes or conditions as determined by a medical professional qualified to determine need and agreed to by student’s parent/guardian.

The District recognizes that, pursuant to 22 Pa. Code 14.133(f), it has the primary responsibility for ensuring that positive behavior support programs are in accordance with 22 Pa. Code Chapter 14, including the training of personnel for the use of specific procedures, methods and techniques, and for having a written policy and procedures on the use of positive behavior support techniques and obtaining parental consent prior to the use of restraints or intrusive procedures as provided in 22 Pa. Code 14.133(c).

The District recognizes that, pursuant to 22 Pa. Code 14.133(h), subsequent to a referral to law enforcement, for students with disabilities who have positive behavior support plans, an updated functional behavior assessment and positive behavior support plan shall be required.

TRAINING

Prior to the beginning of each school year, the Superintendent, through a committee designated by the Superintendent, shall establish a plan for the training to be done by persons properly certified or otherwise qualified in the area of behavior management of designated staff responsible for implementing this policy (including teachers, behavior support specialists, instructional assistants, and building administrators) in behavior regulation and de-escalation strategies and positive behavior support.

STAGES OF INTERVENTION

STAGE I – Classroom Management
STAGE II – Behavioral Strategies Documented in an Individualized Education Plan (IEP)
STAGE III – Positive Behavior Support Plan
STAGE IV – Crisis Management Procedures

STAGE I – Classroom Management

Positive classroom strategies form the focus of STAGE I intervention. Whole classroom management techniques and best teaching practices create a preventative atmosphere.
STAGE I strategies include:

- A clear statement of classroom and school rules and expectations
- Consistent monitoring and recording of behaviors
- Redirecting inappropriate behavior
- Modeling appropriate behavior
- Systematic reinforcing of pro-social behavior
- Self-esteem enhancing activities
- Problem solving instruction
- Parent/guardian involvement

These strategies are positive and non-intrusive as they apply to all students in the class or school setting.

Written Record: No formal written records of STAGE I interventions need to be documented in the student’s IEP. However, classroom rules and expectations should be clearly stated to student and parents/guardians at the beginning of the school year and reinforced at the student’s IEP conference. Also, the classroom teacher should keep informal records of inappropriate student behaviors that result despite STAGE I interventions in order to assist the IEP TEAM in future behavior strategy considerations.

STAGE II – Behavioral Strategies Documented in the IEP

STAGE II strategies include:

- All strategies contained in Stage I
- Environmental modification (e.g., seating or reducing visual distractions)
- Extended time to complete tests and tasks
- Curriculum adaptations and modifications
- Systematic reward policy
- Specified use of technology
- Student and parent/guardian contracts
- Multi-sensory instruction

These strategies are positive and present little intrusion as they are proactive interventions designed to support a student’s behavior.

Written Record: These strategies and interventions are to be recorded in the student’s IEP. The IEP Team will determine whether these strategies and interventions are more appropriately addressed as Goals and Objectives, Specially Designed Instruction, or both.
STAGE III – Development of a Positive Behavior Support Plan (aka Behavior Intervention Plan)

If an eligible student exhibits behavior problems which interfere with the student’s learning or that of others despite STAGE I and STAGE II interventions, the IEP shall include a Positive Behavior Support Plan (PBSP) based on the results of a Functional Behavior Assessment (FBA) in accordance with Chapters 14 and other applicable federal and state laws. Alternatively, the IEP Team may determine that the frequency or intensity of target behaviors, despite STAGE I interventions, prompt an immediate need to simultaneously conduct an FBA and implement a PBSP. Positive Behavior Support Plans include a variety of research-based practices and techniques to develop and maintain skills that will enhance an individual student’s opportunity for learning, self-fulfillment, and ability to access the curriculum. Prior to developing a PBSP, potential causes of or contributing factors to behavioral challenges such as medical issues, physical or mental conditions, environmental factors, staffing and program concerns will be addressed.

STAGE III strategies include:

- Incorporating STAGE I and STAGE II strategies
- Determining student strengths and needs
- Conducting an FBA
- Identifying and clearly defining target behavior(s)
- Collecting accurate baseline data
- Determining the purpose or function of the challenging behavior
- Identifying, teaching, and reinforcing functionally equivalent replacement or appropriate behavior(s)/pro-social skills
- Identifying and gathering student supports
- Responding effectively when target behavior(s) occurs
- Developing strategies for long term prevention, maintenance, and generalization

Positive rather than negative measures form the basis of a behavior support plan to ensure that all students shall be free from demeaning treatment. The types of intervention chosen for a particular student shall be the least intrusive necessary and shall be in accordance with Chapter 14. Aversive techniques, restraints or discipline procedures may not be used as a substitute for a behavior support program. In the event that more restrictive procedures are deemed by the IEP Team to be absolutely necessary, these procedures must also include positive and proactive measures.
Written Record: If the IEP Team determines that a student is in need of a Positive Behavior Support Plan (PBSP), or if a PBSP is otherwise required, the IEP shall include provisions for a program of behavior support in accordance with Chapter 14. The results of the FBA will be reviewed with parents/guardians and included in the Present Levels of Functional Performance section of the student’s IEP. The PBSP will be developed by the IEP team including parents/guardians and the plan will be attached to, and become a part of, the student’s IEP if it is otherwise not incorporated in the body of the IEP.

