WDPI Directives for the Appropriate Use of Seclusion and Physical Restraint in Special Education Programs

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We also appreciate the input provided by members of the Quality Education Coalition (QEC), and acknowledging this input is not intended to convey QEC endorsement of the use of seclusion and physical restraint, or of these directives.

The Wisconsin Department of Health Services (DHS) and the Wisconsin Department of Children and Families (DCF) issued a joint memo on March 13, 2009 entitled Prohibited Practices in the Application of Emergency Safety Interventions with Children and Adolescents in Community Based Programs and Facilities. Prohibited practices include prone restraints as well as other techniques.

The Wisconsin Department of Public Instruction (DPI) supports the information contained in this memo, which is available at http://dhs.wisconsin.gov/rl_dsl/MentalHealth/bhcsmemo.pdf. Please review this memo if you have not already done so and be sure staff is familiar with its contents.

A task force was convened in Summer, 2004 to develop an initial draft of these directives. During Fall, 2004, the materials were reviewed by WDPI staff and additional input gathered. A working document was posted to the WDPI website in February, 2005. At that time, feedback was invited. Comments were reviewed and revisions made and a document posted in September, 2005. Department staff continually review the directives as issues are raised, and minor edits are made. This most recent document was updated in August 2009.

--Compiled by Lynn Boreson  
EBD Consultant
I. Introduction

Controversy surrounds the use of seclusion and physical restraint in school-based programs, and use of these interventions carries a high degree of risk for being misunderstood. **Both should be used only as a last resort in cases of danger to the student and/or others.** In some specific situations, on an individual basis as determined by the student’s Individualized Education Program (IEP), the use of seclusion and/or physical restraint may be necessary and appropriate to maintain the student’s safety or that of others. The immediate goals of seclusion and physical restraint are to defuse the dangerous situation, protect the student and others from injury, and regain a safe, controlled, productive learning environment.

**Seclusion (also called “seclusion timeout” or “isolated timeout”) as used in this document means:**

Removing a student from the general activity and isolating him/her in a separate supervised area/room for a set period of time or until the student has regained control. It does not include such things as:

- In-school suspension;
- Detention;
- Student requested break;
- The student is instructed to return to his/her desk and/or sit on the sidelines.

**Physical Restraint (also called “manual restraint”) as used in this document means:**

Holding a student in order to restrain his/her movement; use of physical force, without the use of any device or materials, to restrict the free movement of all or a portion of a student’s body. It does not include:

- Briefly holding a student in order to calm or comfort the student;
- Holding a student’s hand or arm to escort the student safely from one area to another when the student is complying with the request to move;
- Intervening in a fight;
- Using protective or stabilizing devices, including adaptive equipment prescribed by a health care professional; using a weighted glove or wide arm cuff to hold one of the student’s arms, allowing him/her to refrain from stereotopy and work with the free arm/hand.

**The use of mechanical or chemical restraint is not appropriate for use in schools without**
PI-11, Wis. Adm. Code, implementing ch. 115, Wis. Stats., does not address any specific interventions, whether administrative, curricular or behavioral. This document reiterates and expands upon suggestions for the appropriate use of seclusion and physical restraint in special education programs that were published by the Wisconsin Department of Public Instruction (WDPI) in 1994.

The terms seclusion (or seclusion timeout) and physical restraint are used here in the context of behavioral interventions for disciplinary reasons due to inappropriate, out-of-control behavior. The use of these techniques is never required and they are on a continuum of possible interventions to be used only when there is immediate danger to the student and/or others. The efficacy of the use of seclusion and physical restraint as behavior change techniques has not been documented, and research on the use of these techniques in schools is sketchy. While the use of these techniques may not be empirically supported as positive behavioral interventions, their use may be necessary for safety reasons. In addition, the use of seclusion and restraint in school settings may enable the student to remain in a less restrictive environment (e.g., a public school program) instead of requiring an institutional or hospital setting.

There are two purposes for classroom management: to teach the student self control and self regulation, and to maintain an environment conducive to learning for all. The most desirable behavior management approaches are positive and proactive, while seclusion and restraint are reactive strategies and should be avoided if possible. The focus of behavioral interventions should be on antecedents: the “A” in the following paradigm below where A = Antecedent, B = Behavior, and C = Consequence.

