

Administrative Procedures for Behavior Support (Attachment for Policy No. 113.2)

Purpose

Students with disabilities shall be educated in the least restrictive environment (“LRE”) in accordance with their Individualized Education Program (“IEP”) and shall only be placed in settings other than the regular education class when the nature or severity of the student’s disability is such that education in the regular education class with the use of appropriate supplementary aids and services cannot be achieved satisfactorily and cannot meet the needs of the student. The IEP team for a student with a disability shall develop a Positive Behavior Support Plan if the student requires specific intervention to address behavior that interferes with learning. The identification, evaluation, and plan or program shall be conducted and implemented in accordance with state and federal laws and regulations.

Definitions

The following terms shall have these meanings, unless the context clearly indicates otherwise.

Aversive techniques: methods designed to reduce or eliminate unwanted behaviors by associating them with unpleasant or negative stimuli.[1]

Behavior support: development, change, and maintenance of selected behaviors through the systemically applying behavior change techniques.[1]

Behavior Support Plan or Behavior Intervention Plan: a plan for students with disabilities who require specific intervention to address behavior that interferes with learning. A Positive Behavior Support Plan shall be developed by the IEP team, be based on a functional behavioral assessment, and become part of the individual student’s IEP. These plans must include research-based practices and techniques and maintain skills that will allow a student with a disability an opportunity for inclusion and meaningful learning.[1]

Functional behavioral assessment: a systemic process used to understand the cause of a student’s challenging behavior. A functional behavioral assessment may include a review of existing data or collection of new data, as determined by the Individualized Education Program (IEP) team. Prior written consent is required to conduct a Functional Behavior Assessment for students with disabilities.

Positive techniques: methods that utilize positive reinforcement to shape a student's behavior, ranging from the use of positive verbal statements as a reward for good behaviors to specific tangible rewards.

Restraints: restricting a student’s ability to freely move their torso, arms, legs, or head with or without the use of any device, designed to restrain free movement of a student’s body, excluding the following:[1]

1. Briefly holding, without force, to calm or comfort a student.
2. Guiding a student to an appropriate activity.
3. Holding a student's hand to escort him/her safely from one area to another.
4. Hand-over-hand assistance with feeding or task completion.
5. Nursing or healthcare-related services prescribed by a qualified medical professional for safety reasons or for therapeutic or medical treatment, as agreed to by the student's parents/guardians and specified in the IEP.
6. Mechanical restraints governed by this policy such as devices used for physical or occupational therapy, seatbelts on wheelchairs or on toilets for physical or occupational therapy, or for balance and safety, safety harnesses in buses, and functional positioning devices when used for therapeutic purposes.

Seclusion: confinement of a student in a room, with a staff member in the room or immediately outside of the room with the student in view, to provide a safe environment to allow the student to regain self-control.

Students with disabilities: school-aged children within the jurisdiction of the district who have been evaluated and found to have one or more physical, mental, or educational disabilities as defined by law, and who require, because of such disabilities, special education, accommodations, or ~~and~~-related services.[8]

Procedures

The Superintendent designates the Chief of the Office of Diverse Learners as responsible for implementing and maintaining the requirements of this policy and its procedures.

Positive Behavior Support

District positive behavior programming and supports, such as Culturally Responsive Positive Behavior Intervention Supports (“CR-PBIS”), School Wide Social Emotional Learning (“SEL”), and Relationships First, should be available to all students, including students with disabilities. School administrators and their school-wide climate programming teams are encouraged to think critically about how to integrate students with disabilities into the administration of these programs to create a safe and inclusive learning environment.

