#### My State's Seclusion & Restraint Laws

#### BRIEF SUMMARIES OF STATE SECLUSION AND RESTRAINT LAWS AND POLICIES



Author: Jessica Butler jessica@jnba.net

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This short summary is based on my report, <u>How Safe is the Schoolhouse? An Analysis of State Seclusion and Restraint Laws and Policies</u>. This report contains short summaries of each state's restraint and seclusion laws and policies. Please refer to How Safe is the Schoolhouse? (<a href="http://www.autcom.org/pdf/HowSafeSchoolhouse.pdf">http://www.autcom.org/pdf/HowSafeSchoolhouse.pdf</a>) for more detailed information, analyses and comparisons of state laws, and illustrative maps and charts.

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Published by The Autism National Committee, <a href="www.autcom.org">www.autcom.org</a>. This report and updates will be available on the AutCom webpage, <a href="www.autcom.org">www.autcom.org</a>.



#### **Important Introductory Information**

<u>About the Report</u>. This report, MY STATE'S SECLUSION & RESTRAINT LAWS, contains brief summaries of each state's restraint and seclusion laws and policies for school. The report's primary purpose is to enable people in a state to learn their state rules. You may find more detailed information, including comparisons and analyses of state practices, and illustrative maps and comparison charts for all states, in <u>How Safe is the Schoolhouse? An Analysis of State Restraint and Seclusion Laws</u>, available at www.autcom.org.

Important Technical Details (Read this!). (1) I use 51 "states" to include the District of Columbia. I did not have territorial materials. (2) For brevity, the term "laws" refers to statutes, regulations, and executive orders that are legally binding. This distinguishes them from nonbinding guidelines and policies. (3) All information in the maps and charts is also in the text to maximize access by people of all abilities; some need text, some need visuals. There is no funding underwriting this work, so technology was limited. (4) "House bill" refers to the Keeping All Students Safe Act bill that was introduced by Representative George Miller in 2009, 2011, and 2013 (H.R. 1893 in 2013); "Senate bill," refers to that introduced by Senator Harkin in 2011.

**About the Author.** Jessica is the mother of a child with autism and an attorney. She has served as the Congressional Affairs Coordinator for the Autism National Committee (www.autcom.org). AutCom has worked for over 20 years to eradicate the use of abusive interventions upon people with autism and other disabilities. She served as Chair of the Board of Directors of the Council of Parent Attorneys and Advocates (COPAA) in 2007-08, and on the Board of Directors from 2004-2009. She was a principal coordinator of COPAA's Congressional Affairs program in 2004-2009. She is the author of <u>Unsafe in the Schoolhouse: Abuse of Children with Disabilities</u> (COPAA 2009), which describes over 180 cases in which students were subjected to restraint and seclusion, and How Safe is the Schoolhouse? An Analysis of State Seclusion and Restraint Laws & POLICIES. This report, My STATE'S SECLUSION AND RESTRAINT LAWS was authored entirely by Jessica Butler and represents only her views. It is not a statement on behalf of AutCom or any entity, organization, or person. You can email Jessica at jessica@jnba.net. The report is available free of charge on AutCom's webpage, www.autcom.org. Information from the primary report, How SAFE IS THE SCHOOLHOUSE?, has been featured in various media reports, including on ABC News in December 2012 (http://abcnews.go.com/WNT/video/death-school-child-restraints-sparkcontroversy-17842757).

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# MY STATE'S SECLUSION & RESTRAINT LAWS BRIEF SUMMARIES OF STATE SECLUSION AND RESTRAINT LAWS AND POLICIES August 4, 2013

Note: Before using the report, please read the paragraph "Important Technical Details" on page ii.

For over two decades, evidence has accumulated of the dangers posed by restraint and seclusion. According a to a <u>Government Accountability Office</u> study, these dangerous practices have resulted in death, injury, and trauma. Incidents include children with broken limbs and other injuries; and students who died in restraint or in seclusion rooms; and children strapped or locked into to tables and chairs. The GAO documented 20 deaths from restraint alone. The media has continued to report on the dangers and abuses of restraint and seclusion through 2012-13. Others have catalogued restraint/seclusion's harms, including the National Disability Rights Network, which documented their use in over 2/3 of states; the Council of Parent Attorneys and Advocates, which documented 185 incidents of use; and TASH in a groundbreaking 2005 report. The Council for Exceptional Children's Council for Children with Behavioral Disorders has described the "wide variety of injuries and deaths [that] have occurred while students are in seclusion environments including suicide, electrocution, and self injury due to cutting, pounding, and head banging" and the "widespread" use of restraint in educational and other environments.

In 2009 House of Representatives hearings documented the dangers of restraint and seclusion, and in 2012, Senate hearings documented how positive interventions can greatly reduced the use of restraint and seclusion. For example, Pennsylvania's Centennial School, which serves students in 35 school districts, has reduced the use of restraint and seclusion from over 1,000

<sup>&</sup>lt;sup>1</sup> United States Government Accountability Office, <u>Seclusions and Restraints</u>, Selected Cases of Death and Abuse at Public and Private Schools and Treatment Centers 5-8 (2009).

<sup>&</sup>lt;sup>2</sup> See, e.g., Brian Ross, Angela M. Hill and Matthew Mosk, *Death at School: Child Restraints Spark Controversy*, ABC WORLD NEWS TONIGHT, Broadcast Nov. 29, 2012, <a href="http://abcn.ws/12snluu">http://abcn.ws/12snluu</a>; Julie Peterson, *Parents of Special Needs Students Say School District Covered Up Abuse*, CNN, broadcast May 15, 2012 <a href="http://bit.ly/cnnrsgeor">http://bit.ly/cnnrsgeor</a>; Locked Away Series, STATE IMPACT OHIO & COLUMBUS DISPATCH, Aug. 4-7, 2012, <a href="http://bit.ly/colDispSecl">http://bit.ly/colDispSecl</a>.

<sup>&</sup>lt;sup>3</sup> National Disability Rights Network, School Is Not Supposed to Hurt (2009); Jessica Butler, Unsafe in the Schoolhouse: Abuse of Children with Disabilities (Council of Parent Attorneys & Advocates 2009); Tash and the Alliance to Prevent Restraint, Aversive Interventions, and Seclusion, In the Name of Treatment (2005).

<sup>&</sup>lt;sup>4</sup> Council for Children with Behavioral Disorders, *Position Summary on the Use of Physical Restraint Procedures in School Settings*, 34 Behavioral Disorders 223, 224 (2009); Council for Children with Behavioral Disorders, *Position Summary on the Use of Seclusion in School Settings*, 34 Behavioral Disorders 235, 236 (2009).

<sup>&</sup>lt;sup>5</sup> Examining the Abusive and Deadly Use of Seclusion and Restraint in Schools, Hearing Before the House Comm. on Education and Labor, 111th Congress (2009) <a href="http://l.usa.gov/144D1h">http://l.usa.gov/144D1h</a>; Beyond Seclusion and Restraint: Creating Positive Learning Environments for All Students, Hearings before the Senate Comm. on Health, Education, Labor, and Pensions, 112th Congress (2012), <a href="http://bit.ly/SenRShrg1">http://bit.ly/SenRShrg1</a>.

incidents a year to less than 10 by using positive interventions and supports.

Given the dangers that restraint and seclusion pose, they should be limited to very rare emergencies when necessary to protect a person from physical danger, and only if less restrictive, less dangerous measures will not work. They should end when the emergency ends. Schools should prevent problematic behavior through de-escalation, conflict management, and evidence-based positive behavioral supports. Schools should take steps to inform parents within 24 hours of restraint/seclusion, so they can seek needed medical care. Highly dangerous restraints, including those that threaten life, and mechanical and chemical restraints, should be absolutely prohibited. Restraint and seclusion should not prevent a child from communicating medical distress; the GAO documented a number of instances in which children who could talk said they could not breathe.