A ⇔ B ⇔ C

The behavior intervention plan (BIP) should focus on positive interventions as determined by a functional behavioral assessment (FBA), and should include teaching replacement or alternative behaviors for the inappropriate or unacceptable behavior. The goal should be to help students learn and practice better alternatives. In conducting an FBA, be sure to consider environmental issues, since setting, task, and/or the adults and other students present in the environment may contribute to escalated situations.

School staff should strive to be proactive problem-solvers when addressing inappropriate and unacceptable behaviors. If, after a reasonable trial period, an intervention is unsuccessful and behavior is not changing, try another approach, and then another. Ask whether the environment should be modified – the physical setting, curriculum, presentation style, the interaction of others, and so on. It is important to teach behavior just as we teach academics and a good behavior intervention plan will reflect this. There should be opportunities for the student to practice new behavior skills, and to get constructive feedback. As students are learning new, more acceptable behaviors, they may need cues or reminders.

1 Boreson, 1994.
2 Peterson and Ryan, 2004
3 Further information on FBAs and BIPs is available at dpi.wi.gov/sped/sbfba.html
When considering the use of seclusion or restraint, it is important to maintain respect for the child and protect his/her dignity and safety. Be sure that the intervention is appropriate to the student’s age and developmental level, and takes into account any medical or other issues the student may have. Keep in mind that inappropriate verbal behavior from a student should result in a verbal (rather than a physical) intervention. Threats or profanity are not physical danger, and cannot be considered as such unless the student also demonstrates a means of carrying out the threat. Seclusion and restraint should only be used when there is immediate physical danger to the student or others, and for the shortest time possible.

Be reflective and consider what you may bring to the interaction. How do you react during a crisis? What does your body language or voice convey? Do you think the students perceive you as calming and in control? What is your relationship with the student and how will this affect the intervention?

In summary, school personnel should only use seclusion or physical restraint

- When less restrictive or alternative approaches have been considered and attempted, or considered and deemed inappropriate for the current situation;
- In a humane, safe, and effective manner;
- Without intent to harm or create undue discomfort (physical or emotional);
- Consistent with known medical or psychological limitations and the student’s IEP and behavior intervention plan (BIP).

Remember: Seclusion and physical restraint should only be used as a last resort when the student’s behavior is an immediate danger to the student and/or others, and when other interventions have been unsuccessful. A number of resources related to behavior are posted on the WDPI website. These have been developed through a statewide behavior grant funded by WDPI, and can be accessed at dpi.wi.gov/sped/ed.html. Topics include using literature to address social skills, mental health fact sheets, functional behavioral assessment (FBA) and behavior intervention plans (BIPs), suggestions for linking

Directives for the Use of Seclusion

1. Removing a student from the classroom activity to a seclusion room or area is a significant intervention. Moving or transporting an out-of-control student from one location to another is considered physical restraint. Please refer to #6 on page 9 of this document for further discussion on this topic. It is important to have other options for addressing inappropriate behavior, and these should be considered before seclusion is used. It is important, as with any behavioral intervention, to use the least restrictive intervention appropriate for the situation at hand. The focus for these directives is seclusion timeout as illustrated below:

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4 Adapted from Code of Maryland Regulations (COMAR) 13A.08.04.03 B 1-4.
2. In order for timeout, including seclusion, to be meaningful, the “time in” needs to be reinforcing to the student. If the student does not want to be part of the activity, then he/she may act out in order to use seclusion to escape or avoid having to participate. The use of seclusion should trigger a functional behavioral assessment (FBA) and development of a behavior intervention plan (BIP) if those are not already in place.

3. Include the use of seclusion in the student’s IEP/BIP if it is anticipated that such use will be necessary to address the student’s behavior. Addressing the issue in the IEP provides an opportunity to discuss the BIP with the parent and staff, as well as to answer any questions, define when and how seclusion will be used, show the parents the space that will be used, etc. Concerns should be discussed at the IEP meeting, and parent concerns should be documented on the IEP. Every attempt should be made to avoid the use of seclusion, but safety concerns are paramount. If there was no prior indication that seclusion might be an appropriate intervention for a particular student, an IEP meeting should be held as soon as possible after the first use of seclusion so the IEP team can discuss the incident and address any necessary revisions of the IEP. Repeated use of seclusion should result in review (and revisions, if appropriate) of the FBA, BIP, and IEP.