STAGE IV – Crisis Management Procedures

A. Restraints

A restraint is the application of physical force, with or without the use of any device, for the purpose of restraining the free movement of a student’s body. The term does not include briefly holding, without force a student to calm or comfort the student, guiding a student to an appropriate activity, or holding a student’s hand to safely escort the student from one area to another. The term does not include hand-over-hand assistance with feeding or task completion and techniques prescribed by a qualified medical professional for reasons of safety or for therapeutic or medical treatment, as agreed to by the student’s parents/guardians and specified in the IEP. Prone (face down) restraints are prohibited.

Training of personnel will be conducted on a yearly basis to ensure the safety of students and staff.

1. Restraints to Control Acute or Episodic Aggressive or Self-injurious Behavior

Restraints to control acute or episodic aggressive self-injurious behavior may be used only when the student is acting in a manner as to be a clear and present danger of imminent physical harm to himself/herself or others and only when less restrictive measures and techniques have proven to be or are less effective.

The use of a restraint to control the aggressive behavior of a student shall cause the school to notify, that day if possible, but at least within one school day, the student’s parents/guardians of the use of restraint and shall cause a meeting of the IEP team, to occur within 10 school days of the inappropriate behavior causing the restraint unless the parent/guardian, after being provided written notice, agrees in writing to waive the meeting. At the IEP meeting the team shall consider whether the student needs a functional behavioral assessment, reevaluation, a new or revised positive behavior
support plan, or a change in placement to address the inappropriate behavior. Following every restraint, the building principal will report the incident as required by PDE. The use of restraints may not be included in the IEP for the convenience of staff, as a substitute for an educational program, or employed as punishment.

The use of restraints may only be included in a student’s IEP when the following conditions apply:

- The restraint is utilized with specific component elements of positive behavior support
- The restraint is used in conjunction with the teaching of socially acceptable alternative skills to replace the problem behavior
- Staff are authorized to use the procedure and have received the staff training required
- There is a plan in place for eliminating the use of restraint through the application of positive behavior support.

After the specific use of a restraint (“restraint episode”), a licensed nurse shall examine the student who was restrained as well as any other person potentially injured in the restraint episode. Such examination shall occur immediately if possible, but in any event, prior to the potentially injured person leaving for the day, whether the person is the student, a staff member or any one else.

2. Mechanical Restraints to Control Involuntary Movement or Lack of Muscle Control

Mechanical restraints which are used to control a student’s involuntary movements or lack of muscular control resulting from organic causes or conditions may be employed under the following conditions: (1) the restraints are specified in the IEP, (2) the restraints were determined by a medical professional qualified to make the determination, and (3) the student’s parents/guardians agree to the restraints. Mechanical restraints shall be used only to prevent a student from injuring himself/herself or others or promote normative body positioning and physical functioning.

B. Emergency Procedures

Emergency procedures for behaviors that present a clear and present danger of imminent physical harm to himself/herself or others may include the following:

(1) parent/guardian contact to immediately remove student from school;
(2) notifying police;
(3) notifying mental health; and
(4) calling emergency service and/or ambulance.

Other emergency procedures specific to a student whose behavior potentially presents a
identifiable risk of imminent physical harm to himself/herself shall be delineated prominently in
a student’s IEP.

Written Record: The need to use restraints or the need to implement emergency procedures
will cause the IEP Team to convene to determine the appropriateness and effectiveness of the
student’s current IEP. No documentation of the need to implement emergency procedures other
than that documented in the student’s IEP or Evaluation Report will be placed in the student’s
cumulative file.

Subsequent to a referral to law enforcement, for students with disabilities who have positive
behavior support plans, an updated functional behavioral assessment and positive behavior
support plan shall be required.

Use of /Calming Rooms

At locations that provide special programs for students requiring frequent and concentrated
behavior interventions, a calming room may be available for behavior de-escalation or sensory
regulation.

Calming rooms are used as specified in a child’s Individualized Education Program (IEP) and/or
positive behavior support plan. Many students in a behavioral crisis request to use these rooms as
a learned method to de-escalate as part of their behavior plans. On a much less frequent basis,
professional and support staff trained in positive behavior support may escort a student to the
room. This occurs only when the student is acting in a manner as to be a clear and present danger
of imminent physical harm to himself/herself or others and when less restrictive means of
ensuring safety are not effective. Typically, the use of the calming room for a student in a
behavioral crisis reduces or eliminates the need for more restrictive behavioral interventions such
as the use of physical restraint or the need to call for emergency responders.