But few states provide these protections for all children by law, and many states have weak legal protections or no protections at all. When parents move, a child can entirely lose his/her protections. A tattered patchwork of statutes and regulations, nonbinding guidelines and suggested models, and even total silence blankets the nation. A state border can be the end of the line of protection. The purpose of this report is to briefly summarize and analyze state laws and policies about restraint and seclusion so people can identify their own state rules and compare them to other states. These are brief summaries; for more information on the states and more detailed analysis, see <a href="How Safe is the Schoolhouse?">How Safe is the Schoolhouse?</a> An Analysis of State Seclusion and RESTRAINT LAWS AND POLICIES. That publication also includes maps illustrating all of the state lists below in the National Summary section and other issues.

#### **NATIONAL SUMMARY (ALL STATES)**

#### **Meaningful State Protections.**

- There are only 20 states with laws (statutes or regulations) providing meaningful protections from both seclusion and restraint for all children. But many of these statutes and regulations have loopholes and gaps and do not fully protect children. For example, some do not limit restraint and seclusion to emergencies threatening physical harm and danger. These states are AL, CO, DE (new in June 2013), GA, IL, IN (2013), IA, KS (2013), KY (2013), MA, MD, ME, NC, OH (2013), OR, RI, VT, WV, WI, and WY.
- There are only 33 states with laws (statutes or regulations) providing meaningful protections from both seclusion and restraint for children with disabilities alone. This is often due to the historical abuse of adults and children with disabilities. They are AL, CA, CO, CT, FL, GA, IL, IN, IA, KS, KY, LA, ME, MD, MA, MN, MT, NV, NH, NY, NC, OH, OR, PA, RI, TN, TX, BT, WA, WV, WI, WY.

• Only statutes and regulations provide mandatory legal protection. Both have the force of law and must be followed. Guidelines and policy documents are merely suggestive, and can be readily changed without going through a legislative or rulemaking process. <sup>6</sup> The insufficiency of state policies and guidelines is demonstrated by the number of states that have replaced guidelines with binding statutes and regulations over the last 3 years: DE, IN, KS, KY, LA, OH, VT, WI, and the seeking of mandatory statutes and regulations in MI and DC. Several state Protection & Advocacy and other state organizations have documented that policy guidance is insufficient, and shown that significant levels of restraint and seclusion have continued to occur in states with voluntary policies, but not than mandatory statutes and regulations.<sup>7</sup>

#### Restraint/ Seclusion Should Be Limited to Emergencies Threatening Physical Danger.

- By law (statute/regulation), restraint is limited to emergencies where it is absolutely necessary to protect someone from imminent physical danger or serious physical danger in 14 states for all children; 19 states for children with disabilities: AL, CO, CT<sup>d</sup>, DE, FL<sup>d</sup>, GA, IL, IN, KS, LA<sup>d</sup>, ME, NH, OH, OR, PA<sup>d</sup>, RI, TN<sup>d</sup>, VT, and WI. Throughout this section, the superscripted d (<sup>d</sup>) denotes a state which protects only students with disabilities.
- By law (statute/regulation), seclusion of all children is prohibited in non-emergency situations in 12 states, with 10 limiting it to emergencies threatening physical danger/serious physical danger, and 1 banning it entirely, and 1 banning it but permitting it for physical harm emergencies if the State Department of Education grants a waiver for an individual student. Seclusion of children with disabilities in non-emergency situations is forbidden in 18 states, with 13 limiting it to emergencies threatening physical danger/serious physical danger, 4 banning it, and 1 banning it with a waiver as described above. Seclusion is banned in GA, NV<sup>d</sup>, PA<sup>d</sup>, and TX<sup>d</sup>. It is limited to emergencies threatening physical danger in CO, FL<sup>d</sup>, IN, KS, KY, LA<sup>d</sup>, ME, OH, OR, TN<sup>d</sup>, VT, WI, and WY.
- The vast majority of states, 33, take the position that seclusion should be defined as a

<sup>&</sup>lt;sup>6</sup> At times, some seem to have viewed such guidelines as the equivalent of statute and regulation. This is likely due to confusion about the proposed House of Representatives bill, which would require states to adopt "policies" incorporating the statutory requirements. But States could not eliminate or change the federal requirements, and schools within the state would have to follow them. Thus, these mandatory "policies" would differ markedly from the kind of nonbinding guidance currently in place. Such nonbinding guidance documents should not be recognized or treated as statute, regulations, or the mandatory state policies under the House bill.

<sup>&</sup>lt;sup>7</sup> Michigan Protection and Advocacy Service, Inc., Safe and Protected? Restraint and Seclusion Remain Unregulated and Underreported in Michigan Schools 4-5 (2009); Disability Rights Wisconsin, Wisconsin Facets, and Wisconsin Family Ties, Out Of The Darkness... Into The Light, New Approaches To Reducing The Use Of Seclusion and Restraint With Wisconsin Children (2009); Protection & Advocacy and the Commonwealth Council on Developmental Disabilities, Restraint & Seclusion, The Reality in Kentucky Schools (2012).

room a child cannot exit (door is locked, or blocked by furniture, heavy equipment, child-proofing, or held closed by staff, etc.).<sup>8</sup>

#### Other Limits on Restraint/Seclusion.

- Restraints which **obstruct breathing** or threaten life are banned by statute/regulation in only 21 states for all children; 28 states, for those with disabilities. These laws may be framed as bans on life-threatening restraints, restraints impeding breathing, or prone restraints. Prone restraint (face-down restraint) specifically is barred in 10 states for all children; 11 for children with disabilities. There are forms of restraint other than prone restraint that can be impair breathing and be life threatening. There are 3 states that ban prone restraint only: GA, OR, and PA. There are 17 that ban all restraints that obstruct breathing or that threaten life for all children; 23 for children with disabilities. The states with explicit bans are: AL, CO, CT<sup>d</sup>, FL<sup>d</sup>, IA, KS, KY, LA<sup>d</sup>, ME, MD, MA, MN<sup>d</sup>, NH, RI, TN<sup>d</sup>, VT, WA, WV, WI, and WY. TX<sup>d</sup>, IN, and OH have implicit bans, forbidding either restraints that harm children or restraints that deprive the child of basic needs. A superscripted d (<sup>d</sup>) indicates a law applicable only to students with disabilities.
- Mechanical restraints include using duct-tape, bungee cords, and ropes to tie children up or tie them to furniture; locking children into chairs or tables or using other locking mechanisms; and other similar devices. In multiple cases, children have been locked into chairs and left alone in darkened rooms. Laws forbid mechanical restraints in 16 states for all children: AL, CO, GA, IL, IA, KS, KY, ME, NH, OH, OR, VT, WY, WV, and WI. Similarly, they forbid dangerous chemical restraints in only 15 states for all children: AL, CO, DE (new June 2013), GA, IL, IA, KS, KY, ME, NH, OH, OR, RI, VT, and WI.
- Restraint and seclusion must be used only as a last resort and only as long as the emergency lasts. There is no need or reason to use them otherwise. De-escalation and conflict mediation techniques and positive interventions should be used. Some children have been left in restraint/seclusion until they can sit perfectly still (extremely difficult if not impossible for students with autism and other developmental and other disabilities) or perform certain tasks unrelated to an emergency. Only 18 states have laws (statutes/regulations) requiring less intrusive methods to fail or be deemed ineffective before seclusion/restraint are used on all children; 24, children with disabilities. Only 17 states have laws mandating that restraint and/or seclusion end when the emergency ends for all children; 21, for children with disabilities.

If a threat would be resolved by less restrictive methods, they must be implemented

 $<sup>^{8}</sup>$  This combines those states with laws and with nonbinding guidance advocating for this definition.