4. It is important to teach a student what to expect when seclusion is going to be used: What behavior(s) will result in the use of seclusion? What will happen before, during, and after the period of seclusion? What will be expected of the student? When and how will the period of seclusion end? Use verbal explanations to the student when seclusion is initiated. Explain to the student – in a very business-like, matter of fact tone - what behavior precipitated the seclusion.

5. Set criteria for ending the seclusion period. Consider the following options:

- Fixed time: generally 15 minutes or 1 minute per year of age of the child (whichever is less) is a useful standard;
- A minimal duration plus additional time until the appropriate behavior occurs (be sure the student knows what the appropriate behavior is);
- A minimal duration plus another fixed interval (usually to ensure that the student has regained behavioral self-control); or,
- Demonstration of appropriate/acceptable behavior, again being clear to the student what the expected behavior is.

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5 Adapted from Johns, et al
Note: For periods of seclusion lasting more than 15 minutes, students must have adequate access to bathroom facilities, drinking water, necessary medication, and regularly scheduled meals.

6. Maintain **constant adult supervision** (e.g., visual contact) with the student while he/she is in the seclusion area. If seclusion is being used, the student is out of control and needs this restrictive intervention; therefore, it is important to continuously monitor the student. This can be done by being in the room with the student, or observing through a window into the room. Make certain the entire seclusion area can be adequately viewed if staff will remain outside the room. If the student cannot be seen at all times and in all parts of the space, add another window or enlarge the existing one.

7. The **“name” of the room** or area (e.g., “Quiet Room” or “Cool Down Room”) is less important than how the space is used. The space may have more than one use (e.g., teacher directed seclusion, student requested break, quiet area where the teacher and student can talk).

8. **Develop written procedures** so that the use of seclusion is consistent and planned in advance. Consider such things as what behaviors would trigger the use of seclusion, which staff can make the determination that a particular student should be secluded, how parents will be notified, what data is to be kept and where, and how the building principal and/or other administrators will be notified.

9. **Keep a log or incident report** to record each use of seclusion. This should be done as soon as possible after the seclusion period is over. Several sample log pages are included in the Appendix III or the district may develop their own. The district may wish to consider a uniform reporting system across all buildings and levels so that district wide data can be kept and analyzed.

10. **Use the data** from the log or incident report to regularly evaluate the use of seclusion (e.g., Is it being appropriately used? Is there an over-reliance on seclusion as a disciplinary response? What other intervention options are considered and used? Are there some students who are being secluded frequently, perhaps necessitating an IEP review?) and the impact of its use on student behavior.

11. While there are no “brick-and-mortar” requirements specific to seclusion or timeout rooms beyond the general school **building codes**, it is important to create a safe, comfortable environment. Be sure to consult with your local building inspector and/or fire department to determine if the seclusion area meets applicable codes (e.g., ventilation, lighting, access to exits, maximum density for the size of the space, etc.). The door serving the seclusion room is an exit access door providing an exit for the room. The door must be able to be opened from inside the room at all times and without the use of a key. This allows the occupant(s) of the room the ability to exit the room. Any variations must be approved by local inspectors and/or the Wisconsin Department of Commerce. If your community does not have a building inspector and/or a fire inspector,
contact the Safety and Buildings Division of the Wisconsin Department of Commerce to arrange for an inspection by a field inspector.

If a student is “playing with” the door by swinging it open and closed, analyze the behavior through an FBA and address it in the BIP. Minimally, the seclusion room must be free of objects or fixtures with which the student could inflict bodily harm (e.g., light fixtures within reach of the student, furniture, woodwork or molding that could be pulled free, active electrical outlets, pipes, glass or windows and so on). Constant visual supervision of the student during the period of seclusion must be maintained. Other issues might include floor coverings (carpeting rather than a hard floor surface), safety or reinforced glass and sound proofing to minimize the disruption to others in the immediate area. One way to address lighting issues (e.g., location of switches, need for a key to turn light on or off) is to use motion sensor lights.