For a student with a disability who has a Positive Behavior Support Plan at the time of referral, subsequent to notification to law enforcement, the District shall convene the student's IEP team and an updated functional behavioral assessment and Positive Behavior Support Plan shall be required.[1][11][18]

If, as a result of such referral, the student is detained or otherwise placed in a residential setting located outside the District, the Superintendent or designee shall require that the responsible school district or intermediate unit is informed of the need to update the student's functional behavioral assessment and Positive Behavior Support Plan.[1]

For a student with a disability who does not have a Positive Behavior Support Plan, subsequent to notification to law enforcement, the District shall convene the student's IEP team to consider whether a Positive Behavior Support Plan should be developed to address the student's behavior, in accordance with law, regulations and Board policy.[1][2]

Outside Referrals as part of the Multi-Tiered System of Supports (“MTSS”)

The Student Assistance Program (“SAP”) is an early intervention program (within MTSS) to help identify behavioral health, substance abuse, and addiction issues that affect students, and then connect them with appropriate treatment.

Intensive Behavioral Health Services (“IBHS”) is a service provided by an IBHS agency assigned to each school. IBHS is designed to address the needs of children Pre-K through grade 12 by providing age-appropriate, trauma-informed, therapeutic interventions to remove barriers to learning. Services can include individual and group therapy, and one-on-one support as deemed medically necessary.

Behavioral Health Emergencies

When a student expresses verbally, in writing, or through behavior, the desire or intention to inflict serious or life-threatening injury to themselves or others the District [Behavioral Health Emergency Procedures](#) will be followed to ensure the safety and appropriate level of support is provided in a timely fashion.

Physical Restraints

The building principal or designee shall notify the parent/guardian as soon as practicable, but no longer than twenty-four (24) hours following the incident, of the use of restraints to control the aggressive behavior of the student and shall convene a meeting of the IEP team within ten (10) school days of the use of restraints, unless the parent/guardian, after written notice, agrees in writing to waive the meeting. At this meeting, the IEP team shall consider whether the student needs a functional behavioral assessment, re-evaluation, a new or revised Positive Behavior Support Plan, or a change of placement to address the inappropriate behavior.

Any restraint that results in a serious an injury to a student, staff person, or both must be reported immediately via email to the Restraint Information System Collection (RISC) Coordinator at the Bureau of Special Education (BSE) should be reported immediately.[1]

Restraints may be included in an IEP only if: [1]

1. The restraint is used with specific elements of a Positive Behavior Support Plan.
2. The restraint is used in conjunction with teaching socially appropriate alternative skills or behaviors.
3. Staff are authorized to use the restraint and have received appropriate training.

4. Positive Behavior Support Plan includes efforts to eliminate the use of restraints.

Seclusion

The repeated use of seclusion for an individual child, multiple uses with the same classroom or multiple uses by the same individual, should trigger a review and, if appropriate, a revision of strategies currently in place to address dangerous behavior. [1] Proper written notice of each incident involving the use of seclusion should be provided to the parent as soon as practicable.

If used, seclusion rooms must be safe, free of objects that could cause harm, provide adequate lighting and ventilation, and allow school personnel to view the student from an adjacent area. [1]

The Office of Diverse Learners reviews the number of instances that schools use physical restraints on a monthly basis and annually reports on the use of physical restraints to the Pennsylvania Department of Education. Schools with higher levels of use of either physical restraints are targeted for training. In addition, each instance where restraints are used for a student with disabilities must be reported in RISC, as described above.

Aversive Techniques

Positive, rather than negative, measures must form the basis of behavior support programs to provide all students and eligible young children shall be free from demeaning treatment, the use of aversive techniques and the unreasonable use of restraints.

The following aversive techniques of handling behavior are considered inappropriate and shall not be used in educational programs: [1]

1. Corporal punishment.
2. Punishment for a manifestation of a student's disability.
3. Locked rooms, locked boxes, other locked structures or spaces from which the student cannot readily exit.
4. Noxious substances.
5. Deprivation of basic human rights, such as withholding meals, water or fresh air.
6. Suspensions constituting a pattern as defined in state regulations. [3]
7. Any treatment of a demeaning nature.
8. Electric shock.
9. Methods implemented by untrained personnel.
10. Prone restraints, which are restraints by which a student is held face down on the floor.

Maintenance Schedule

These administrative procedures shall be reviewed upon the review of the policy, or upon the occurrence of a triggering event.

Legal References:

1. [22 PA Code § 14.133](#)
2. [22 PA § Code 10.23](#)
3. [22 PA Code § 14.143](#)