<sup>&</sup>lt;sup>9</sup> Mechanical restraints do not include properly-prescribed therapeutic equipment used for that equipment's purpose (e.g. a child who needs help sitting up using a chair that provides the needed supports that has been prescribed by his therapist).

first. Restraint and seclusion are dangerous and also escalate behaviors, leading to a cycle of violence. Positive interventions, conflict resolution, and de-escalation resolve difficult situations and help reduce and prevent restraint/seclusion use. 10 Research shows that these measures are among the most useful strategies for reducing restraint/seclusion, according to the National Association of State Mental Health Program Directors. 11

- Of those states that allow seclusion, very few have laws requiring staff to continuously observe students and ensure they are not injured or killed. There are 28 states that allow seclusion of children with disabilities without requiring staff to continuously visually monitor (watch) them; there are 38 such states for all children. In 2007, an Atlanta teen committed suicide in seclusion being checked on occasionally by a teacher sitting outside the room; in 2011, an Indiana child attempted suicide while left alone in a room.
- Laws in only 22 states mandate that parents of all children be told if their child was restrained/secluded. 29 states lack such laws. There are 33 states with parental notification laws for students with disabilities, meaning 18 states lack them. Prompt notification is vital to ensure that parents can seek medical care for concussions, hidden injuries, other injuries, and trauma, and to enable them to work with schools to improve conditions and provide better supports for all. Only 14 states by law require schools to take steps to notify parents of all children on the same day or by the next day; 23, parents of children with disabilities. Still, of those states with parental notification laws or policies, the vast majority are for same day or next day notification, suggesting that this is a broadly-supported position. An actual or good faith effort to notify parents on the same day or within 1 day is required in: AZ, CO, IA, IL, KY, MD, ME, MA, NH, OH, OR, VT, WV, WY, CT<sup>d</sup>, FL<sup>d</sup>, LA <sup>d</sup>, MN<sup>d</sup>, MT <sup>d</sup>, TN <sup>d</sup>, TX <sup>d</sup>, UT <sup>d</sup>, WA <sup>d</sup>. Many of these states, including those which require a good faith effort within the first 24 hours, require actual written notification a few days later. For further information, including breaking this

<sup>&</sup>lt;sup>10</sup> See H.R. REP. No. 111–417 at 20-21. For example, in one Utah case, a child was repeatedly restrained for smearing fecal matter on the wall and banging his head. A functional behavioral assessment determined that he was doing this because the restraints were one of the few sources of physical contact he had. School personnel were able to end the behaviors by giving the child hugs and interactions for positive behavior, according to COPAA Executive Director Denise Marshall. Thus, a less restrictive intervention, identified through a functional behavioral assessment, stopped the child from injuring himself, while restraints only encouraged him to do so. Mark Sherman, *Case Study Shows Importance of FBA*, SPECIAL ED. CONNECTIONS (LRP), July 15, 2008.

<sup>&</sup>lt;sup>11</sup> KEVIN ANN HUCKSHORN, SIX CORE STRATEGIES TO REDUCE THE USE OF SECLUSION AND RESTRAINT AS A PLANNING TOOL (The National Association of State Mental Health Program Directors 2005).

<sup>&</sup>lt;sup>12</sup> Alan Judd, *Death Highlights Lack of Regulation at Psycho-Educational Schools*, ATLANTA J. CONSTITUTION, July 27, 2009 (death in Atlanta); NATIONAL DISABILITY RIGHTS NETWORK, SCHOOL IS NOT SUPPOSED TO HURT 11 (2012) (attempted suicide in Indiana).

down into specific time periods, please see <u>How Safe is the Schoolhouse? An Analysis of State Restraint and Seclusion Laws</u>, available at www.autcom.org.

• Few states require state level data collection. Data collection provides important transparency, allows public oversight, and enables schools to analyze data, respond, and make changes to better prevent restraint/seclusion. The available data suggests that data for all states will be highly instructive. In 2013, Connecticut began reporting an annual summary. In 2011-12, restraint and seclusion were used 37,063 times with students with disabilities (numbers for students without disabilities are not reported). In 2007-08, Texas and California reported at least 33,000 incidents of restraint and seclusion. In 2010, Florida started keeping data. In 2011-12, Florida reported 9,751 restraint and 4,245 seclusion episodes. Only 17 states collect even minimal data at the state level on restraint/seclusion use each year. Still, 28 states require that data be kept at the state, local, or school level, indicating that keeping such records is not burdensome.

<sup>&</sup>lt;sup>13</sup> Conn. State Dept. of Educ, Annual Report on the Use of Physical Restraint and Seclusion in Connecticut (April 2013); GAO REPORT at 5, 7; Sarah Gonzalez and John O'Connor, *Florida Keeps Two Sets of Seclusion Data -- and Why Neither May Tell the Full Story*, STATE IMPACT/NPR, Aug. 14, 2012.



## **Brief Summaries of Each State**

# State Seclusion and Restraint Laws and Policies effective May 2, 2013

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Please note: These are brief summaries of important state law and policy provisions about restraint and seclusion. These are not full descriptions of state seclusion or restraint laws (statutes/regulations) or polices. For more detailed state information, please see <a href="How Safe is the Schoolhouse?">How Safe is the Schoolhouse?</a> An Analysis of State Seclusion and Restraint Laws & Policies available at <a href="hww.autcom.org">www.autcom.org</a> or email the author at <a href="mailto:jessica@jnba.net">jessica@jnba.net</a>

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#### **ALABAMA**

- AL has a regulation with meaningful protections for all children.
- AL permits restraint only in an emergency when its use is necessary to prevent an imminent threat of physical harm.
- AL forbids restraints that interfere with breathing and/or prone restraint. It forbids mechanical and chemical restraints.
- AL forbids locked seclusion. There are no restrictions on seclusion if the door is not formally locked but blocked by furniture, heavy equipment, etc., held closed by staff, or by cheap child proofing that adults and children without disabilities can open, but children with disabilities may not be able to. Alabama is in the minority on this.
- Staff must continuously and directly visually observe children in seclusion.
- Restraint/Seclusion cannot be used unless less restrictive, less dangerous interventions have failed/would be ineffective. Restraint/Seclusion must end when the emergency ends.
- Parents must be notified within 1 business/school day of the use of restraint.
- State collects data at least annually regarding use of restraint/seclusion although data collected may be limited. Data collection is important for transparency, public oversight, and to allow schools, professionals, and parents to understand school restraint/seclusion use, analyze the data, and make changes to better prevent restraint/seclusion.

#### **ALASKA**

- AK has some very minimal protection in regulation, and mostly simply explicitly permits the
  use of restraint. Restraint is permitted for threats of physical harm, property destruction, or
  educational disruption (e.g., tantrums). But, restraint is so dangerous that it should be
  permitted only when activity threatens imminent physical danger—not for other activity
  that poses no such threat. (See KS below.)
- In 2012, suggested, voluntary guidance was written for children with disabilities. Like other nonbinding guidance, it has no legal effect and is merely a suggestion. It is also easily changed, requiring no legislative or rulemaking process.
- Neither restraint nor seclusion are limited to emergencies threatening imminent physical danger by law. The suggested guidelines encourage this limit, but do not require it. Thus, dangerous seclusion and restraint may legally be used even when there is no risk of harm to anyone.
- There is no legal limit forbidding restraints that interfere with breathing or mechanical or chemical restraints. The suggested guidelines encourage this limit, but do not require it.
- Laws do not require parental notification when restraint/seclusion are used or data collection. The nonbinding guidelines encourage notifying parents as soon as possible, but do not require it.
- State does not collect data.