In summary, when using seclusion, consider the following:

- Did the student understand the reason for the timeout? Was the process explained prior to the use of seclusion? Was there follow-up with the student once he/she had regained behavioral control?
- Did the student have an opportunity to stop the misbehavior and demonstrate appropriate behavior? Were warnings used? If the student stopped the misbehavior, were consequences/interventions other than seclusion used?
- Did the student have an opportunity to demonstrate responsibility for his/her own behavior and have opportunities to practice self-control? If directed to move to another area (including the seclusion area), for example, did the student do so even if he/she continued to complain?
- Did the student understand what the expectations were for a successful return to classroom activities?
- Was the length of time in seclusion reasonable and appropriate for the student’s age, ability, developmental level, etc.?
- Was the seclusion area safe for the student, both physically and emotionally?
- Were data collected and reviewed to evaluate the effectiveness of timeout, the need for additional evaluation (including an FBA), and/or the need to review/revise the student’s IEP/BIP?

**Directives for the Use of Physical Restraint**

1. Restraint should **only be used in an emergency**, e.g., when there is immediate danger to the student and/or to others. An emergency is an imminent threat and may not include threats (verbal behavior = verbal intervention) or property damage unless that destruction

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6 Adapted from Special Programs Branch, Alberta Learning, Canada, 2002.
is also causing a dangerous situation with imminent danger of injury. You may have to make an on-the-spot decision as to how great the danger is.

2. Be sure that someone trained in the use of CPR and First Aid is available if the individual(s) administering restraint is/are not.

3. Foreshadow for a student what will happen if restraint is necessary. What behavior(s) will result in the use of restraint? What will happen before, during, and after the period of restraint? What will be expected of the student? When and how will the period of restraint end?

4. The use of restraint should be part of the student’s IEP which should also include a positively focused behavior intervention plan (BIP) based on a functional behavioral assessment (FBA). Including the use of restraint in the IEP provides an opportunity to discuss its use with the parent and staff, as well as to answer any questions, define when and how restraint will be used, demonstrate the technique(s) to be used, etc. Dangerous behaviors and safety issues may override reluctance to use physical restraint. Concerns should be discussed at the IEP meeting, and parent concerns should be documented on the IEP. Every attempt should be made to avoid the use of physical restraint, but safety concerns are paramount. If there was no prior indication that restraint might be a necessary intervention for a particular student, an IEP meeting should be held as soon as possible after the first use of restraint so that the team can address necessary revisions of the IEP/BIP.

The IEP team should consider the needs of this student:

- Student’s physical and medical issues, medications the student is taking including possible side effects, and any medical and psychiatric diagnoses;
- Frequency of dangerous behavior by this student and the determination of least restrictive environment (LRE);
- Specific techniques to use with this student;
- Clear definitions of what behavior(s) will result in restraint;
- Touch/no touch and how those issues apply to this student;
- Teaching self-calming techniques as part of the BIP;
- Student’s primary means of communication;
- Any further evaluation that is needed; and,
- Data collection and review procedures, including the need to reconvene the IEP team.

5. Restraint should be used only for the period of time necessary to accomplish its purpose and using no more force than is necessary. The specific restraint technique should be appropriate to the student’s age, and be safe for the student. Once the staff

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7 If the student being restrained uses sign language or an augmentative device as his/her primary means of communication, the student’s hands will be free of restraint for at least brief periods to allow for communication unless the adult administering the restraint decides that there is likely to be harm to the student or others as a result [Adapted from 23 Illinois Administrative Code 1.285(d)(7)].
person administering the restraint has determined that the student is no longer a danger to self or others, the student should be released. Have an alternative plan in the event that the student does not begin to calm down within a reasonable time period.

6. Whenever possible, **move other students** from the immediate area rather than trying to transport an out-of-control student or restrain a student while other students are in the immediate area. If it is absolutely necessary to move or transport the student to another area, at least two trained staff members should be involved. Consider the distance the child must be moved and safety for the student and others. Do not begin to move the student until staff are ready to do so and have communicated their plan to one another and to others in the area.

