

# Monroe School District 1J

365 North Fifth Street Monroe, Oregon 97456  
(541) 847-6292

## 2017-2018 Physical Restraint and Seclusion Annual Report June 25, 2018

<b>Total Incidents of Physical Restraint and Seclusion:</b>	<b>10</b>
Total number of incidents involving physical restraint:	10
Total number of incidents involving seclusion:	0
Total number of seclusions in a locked room:	0
Total number of students placed in physical restraint:	5
Total number of students placed in seclusion:	0

### Demographic characteristics:

#### Race:

African American	0
American Indian/Alaskan Native	0
Asian	0
White	5
Native Hawaiian/Other Pacific Islander	0
Multi-Racial	0

#### Ethnicity:

Hispanic/Latino	0
Non-Hispanic/Latino	0

#### Gender:

Female	2
Male	3

#### Disability Status:

Identified as Disabled under IDEA or Section 504	
Autism Spectrum Disorder	2
Communication Disorder	1
Non-Disabled	2

Migrant Status: N/A

English Proficiency: 0 students receiving ELL services.

Status as Economically Disadvantaged: 0 students eligible for Free or Reduced Lunch.

\*Total number of incidents that resulted in injury or death to students or personnel due to the use of physical restraint or seclusion: 0 incidents

\*Number of students placed in physical restraint or seclusion more than 10 times in the 2017-2018 school year: 0 students

\*Number of incidents in which personnel administering physical restraint and seclusion were not trained: 0 incidents.

\*Steps taken to reduce the use of physical restraint for each student:

1. CPI initial certification for new staff and recertification for continuing staff with practice sessions and observations.
2. Implementation additional behavioral strategies with students having access to de-escalation strategies and supports. Also used a sensory room with positive calming area and frequent breaks.
4. Continue training for staff on the elimination of antecedents/triggers (including the modification of instructional plans) to help with emotional regulation.
5. Staff will be involved in the completion of Functional Behavior Assessments and collaborate on the development of individual Behavior Support Plans to support students with pro-active intervention strategies.

## **Summary:**

Monroe School District observed an increase in the use of physical restraint and seclusion compared to the 2016-2017 school year.

**Physical restraints** increased from 0 in 2016-2017 to 10 in the 2017-2018 school year. This increase is associated with the focus on CPI training and the importance of documenting each incident. Strategies that were increased this year include:

- A. Ongoing training in the CPI system.
- B. Development and implementation of sensory activities throughout the school.
- C. Quiet space for students invited to use for proactive calming strategies.
- D. Completion of comprehensive Functional Behavioral Assessments used to develop and then implement Behavior Support Plans.

**Seclusions** stayed constant at 0 incidents in both 2016-2017 and 2017-2018 school years. Staff will continue to have training in the use of de-escalation techniques and the use of sensory activities to help students change behaviors and de-escalate. Monroe School District does not utilize “seclusion cells/rooms.”

### **Staff Development Needs/Program Changes**

1. The district will continue staff development in CPI techniques and strategies to monitor and provide guidance to staff through the district on physical restraint and seclusion.
2. Staff will continue to review individual incidents of restraint or seclusion and de-brief to identify antecedents, decrease behavioral incidents and increase the use of de-escalation strategies.
3. The district will continue to follow and implement school board policy and provide in-service training on the use of physical restraint-based documentation.
4. The district plans to contract and collaborate with a local Educational Service District Behavioral Support Specialist to support students and staff during the 2018-2019 school year. They will train staff on implementation of behavioral strategies and interventions with consultation and ongoing review.