#### **ARKANSAS**

- There are no statutes, regulations, or even nonbinding, suggested guidelines about restraint in schools. Restraint can be used for any reason, even when no one is at risk of harm.
- AR regulation applies only to seclusion of students with disabilities.
- Seclusion is allowed for threats of physical harm, property damage or severe educational disruption, even when no one's safety is at risk. This exposes children to seclusion for nonemergencies; seclusion is so dangerous that it should only be used in emergencies, if at all.
- Locked rooms are forbidden.
- Staff must continuously and directly visually observe children in seclusion.
- No requirement that less restrictive mechanisms be used or considered; no requirement that use end when the emergency ends.
- No legal requirements to notify parents or collect data.

#### **ARIZONA**

- There are no statutes, regulations, or even nonbinding, suggested guidelines about restraint in schools. AZ does not forbid restraints that interfere with breathing and/or prone restraint. It forbids mechanical and chemical restraints.
- AZ's 2013 Statute applies only to Seclusion.
- AZ allows seclusion in emergencies threatening physical harm or under any circumstances as long as parents consent. (In other states, parents have given consent, and later found their child injured or traumatized by seclusion because the parents did not fully understand to what they were consenting.)
- AZ does not require monitoring of children in seclusion.
- AZ does not require seclusion to end when the emergency ends.
- AZ does not require that before seclusion is used, less restrictive, less dangerous interventions fail or be deemed ineffective.
- AZ requires that schools make reasonable efforts to notify parents on the same day seclusion is used. It does not require any notification when restraint is used.

#### **CALIFORNIA**

- CA has a statute and a regulation with some degree of meaningful protections for children with disabilities only. California does not protect students without disabilities.
- CA explicitly permits restraint and seclusion in "emergency" situations. These are defined as spontaneous, unpredictable events posing an imminent threat of serious physical harm. CA does not forbid the use of restraint or seclusion in non-emergencies. So, there are no limits on using restraint or seclusion for predictable behavior or behavior that is not dangerous. This is due to the wording of California's statute. CA's protections in statute and regulations apply only to emergency interventions.

- CA forbids locked seclusion. It does not prohibit seclusion if the door is not formally locked but blocked by furniture, heavy equipment, etc., held closed by staff, or by cheap child proofing that adults and children without disabilities can open, but children with disabilities may not be able to.
- CA does not limit restraints that impede breathing or mechanical or chemical restraints. These are all very dangerous restraints. Mechanical restraints include duct-taping, tying or binding children to furniture, objects, or themselves; locking chairs and furniture; etc.
- CA requires only "adequate" supervision of unlocked seclusion (unlocked rooms child cannot physically exit). It does not require continuous visual monitoring and it imposes no limits on non-emergency seclusion. Children have died in seclusion, attempted suicide, and been injured when not watched continuously.
- Parents must be notified of restraint/seclusion within 1 business/school day for emergency use. There are no notification requirements for non-emergency use.
- State collects annual data for emergency interventions, but not non-emergency use. Data
  collection is important for transparency, public oversight, and to allow schools,
  professionals, and parents to understand school restraint/seclusion use, analyze the data,
  and make changes to better prevent restraint/seclusion.
- Less restrictive, less dangerous interventions must fail or be deemed ineffective before restraint/seclusion are used. Restraint/seclusion must end when the emergency ends. These restrictions apply only if there is an emergency; in non-emergencies, restraint/seclusion do not have limits in California.

#### **COLORADO**

- CO has a statute or regulation that provides meaningful protections for all children.
- CO allows restraint/seclusion only emergencies when their use is necessary to prevent an imminent threat of physical harm.
- CO forbids the most dangerous restraints: those that interfere with breathing, mechanical restraint (except by armed security officers), and chemical restraint.
- CO requires only "reasonable" monitoring of seclusion; it does not require staff to continuously visually monitor (watch) children. Children have died in seclusion, attempted suicide, and been injured when not watched continuously.
- CO requires parents to be notified on the same day, with a full written report sent later.
- Restraint/Seclusion must end when the emergency ends.
- Restraint/Seclusion cannot be used unless less restrictive, less dangerous interventions have failed/would be ineffective. Restraint/seclusion are a last resort.
- State does not require collection of data.

#### **CONNECTICUT**

- CT has a statute and regulation with meaningful protections for students with disabilities only.
- CT allows restraint only in an emergency when its use is necessary to prevent an imminent threat of physical harm.
- CT forbids two of the most dangerous restraints: those that interfere with breathing, and
  chemical restraint. It permits mechanical restraint for threats of physical harm or if provided
  for in a student's Individualized Education Program (IEP) for any reason. Such IEP provisions
  are dangerous, as they are viewed as permission to use a dangerous procedure freely and
  regularly.
- CT allows seclusion only in an emergency when its use is necessary to prevent an imminent threat of physical harm or if it is written into the child's Individualized Education Program (IEP). Seclusion can be put into an IEP for any reason. Such IEP provisions are dangerous, as they are viewed as permission to use a dangerous procedure freely and regularly.
- Allowing mechanical restraint and seclusion to included in IEPs in this manner is highly dangerous. It can increase use of the procedure by causing it to be used as a default with children. Media reports indicate that seclusion was part of a "daily plan" for children with disabilities in at least one Connecticut school district. The students were put into "scream rooms." Rather than focusing on ending the use of the room and using positive interventions, the district initially decided they would "be moved to out-of-the-way locations so their use in the future is not disruptive to other students." The law may also create incentives to put seclusion in an IEP to avoid questions about whether there was an emergency. In 2011-12, seclusion was used 5,161 times in Connecticut because of an emergency where someone was in imminent risk of danger, but 18,147 times in non-emergencies where an IEP allowed it to be used for other reasons, such as behavior modification. The latter was more than 3.5 times the use of seclusion in emergencies.
- The IEP team determines the frequency of monitoring of children in seclusion. This is the law despite that fact that children have died in seclusion, attempted suicide, and been injured when not watched continuously.<sup>15</sup>
- Seclusion must end when child is "compose[d]" or in 1 hour. This can be much longer than any emergency. Children with significant disabilities (including intellectual disabilities, autism and other developmental disabilities) may threaten no one but be unable to compose themselves (e.g., crying or screaming in fear).
- CT requires same day attempted parental notification with a later written follow up report. But if seclusion is in a child's IEP, then the IEP team determines when and whether to notify parents. This can deprive parents of needed information.

 $<sup>^{14}</sup>$  Shawn R. Beals, Angry Parents, Scared Students Seek Answers About Farm Hill School 'Scream Rooms,' Hartford Courant, Jan. 12, 2012.

<sup>&</sup>lt;sup>15</sup> See footnote 12, above.

 Per 2012 statute, data about restraint/seclusion use must be collected and reported to state. Data collection is important for transparency, public oversight, and to allow schools, professionals, and parents to understand school restraint/seclusion use, analyze the data, and make changes to better prevent restraint/seclusion.

#### **DELAWARE**

- DE has a legally-binding statute with meaningful protections from restraint and seclusion for all children.
- DE permits physical restraint only for imminent serious threats of physical harm. DE bans mechanical restraints and seclusion but allows the State Department of Education to waive these two bans for individual children based on compelling justification and with specific conditions and safeguards. But there are no other limits on the waivers. Thus, a waiver may be granted to use them when no one is in danger of harm.
- DE forbids restraint that interferes with breathing and chemical restraint. It allows the use of dangerous mechanical restraints pursuant to a waiver as stated above. This can include duct-taping children, and tying, strapping, and locking them into chairs, other equipment, etc. It is highly dangerous.
- Less restrictive, less dangerous interventions must fail/be ineffective before physical restraint may be used. Restraint must end when the emergency ends. The law does not apply similar rules if seclusion or mechanical restraint are used under a waiver.
- Parents must be receive timely notification of the use of restraint, a term to be defined by the State Department of Education through regulation. Notification within a day, however, is important so parents can seek needed medical help for concussions, hidden internal injuries, etc.
- State Department of Education to determine what data must be collected. Data collection is important for transparency, public oversight, and to allow schools, professionals, and parents to understand school restraint/seclusion use, analyze the data, and make changes to better prevent restraint/seclusion.
- If seclusion is permitted, the student must be continuously and directly observed.