7. **Develop written procedures** so that the use of restraint is consistent and planned in advance. Consider what behaviors would trigger the use of restraint, what staff can make the determination that a particular student should be restrained, how parents will be notified, what data is to be kept and where, what training will be required for those involved in administering restraint and how the building principal and/or other administrators will be notified.

8. It is important to ensure that staff who will use restraint have the **information and training** necessary. The risks in using physical restraint are high, and inappropriate use of restraint has caused injury and even death, as well as lawsuits. One training option is to use an established commercial program. Training must include the continuum of interventions, not just techniques for restraint. Anyone who will be using (or potentially using) restraint must have knowledge of:

- The student;
- The student’s IEP and BIP;
- The restraint technique to be used;
- Events precipitating the use of the technique;
- Follow up requirements (reporting/documenting, contacting parents); and,
- Any cautions or contraindications, both physical and psychological.

If an established commercial training program is not used for training, the content of training should include:

- Continuum of intervention options;
- Preventing a crisis;
- A model of phases of a crisis cycle, including suggestions for intervening at each phase;
- Interventions to de-escalate a crisis before physical restraint is necessary;
- Documentation of the use of restraint;

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8 Safe & Responsive Schools.
• Practice using restraint techniques and demonstration of beginning level of proficiency of restraint techniques; and,
• Follow-ups to increase staff knowledge and skills, monitor implementation integrity (consistency of implementation across settings, people, times, and so on), and problem solving as needed.

It is important to have more than one staff person trained in physical restraint. The responsibility for implementing restraint should not fall to one person, as that person may not always be available. In addition, having a team trained together allows staff to support each other and the students, and provides for a common language regarding behavioral intervention techniques.

Finally, there may be a need to provide some information on the use of restraint to all school faculty and staff so that they understand what they may see happening. Since parents of other children and other community members (e.g., foster grandparents, school board members, student teachers, classroom volunteer tutors) may be in the building, they might witness a student in crisis. There might also need to be some discussion with other students so that they feel safe, but also so that they can understand that restraint is being used to protect the child who is being restrained. In any of these discussions, it is important to protect confidentiality, but techniques and reasons for restraint can be discussed in general terms.

9. A log or incident report should be kept when physical restraint is used. Documentation is not just to avoid litigation but to assist in reassessment of the student, of staff, and of the program. When restraint is used, it is important to ask “what happened and why was restraint needed?” Sample log sheets are included in the Appendix III or the district may develop their own. The district may wish to consider a uniform reporting system across all buildings and levels so that district wide data can be kept and analyzed.

10. Use the data from the log or incident report to regularly evaluate the use of restraint (e.g., is it being appropriately used? Is there an over-reliance on restraint as a disciplinary response? Are there some students who are being restrained frequently, perhaps necessitating an IEP review?), and the impact of its use on student behavior.

Keep in mind that the use of physical restraint is only appropriate:

• When the student’s behavior is an immediate threat to his/her safety and/or the safety of others;
• If there are no physical, medical, psychological or other contraindications; and,
• If the staff using the restraint technique have been trained in its safe application.
WDPI Resources related to behavior can be accessed at dpi.wi.gov/sped/ed.html. Topics include using literature to address social skills, mental health fact sheets, functional behavioral assessment (FBA) and behavior intervention plans (BIPs), suggestions for linking interventions to functions of behavior, and more.

Bibliography

Behavior Home Page, Kentucky Department of Education & The University of Kentucky Department of Special Education and Rehabilitation Counseling. “Effective Use of Time Out.” Downloaded 8/05 from www.state.ky.us.agencies/behave/bi/TO.html


Maryland State Board of Education. “Student Behavior Interventions”. Downloaded 8/05 from www.dsd.state.md.us/comar/13a/13a.08.04.00.htm


Appendices

I. Summary of Key Points

II. Crisis Cycle: Walker, Colvin & Ramsey

III. Sample Summary Log/Report Sheets (3)
I. Summary Sheet of Directives

Note: Please refer to the full text for specifics. This list is intended only as a brief summary of each numbered point in the body of this document.