Some other points of clarification:

- The use of the calming room must be discussed with a student’s parents at an IEP
  meeting before it is included in that child’s IEP.
- Parents must be offered an opportunity to view the calming room prior to it being
  included in their child’s IEP.
The District shall provide a copy of this Administrative Regulation prior to or at the time it issues to the parent a NOREP any IEP that includes a calming room; the failure to do so shall not, by itself, constitute a violation of the District’s obligation to provide a free and appropriate public education.

Parent’s must approve by NOREP any IEP that includes a calming room prior to the calming room being used for the student.

- Only calming rooms that are used to protect a child from harming himself/herself or other persons may have doors on them.
- Calming rooms shall never have doors that lock.
- At least one Assigned Responsible Adult must always be with a student who is using the calming room as a means to de-escalate from potentially harmful behavior.
- Calming rooms are only utilized for positive behavior interventions and never as a punishment.
- If a student needs to be escorted to a calming room and the use of the calming room is not already included in the student’s IEP or positive behavior intervention plan, then the parent/guardian will be contacted that day and informed of the need to use the room and an IEP meeting will occur no later than 10 school days after the incident, to review the current IEP.
- Parents/guardians of a student who already has the use of a calming room included in the student’s IEP shall be notified each time the calming room is used for their child, unless the parent/guardian specifically requests in writing not to be notified each time. All parents/guardians will be given updates as to the frequency of their child’s use of the calming room no less than weekly.

- The student must be able to readily exit the calming room. However, a responsible adult may position themselves at the exit door to prevent a student from acting in a manner as to be a clear and present danger of imminent physical harm to himself/herself or others.
- Break Area/Rooms may not be used as calming rooms.

Documenting and Reviewing Student Use of Calming Rooms

- The use of calming rooms by students for any purpose will be documented by the teacher or instructional assistant as directed by the teacher on a daily basis. Such documentation shall include the frequency and duration of the use.
- The building principal will review logs of the calming room use on at least a weekly basis.
The special education supervisor will review the logs of the calming rooms on at least a monthly basis.

Prior to the beginning of each school year, the Superintendent, through a committee designated by the Superintendent, shall review the need for calming rooms for the upcoming school year and notify the Board of the proposed location of all calming rooms. The Superintendent shall also notify the Board prior to any mid-year change in the location of a calming room, the creation of a new calming room, or the elimination of a calming room.

Use of Break Area/Rooms

At schools that provide specialized autistic support programs, a space inside or very close to the autistic support classroom can be designated as a break area or break room for student use to facilitate sensory regulation/de-escalation. Students who need support to self-regulate their sensory system, to de-escalate, or to take a temporary break from instructional activities may be taught to request to access the break area/room if specified in their IEP. During the initial instructional phase, it may be necessary for staff to prompt a student to access the break area/room. Typically, these prompts are verbal although occasionally such prompts may include gentle physical guidance that is consistent with District policies and regulations.

- The use of the break area or break room must be discussed with a student’s parents at an IEP meeting before it is included in that child’s IEP.
- Parents must be offered an opportunity to view the break area or break room prior to it being included in their child’s IEP.
- The District shall provide a copy of this Administrative Regulation prior to or at the time it issues to the parent a NOREP any IEP that includes a break area or break room; the failure to do so shall not, by itself, constitute a violation of the District’s obligation to provide a free and appropriate public education. Preferably, this regulation should be given to parents at or before the IEP meeting where the break area or break room
- Parent’s must approve by NOREP any IEP that includes a break area or break room prior to the break area or break room being used for the student.
- Break areas/rooms shall not have doors on them
- An adult must always monitor a student in a break area/room
- Break areas/rooms will include items to facilitate sensory regulation/de-escalation/relaxation such as bean bag chairs, therapy balls, ther-a-putty, weighted blankets and other similar therapeutic items as recommended by qualified personnel.
The use of break area/room must be included in the student’s IEP either in the Specially Designed Instruction (SDI) section or in the Positive Behavior Support Plan.

Break areas/rooms may be used on a pre-determined schedule as indicated on an individual student’s daily schedule or upon student request.

The use of break areas/rooms must be a pro-active strategy and such spaces shall not be used as a consequence for aggressive behavior.

The frequency and duration of the use of the break area/room must be included on the student’s daily schedule or behavior contract, tallied at the end of each day and graphed weekly.

A copy of the daily schedule or behavior contract must be sent home daily to the student’s parents/guardians.

Break area/room graphs must be reviewed and the effectiveness of this strategy analyzed by the building Principal, Behavior Specialist and the Supervisor of Autism Support Programs monthly.

Break Area/Rooms may not be used as calming rooms.

NOTE: Before excluding a special education student from school, the building administrator will review the student’s cumulative discipline record to ensure that the student’s right to special education and related services will not be violated. Any questions regarding the disciplining of special education students should be directed to a Supervisor of Special Education or to the Director of Student Services for clarification. Furthermore, at any time that a district employee reports a crime committed by a student with a disability, the employee shall immediately inform the Director of Student Services who shall ensure that copies of the student’s special education and disciplinary records are transmitted for consideration by the appropriate authorities to whom the crime is reported. Such transmission shall take place only to the extent that it is permitted by the Family Educational Rights and Privacy Act.