#### **DISTRICT OF COLUMBIA**

- The only relevant statute forbids "unreasonable restraint." There is no statute or regulation providing meaningful protection from restraint and seclusion for all students.
- DC primarily has nonbinding guidelines for all students. Such guidelines are not statutes/regulations and do not provide legal, mandatory protections for children. They are also easily changed, requiring neither a legislative or rulemaking process.
- Guidelines urge limiting restraint and seclusion to emergencies where they are necessary to prevent physical harm, but there is no such restriction in binding law.
- Guidelines state that prone and supine, mechanical and chemical restraints are not authorized. But there is no such limit in binding statute or regulation.

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- Lock on door to seclusion room should automatically release, per guidelines, but there is no such limit in binding statute or regulation.
- Guidelines urge that children in seclusion be continuously and directly visually monitored, but there is no such limit in binding statute or regulation.
- Guidance urges that restraint/seclusion should not be used unless less restrictive, less dangerous interventions have failed/would be ineffective. They also urge that restraint/seclusion should end when the emergency ends, per guidelines. None of these limits are in legally-binding statutes or regulations.
- DC has no law or regulation requiring that parents be informed of the use of restraint or seclusion. But guidelines urge same day notification.

#### **FLORIDA**

- FL has a statute with meaningful protections for children with disabilities. It does not have a law for all children.
- FL has an implied requirement that restraint and seclusion be used only for imminent threat of serious physical harm. The statute requires an incident report to be filed for each incident that explains why there was a risk of serious physical harm. But the requirement is not explicit, and the statute may be interpreted as permitting restraint or seclusion for any reason.
- FL forbids restraint that interferes with breathing. It has no limit on mechanical or chemical restraints. These are all very dangerous restraints.
- FL does not require school staff to monitor or observe a child in seclusion; it leaves this decision up to the school district. Children have been injured and even died in seclusion when they were not continually observed by staff.
- FL requires the lock on the door to a seclusion room to automatically release.
- FL requires that parents be notified on the same day as the event, with a fuller written report later.
- State collects data at least annually regarding the use of restraint and seclusion. Data collection is important for transparency, public oversight, and to allow schools, professionals, and parents to understand school restraint/seclusion use, analyze the data, and make changes to better prevent restraint/seclusion.

#### **GEORGIA**

- GA has a legally-binding regulation with meaningful protections from restraint and seclusion for all children.
- GA permits restraint only for imminent threats of physical harm.
- GA forbids prone restraint and mechanical and chemical restraints.
- GA bans the use of seclusion, meaning rooms from which children are physically prevented from exiting (locked, blocked by furniture, held shut by teachers, child proofing, etc.).

- Less restrictive, less dangerous interventions must fail/be ineffective before physical restraint may be used. Restraint must end when the emergency ends.
- Parents must be notified of restraint within 1 business/school day.

#### **HAWAII**

- Hawaii has a very weak regulation for students with disabilities with no real protection from restraint. It imposes no limits on seclusion. Hawaii allows the use of reasonable force to prevent injury to a person or property.
- Otherwise, Hawaii is silent and provides no protections. There are no prohibitions on extremely dangerous restraints, such as those that threaten life, or mechanical or chemical restraints. There are no requirements for parental notification. There are no requirements to monitor children in seclusion or to ensure that seclusion spaces are safe. There are no requirements to use less restrictive, less dangerous measures before using restraint or seclusion. There are no requirements that use end when the emergency ends. There is no state-mandated data collection.

#### **IOWA**

- IA has a statute or regulation with meaningful protections for all children. But there are still loopholes in its law, including permitting the use of restraint and seclusion when no one is in danger and allowing them to be used after the emergency ends.
- Restraint and seclusion are allowed for threats of physical harm, property destruction, or educational disruption. But restraint/seclusion are so dangerous that they should be permitted only when activity threatens imminent physical danger—not for other activity that poses no such threat. (See Kansas discussion below.)
- IA forbids restraints that interfere with breathing, as well as mechanical and chemical restraint.
- IA requires the lock on seclusion rooms to automatically release.
- Staff must continuously and directly visually observe children in seclusion.
- Less restrictive, less dangerous interventions must fail/be ineffective before restraint or seclusion are used.
- Restraint is limited to a "reasonable and necessary" period; seclusion, a "reasonable" period. Neither are required to end when the emergency ends, an important limitation. Terms like "reasonable" are open-ended. Children with significant disabilities (including intellectual disabilities, autism and other developmental disabilities) may threaten no one but be unable to compose themselves (e.g., crying or screaming in fear).
- School must attempt to notify parents on the same day as the event and provide fuller written follow up.

#### <u>IDAHO</u>

No statute, regulation, or even nonbinding guidelines.

#### **ILLINOIS**

- IL has a statute or regulation with meaningful protections from restraint and seclusion for all children. But there are still loopholes in Illinois' law, including allowing seclusion when no one is in danger and allowing the procedures to continue after any emergency has ended.
- IL permits restraint only for imminent threat of physical harm. Seclusion is permitted for threats of physical harm or educational disruption (which may threaten no one in any way). But seclusion, like restraint, is so dangerous that it should be allowed only when someone's physical safety is imminently threatened.
- IL forbids restraints that interfere with breathing and mechanical and chemical restraints.
- Locks on seclusion room doors must automatically release.
- Staff must continuously and directly visually observe children in seclusion.
- Restraint should end when the emergency ends. Seclusion should end 30 minutes after the behavior resulting in seclusion has ended.
- Parents must be notified of restraint/seclusion within 1 calendar day or 24 hours.

#### **INDIANA**

- IN has a statute with some meaningful protections for all children. A new statute enacted April 30, 2013 requires that a commission be appointed to write rules and a model plan. But the statute does not fully circumscribe the commission's authority, and the rules it writes may or may not properly protect children. The statute does lay out some elements of the model plan. School districts will be required to adopt their own plans, including all elements in the model, by 2014.
- Restraint/seclusion will be allowed only in an emergency where their use is necessary to prevent an imminent threat of physical harm.
- IN forbids restraint that is harmful to children or staff. The statute does not spell out what this means, or whether it includes mechanical and chemical restraints.
- IN requires that less restrictive, less dangerous interventions be attempted and fail before restraint/seclusion are used. Restraint/seclusion must end when the emergency ends or after a brief period as defined in model.
- Parents must be notified as soon as possible.
- The model plan must include requirements for data collection as part of the school district's annual report.
- The model plan is being developed as this publication is being written. For more information, visit the Indiana Department of Education website, http://www.doe.in.gov/.

#### **KANSAS**

- KS has a regulation with meaningful protections against seclusion and restraint for all children. The regulation was adopted in February 2013, published on April 4, 2013, and made effective on April 19, 2013.
- KS permits restraint/seclusion only in an emergency when their use is necessary because a student "an immediate danger to self or others." As clarification, "violent" property destruction is considered a threat of physical danger. Other forms of property destruction—where no one is in danger of harm—are not grounds to use restraint or seclusion. This is appropriate. Experts agree that because restraint/seclusion are so dangerous, they should only be allowed when activity threatens imminent physical danger—not for other activity that threatens no one. See Reece L. Peterson, Developing School Policies & Procedures for Physical Restraint and Seclusion in Nebraska Schools 20 (Nebraska Dept. of Educ. 2010 <a href="http://www.education.ne.gov/documents/Restraint-Seclusion final guidance document 6-22-10.pdf">http://www.education.ne.gov/documents/Restraint-Seclusion final guidance document 6-22-10.pdf</a>).
- KS forbids restraints that interfere with breathing; prone, supine, mechanical and chemical restraints.
- KS requires staff training.
- KS does not require less restrictive, less dangerous interventions to fail/be ineffective before restraint/seclusion are used, and does not require them to end when the emergency ends.
- KS does not require continuous visual monitoring of children in seclusion. Children unwatched in seclusion have died and been injured.
- KS requires parents to be of restraint/seclusion within 2 school days.
- State requires collection of data. Data collection is important for transparency, public oversight, and to allow schools, professionals, and parents to understand school restraint/seclusion use, analyze the data, and make changes to better prevent restraint/seclusion.