Seclusion

1. Use the least restrictive intervention appropriate – seclusion should be a last resort.
2. Make sure “time in” is reinforcing.
3. Include the use of “seclusion” in the student’s IEP/BIP.
4. Teach the student what he/she is to do when seclusion is going to be used; foreshadow what will happen before, during, and after seclusion.
5. Set criteria for ending the seclusion period.
6. Maintain constant adult supervision.
7. The “name” of the room is less important than how the space is used.
8. Develop written procedures or policies.
9. Keep a log or incident report.
10. Use the data to evaluate the use of seclusion.
11. General school building codes apply; fire codes impact the use of locks.

Physical Restraint

1. Use only in an emergency; e.g., immediate danger to the student and/or others.
2. Have First Aid and CPR available.
3. Foreshadow for the student what will happen during restraint. Teach the student what he/she is to do during and after restraint is used.
4. Include the use of “restraint” in the student’s IEP/BIP.
5. Use only for the period of time necessary.
6. Move other students when possible rather than moving or transporting the student in crisis.
7. Develop written procedures or policies.
8. Ensure that staff have information and training.
9. Keep a log or incident report.
10. Use the data to evaluate the use of restraint.
II. Acting Out Behavior Cycle

1. **Calm** – student is on-task, following directions, behaving appropriately, self-directed;
2. **Trigger** – student becomes agitated due to provocations, change in routine, high demands, problems brought in to school (e.g., lack of sleep, disruption at home, substance abuse);
3. **Agitation** – student becomes angry, upset, frustrated, may become more active (e.g., moving around, drumming fingers, tapping pencil) or less active (e.g., staring, sitting on hands, isolates him/herself);
4. **Acceleration** – student argues, questions, is noncompliant or openly defiant, provoking others, whines or cries, destroys property, threatens or uses profanity;
5. **Peak** – student hits or kicks, causes serious property damage, tantrums, is out-of-control;
6. **De-escalation** – student is calming down, may be confused or withdrawn, attempts to make amends, denies responsibility or blames others, responds to specific requests or directions; and,
7. **Recovery** – student is often subdued and will engage in simple busy-work, be reluctant to talk about the incident and even somewhat defensive.

It is important to understand the escalation continuum and how it applies to the student in questions. Each student’s specific behavior will be different, and the time is takes for a student to move through the various cycles will also vary. Interventions will vary depending on the phase of the crisis cycle.

This information is for introductory purposes only – in addition to this model, there are others and it is important to get complete information to assist in crisis planning.

<table>
<thead>
<tr>
<th>Student’s Name</th>
<th>Date</th>
<th>Precipitating behavior</th>
<th>Begin seclusion/restraint</th>
<th>End seclusion/restraint</th>
<th>Total time</th>
<th>Staff initials</th>
<th>Comments</th>
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**IV (b). Sample Seclusion or Restraint Reporting Sheet**

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Date</th>
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<tbody>
<tr>
<td>Teacher/class</td>
<td>Time in/time out</td>
</tr>
</tbody>
</table>

Staff person initiating seclusion/restraint; others present/involved:

Describe the behavior that led to seclusion/restraint, including time, location, activity, others present, other contributing factors:

Procedures used to attempt to de-escalate the student prior to using seclusion/restraint:

Student behavior during seclusion/restraint:  

Student behavior after seclusion/restraint:

Was there any injury or damage?  

□ Yes  □ No  
If yes, describe:

Follow-up with student after the seclusion/restraint:

Is other follow-up needed (e.g., IEP meeting, additional evaluation, discussion with others)?  

□ Yes  □ No  
If yes, specify:

Parent contact:  

Administrative contact:

**IV (c). Sample Seclusion/Restraint Report**

Student Name: ______________________________ Age ______ Grade ______
Teacher: ______________________________ Gender (circle): Male Female

Person making report: ______________________________ Date of report: ___________

Date/time of seclusion: __________ Location: ________________________________

Behavior precipitating seclusion/restraint:

Others involved (staff & students):

Behavior during seclusion/restraint:

Duration of seclusion/restraint:

Desired alternative/replacement behavior:

Follow-up:

Parent contact (Date: __________ Method: __________ Initials: _______________)

Discussion with student:

Debriefing/follow-up with staff:

IEP meeting needed? □ Yes (If yes, date scheduled: _____________________________) □ No

Additional action needed (specify):