#### **KENTUCKY**

- KY has a regulation with meaningful protections against seclusion and restraint for all children. The regulation was adopted in February 2013.
- Restraint is limited to emergencies threatening physical danger and to certain criminal acts, such as criminal destruction of property. Yet, experts agree that because restraint is so dangerous, it should only be allowed when activity threatens imminent physical danger not for other activity (like destruction of property) that threatens no one. (See KS.)
- KY forbids restraints that interfere with breathing, mechanical and chemical restraint.
- Seclusion is limited to emergencies threatening physical danger where seclusion is necessary to protect someone from danger. Doors to seclusion rooms cannot be locked, or blocked so that children cannot exit.
- Staff must continuously and directly visually observe children in seclusion.
- Less restrictive, less dangerous interventions must fail/be ineffective before restraint or seclusion are used. Restraint/Seclusion must end when the emergency ends.

- Parents must be notified of restraint/seclusion within 1 calendar day or 24 hours.
- State requires collection of data. Data collection is important for transparency, public oversight, and to allow schools, professionals, and parents to understand school restraint/seclusion use, analyze the data, and make changes to better prevent restraint/seclusion.

#### **LOUISIANA**

- LA has a statute with meaningful protections against seclusion and restraint for children with disabilities.
- LA permits restraint and seclusion only in an emergency when necessary to prevent an imminent threat of physical harm.
- LA forbids restraints that interfere with breathing and mechanical restraints. It has no limits on dangerous chemical restraints.
- Staff must continuously and directly visually observe children in seclusion.
- Less restrictive, less dangerous interventions must fail/be ineffective before restraint/seclusion are used. Restraint/Seclusion must end when the emergency ends.
- Parents must be notified of restraint/seclusion within 1 calendar day or 24 hours, with a fuller written report later.
- State collects data at least annually regarding use of restraint/seclusion.

#### **MASSACHUSETTS**

- MA has a statute with meaningful protections against seclusion and restraint for all children, but there are significant loopholes that likely increase use of these dangerous practices or allow their use in non-emergencies, when no one is threatened.
- MA permits restraint only (a) in an emergency when it is necessary to prevent an imminent threat of physical harm, or (b) as stated in a child's Individualized Education Program or Behavior Intervention Plan even when no one is in risk of any harm. Inclusion in the IEP can cause overuse of restraint and seclusion and permit it in situations where it should not be used. This is a significant loophole that can undermine protections. For a further explanation of the harm of this IEP provision, see Connecticut above. Restraint and seclusion are so dangerous that they should never be used in non-emergencies when no one's safety is at risk.
- MA forbids restraint that interferes with breathing, but permits prone restraint by trained staff. MA permits mechanical and chemical restraint with parental consent and physician instructions. These are all dangerous restraints that should be forbidden. The harm is experienced by the child, not the parent or physical granting consent or giving instructions. Training is not enough to ensure the safety of children subjected to prone or other restraints.
- MA forbids locked seclusion if there is no access to staff, but permits it otherwise. "Access" is undefined and simply may mean the ability to call to staff over a monitor. MA does not

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restrict use of seclusion rooms or limit them only to situations involving threats of physical danger when there is any kind of access to staff. This is not strong enough to protect children. Someone can be accessible and down the hall or in another place. Jonathan King is a young man who died in a seclusion room in Atlanta with school staff sitting outside the door, and accessible to him.

- Before restraint is used, less restrictive, less dangerous measures must fail or be deemed ineffective. Restraint must end when emergency ends.
- Parents must be notified on the same day as the event. But if the restraint lasted less than 5 minutes, the school need not inform parents. School can ask parents to waive notice of other restraints. Waiver is forbidden for restraints exceeding 20 minutes or if it restraint results in serious injury. This term is not defined, giving schools broad discretion. A five minute restraint can still cause harm.
- Data is reported to the State only if the restraint exceeds 20 minutes or if someone was seriously injured (undefined) during the restraint. Since many restraints last less than 20 minutes, these will go entirely unreported. Data collection is important for transparency, public oversight, and to allow schools, professionals, and parents to understand school restraint/seclusion use, analyze the data, and make changes to better prevent restraint/seclusion.

#### **MARYLAND**

- MD has a statute and regulations that provide meaningful protections against seclusion and restraint for all children.
- MD allows restraint and seclusion only in an emergency when it is necessary to prevent an imminent threat of serious physical harm--or as stated in a child's Individualized Education Program or Behavior Intervention Plan even when no one is in risk of any harm. Because restraint and seclusion are so dangerous, they should be limited to emergencies requiring their use to prevent physical danger. Inclusion in the IEP in this manner can cause overuse of restraint and seclusion and permit it in situations where it should not be used. This is a significant loophole in an otherwise protective law. For a further explanation of the harm of this IEP provision, see Connecticut above.
- MD forbids restraint that interferes with breathing and effectively bans prone restraint through describing forbidden activity that meets the description of prone restraint.
- MD bans mechanical restraints except for schools with hospital accreditation. MD does not limit chemical restraints. These are both very dangerous restraints.
- Staff must continuously and directly observe children in seclusion.
- Before seclusion/restraint is used, less restrictive, less dangerous measures must fail or be deemed ineffective.
- Seclusion must end within 30 minutes; restraint must end within 30 minutes or earlier if the child is calm.

• Schools must notify parents within 1 calendar day or 24 hours unless otherwise stated in IEP.

#### **MAINE**

- ME has a statute and regulations with meaningful protections for all children. ME's scheme was revised first in April 2012 and again in April 2013.
- Restraint/Seclusion are limited to emergencies threatening a risk of physical harm. The new April 2013 statute permits the use of restraint/seclusion when a "reasonably prudent" person would take steps to protect people from physical harm.
- ME excludes brief contact to break up a fight from the definition of physical restraint.
- ME forbids restraints that interfere with breathing, and mechanical and chemical restraints.
- ME forbids locked seclusion. ME allows unlocked seclusion (e.g., door blocked by furniture, equipment, staff holding shut, etc.) for emergency threats of physical harm.
- Staff must continuously and directly visually observe children in seclusion.
- Less restrictive, less dangerous interventions must fail before restraint/seclusion are used. Restraint/Seclusion must end when the emergency ends.
- Parents must be notified on the same day that restraint or seclusion occurs.
- The State collects data annually.
- Due to complaints that staff did not understand the law, the 2013 law requires that information about the law to be provided annually.

#### **MICHIGAN**

- Michigan has only nonbinding suggested guidelines. Such guidelines are not statutes or regulations. They do not provide legal protections for children and are not mandatory (meaning they may be ignored). They are also easily changed by the State Department of Education, requiring neither a legislative or rulemaking process. MI has a very inadequate statute with minimal, very weak protections.
- Statute allows restraint for threats of physical harm, property destruction or educational disruption. But restraint/seclusion are so dangerous that they should be permitted only when activity threatens imminent physical danger—not for other activity that poses no such threat. (See KS above.)
- Nonbinding guidance does not suggest limits on restraints that interfere with breathing or prone restraint, mechanical restraint, or chemical restraint.
- Nonbinding guidance suggests seclusion be limited to for emergencies, meaning immediate threats of physical harm, but cannot require this.
- Nonbinding guidance suggests, but does not require, staff continuously and directly watch children in seclusion.
- Nonbinding guidance suggests but does not require, that less restrictive, less dangerous interventions should fail/be ineffective before restraint/seclusion are used.

- MI suggests, but does not require, that parents be notified on the same day the event occurs.
- MI suggests data be collected by State, but current status is unclear.

#### **MINNESOTA**

- MN has a statute and regulations that provide meaningful protections from restraint and seclusion for children with disabilities.
- The MN statute appears intended to limit restraint to emergencies threatening physical injury. But it was drafted in a way that created some ambiguity. It defines "physical holding" to mean restraint used to prevent physical injury. It then limits the use of physical holding. So, it is possible that the restraint used for other purposes is not covered by the statute. But the intent of the statute seems to be to limit restraint to emergencies threatening physical injury.
- MN forbids restraint that interferes with breathing. Prone restraint is allowed until August 2015. There are limitations and it is expected that MN will make a plan to end the use of prone restraint. Nonetheless, the time period for ending the use of prone restraint has been extended several times.
- MN has no limit on very dangerous mechanical or chemical restraints.
- Seclusion is allowed only when necessary for immediate threats of physical harm or serious property destruction. But property destruction that does not threaten physical harm should not be a basis for seclusion, forcing a child into a locked room or other room from which he/she cannot exit (e.g. doors blocked by furniture, equipment, etc.).
- Locks on seclusion room doors should automatically release.
- Staff must continuously and directly visually observe children in seclusion.
- Less restrictive, less dangerous interventions must fail/be deemed ineffective before restraint/seclusion are used. The use of the practices must end when the emergency ends.
- Parents must be notified the same day, with a fuller written report afterwards.

#### **MISSISSIPPI**

No statute, regulation, or even nonbinding guidelines.

#### **MISSOURI**

- MO has a weak statute with minimal protections for all children, and nonbinding, suggested
  guidelines that are broader but have no legal authority. Such guidelines are not
  statutes/regulations and do not provide mandatory protections for children. They are also
  easily changed, requiring neither a legislative or rulemaking process. Thus, MO lacks
  meaningful protections for all students from restraint/seclusion.
- MO's weak law bans locked, solitary seclusion except when awaiting law enforcement's arrival. Otherwise, the law is silent and creates no protections.

- MO's nonbinding guidance suggests permitting seclusion (which it calls isolation) only if the
  door does not have "locking hardware." Thus, blocking doors with equipment or furniture
  or holding them closed appears to be permitted. This has the same effect as seclusion with
  locking hardware. MO's voluntary guidelines suggest allowing school districts choose to use
  seclusion (isolation) for threats of physical harm, destruction of property, or as stated in the
  IEP.
- MO's nonbinding guidance suggests, but does not require, staff have the ability to see/hear a child in seclusion (isolation) at all times.
- MO's nonbinding guidance suggests, but does not require, allowing restraint for threats of physical harm, property destruction, educational disruption, or as stated in the IEP for any reason whatsoever. Experts agree that because restraint/seclusion are so dangerous, they should only be allowed when activity threatens imminent physical danger—not for other activity that threatens no one. (See KS above.) For an explanation of why IEP provisions like this one are harmful, see the Connecticut section above.
- MO's nonbinding guidance suggests, but does not require, a ban on restraint that interferes with breathing and/or prone restraint, and on chemical restraint.
- MO's nonbinding guidance suggests, but does not require, that mechanical restraint be
  permitted as stated in the IEP. Mechanical restraints (duct-taping, tying or binding children
  to furniture, objects, or themselves; locking chairs and furniture, etc.) are particularly
  dangerous.
- MO's nonbinding guidance suggests less restrictive, less dangerous interventions should either fail or be deemed ineffective before the practices are used, and that the practices must end when the emergency ends. Yet, the guidelines also suggest allowing their use in non-emergencies (e.g. educational disruption, destruction of property, and as stated in an IEP).
- MO's guidance suggests, but does not require, same-day notification for parents. Prompt
  notification is vital so that parents can seek needed medical care (including for concussions
  and hidden internal injuries), seek treatment for trauma, care for their child, and work with
  the school to use behavioral supports that prevent further use of restraint/seclusion
  (isolation).
- MO does not require data collection.

#### **MONTANA**

- MT has a regulation with meaningful protections from restraint and seclusion for children with disabilities.
- Seclusion is permitted for threats of physical harm, property damage, or educational
  disruption. MT permits restraint for threats of physical harm, property destruction, or
  educational disruption. But, experts agree that because restraint/seclusion are so
  dangerous, they should only be allowed when activity threatens imminent physical
  danger—not for other activity that threatens no one. (See KS above.)

- Staff must continuously and directly visually observe children in seclusion.
- MT forbids locked seclusion rooms and mechanical restraint.
- MT has no limit on restraints that interfere with breathing or chemical restraints.
- The time limits on restraint/seclusion are those stated in the child's IEP or Behavioral Intervention Plan (BIP). This could allow use of restraint/seclusion long after any threat has ended.
- Staff should try less restrictive, less dangerous interventions first, but there is no requirement that they fail or be ineffective before restraint/seclusion are used.
- Parents must be notified within 1 calendar day or 24 hours.

#### **NORTH CAROLINA**

- NC has a statute or regulation with some meaningful protections from both restraint and seclusion for all children.
- Restraint and seclusion are allowed for threats of physical harm, property destruction, or
  educational disruption or as stated in the IEP/BIP. Experts agree that because
  restraint/seclusion are so dangerous, they should only be allowed when activity threatens
  imminent physical danger—not for other activity that threatens no one. (See KS above.)
  For an explanation of why IEP provisions like this one are harmful, see the Connecticut
  section above.
- NC has no limit on restraints that interfere with breathing or mechanical or chemical restraints. These are all very dangerous restraints.
- Staff must be able to see/hear child at all times in seclusion, but this does not require
  actually seeing or hearing the child. A child committed suicide in an Atlanta seclusion room
  as his teacher sat outside. She was capable of seeing him if she looked in, which she could
  do at any time.
- School to notify parents "promptly" with written follow-up within 30 days if child was injured or seclusion lasts longer than 10 minutes. Notification is also required if the school violated the prohibitions in the statute. Otherwise, schools need not notify parents—leaving them in the dark without any knowledge that their child has been subjected to these practices. This is one of the weakest parental notification requirements among the states. The vast majority of states with rules require notification within 24 hours and require notification of all use of seclusion/restraint. Prompt notification is vital so that parents can seek needed medical care (including for concussions and hidden internal injuries), seek treatment for trauma, care for their child, and work with the school to use behavioral supports that prevent further use of restraint/seclusion.

#### **NORTH DAKOTA**

No statute, regulation, or even nonbinding guidelines.

#### **NEBRASKA**

- NE has a minor, very brief regulation applicable to all children. It simply tells school districts to adopt a restraint/seclusion policy as they choose. The regulation does not specify or suggest any requirements for that policy. NE lacks a law providing meaningful protections from restraint/seclusion for all children.
- NE also has suggested, nonbinding guidance. Although NE's guidelines contain a highly instructive suggested program, they are not statutes/regulations. They do not provide mandatory, legal protections for children. They are also easily changed, requiring neither a legislative or rulemaking process.
- NE's nonbinding guidance suggests, but does not require, that restraint/seclusion be permitted only when necessary due to an imminent threat of physical harm.
- NE's nonbinding guidance suggests, but does not require, that schools not use restraints that interfere with breathing, prone restraint, or mechanical or chemical restraints.
- NE's nonbinding guidance suggests, but does not require, that any lock on a seclusion room door automatically release.
- NE's nonbinding guidance suggests, but does not require, that staff have the ability to see/hear child in seclusion at all times. It is important that staff not only have the ability to observe children, but that they actually do so continuously. A child committed suicide in an Atlanta seclusion room as his teacher sat outside. She was capable of seeing him if she looked in, which she could do at any time.
- NE's nonbinding guidance suggests that restraint/seclusion end when the emergency ends.
- NE suggests, but does not require, that parents be informed of restraint/seclusion on the same day that the event occurs.

#### **NEW JERSEY**

No statute, regulation, or even nonbinding guidelines. A bill, "Matthew's Law" has been considered each legislative session, but has not passed.

#### **NEW HAMPSHIRE**

- NH has a 2010 statute that provides with meaningful protections from restraint for all children. It has older special education regulations that control seclusion for children with disabilities. The older regulations also discuss restraint, but they are superseded by the new statute where there are conflicts.
- NH permits restraint only when necessary to stop an imminent threat of serious physical harm.
- NH forbids restraints that interfere with breathing, and prone, mechanical, and chemical restraint.
- Restraint may not be used unless less restrictive, less dangerous interventions have failed/been deemed ineffective. Its use must end when the emergency ends.

- Seclusion is governed by older regulations. NH's special education regulations prohibit unobserved seclusion in a space the child cannot exit unless there is a threat of physical harm or it is documented in the IEP (after certain conditions are met). This provision has large loopholes. First, it allows unobserved, locked seclusion for almost any reason when documented in the IEP. This kind of seclusion is not restricted at all by the regulations. For an explanation of the problems posed by these types of "IEP regulations," see the Connecticut summary above. Second, the provision allows seclusion for any reason without any regulation as long as the child is observed. Observation could be by remote camera, allowing children to languish in rooms for hours.
- For restraint only, NH requires attempted notification of parents within 1 calendar day or 24 hours; parents must receive a fuller written report later. NH has no parental notification requirements for seclusion.
- State collects restraint (not seclusion) data at least annually.

#### **NEW MEXICO**

- NM has nonbinding, suggested guidance memoranda. These guidelines are not statutes or regulations and do not mandate protections for children. They are easily changed, requiring neither a legislative or rulemaking process.
- NM's nonbinding guidance suggests that restraint be limited to threats of physical harm and property destruction. But, experts agree that because restraint/seclusion are so dangerous, they should only be allowed when activity threatens imminent physical danger—not for other activity that threatens no one. (See KS above.)
- NM's nonbinding guidance, but does not require, suggests a ban on restraint that interferes with breathing and/or prone restraint.
- NM's nonbinding guidance, but does not require, does not suggest limits on mechanical restraint, or chemical restraint.
- NM suggests restraint not be used unless less restrictive, less dangerous methods are ineffective. It cannot require this, however, because NM has only guidance. NM has no similar suggestion for seclusion.
- NM forbids locked seclusion under its fire code. NM permits doors to be blocked by furniture or equipment, and rooms children cannot exit for other reasons (e.g. placing a child who uses a wheelchair in a room and taking away his/her wheelchair). Using these kinds of seclusion rooms is allowed for any purpose, including behavior modification. This is inappropriate. Because of its dangers, seclusion should never be used for behavior modification, or any reason that that does threaten imminent harm to someone's physical safety.
- NM has no parental notification requirements or suggestions.

#### **NEVADA**

- NV has a statute with meaningful protections against restraint and seclusion for children with disabilities.
- NV allows restraint only when necessary to prevent imminent threats of physical harm or serious property destruction. But property destruction that does not threaten physical harm should not be a basis for restraint, given how very dangerous it is. See Kansas discussion above for more explanation.
- NV permits mechanical restraints upon physician order; it does not limit chemical restraint or restraints that impair breathing or threaten life.
- NV forbids all rooms from which children are physically prevented from exiting.
- Restraint must end when the emergency ends.
- In separate nonbinding guidelines, NV recommends that parents be notified of restraint within 1 calendar day or 24 hours.
- State collects data at least annually regarding use of these practices.

#### **NEW YORK**

- NY has regulations that provide some protections for all children and other protections only
  for children with disabilities. The protections are meaningful and apply to both restraint
  and seclusion.
- NY permits the use of restraint/seclusion to restrain a person when there is a threat of
  physical harm, property destruction, or educational disruption. This law applies to all
  children. But restraint and seclusion are so dangerous that they should be permitted only
  when activity threatens imminent physical danger—not for other activity that poses no such
  threat. (See Kansas for more information and explanation.)
- For students with disabilities, seclusion in a locked room or any room a child cannot open from the inside is forbidden. Staff must continuously and directly visually observe these children. There are no similar protections for children without disabilities.
- NY does not ban restraints that interfere with breathing or chemical restraints. NY had permitted mechanical restraints for a very limited group of students but this was phased out after the 2008-09 school year.
- For students with disabilities, less restrictive, less dangerous interventions must fail/ be
  ineffective before restraint or seclusion are used. On the other hand, NY allows
  restraint/seclusion for property destruction and educational disruption, even when no one
  is in danger. That makes this protection less effective.
- Parental notification is required for students with disabilities, but there is no time period set. It is far better for schools to take steps to inform parents on the same day or within 24 hours. This is the position of the majority of states with parental notification requirements. Prompt notification is vital so that parents can seek needed medical care (including for concussions and hidden internal injuries), seek treatment for trauma, care for their child,

and work with the school to use behavioral supports that prevent further use of restraint/seclusion.

#### OHIO

- OH adopted a regulation with meaningful protections for all children in April 2013. Previously, OH had a nonbinding policy (adopted Feb. 2013) and before that, it had an Executive Order that protected against certain forms of restraint.
- OH permits restraint and seclusion only in emergencies where their use is necessary to prevent an imminent threat of physical harm.
- OH bans restraint that obstructs breathing, and prone, mechanical, and chemical restraint.
- OH requires "constant supervision" of children in seclusion coupled with the ability to observe the student.
- OH forbids seclusion in locked rooms and rooms a child cannot exit if staff becomes incapacitated or leaves the area.
- Before restraint/seclusion are used, less restrictive, less dangerous interventions must fail/be ineffective. Seclusion must end when the emergency ends. There is no such legally required ending of restraint, allowing restraint to continue long after an emergency has ended.
- OH requires same day parental notification.
- State collects data annually.

#### **OKLAHOMA**

- OK has only nonbinding, suggested guidelines applicable to students with disabilities only. Such guidelines are not statutes/regulations and do not provide mandatory legal protections for children. They are also easily changed, requiring neither a legislative or rulemaking process. OK has no meaningful protection by law against restraint and seclusion.
- OK suggests, but does not require, limiting restraint and seclusion to emergencies where their use is necessary to prevent an imminent threat of physical harm.
- OK suggests, but does not require, banning restraint that interferes with breathing and/or prone restraint. OK suggests banning mechanical restraint and is silent about chemical restraint.
- OK suggests, but does not require, that before restraint/seclusion are used, less restrictive, less dangerous interventions should fail/be ineffective. It also suggests that restraint/seclusion should end when the emergency ends.
- OK suggests, but does not require, that staff continuously and directly watch children in seclusion.
- OK suggests, but does not require, same day parental notification of restraint/seclusion.

#### **OREGON**

- OR has a statute and regulation with meaningful protections from both restraint and seclusion for all children.
- OR permits restraint and seclusion only in emergencies where their use is necessary to prevent an imminent threat of serious physical harm. OR bans the use of free-standing seclusion cells or isolation booths.
- OR forbids restraints that interfere with breathing and mechanical and chemical restraint.
- Staff must continuously and directly observe children in seclusion.
- Restraint/Seclusion cannot be used unless less restrictive, less dangerous interventions have failed/would be ineffective. They must end when the emergency ends.
- OR requires same day notification of parents.
- State collects data at least annually regarding use of interventions.

#### **PENNSYLVANIA**

- PA has a regulation with meaningful protections from both restraint and seclusion for children with disabilities.
- PA permits restraint only in emergencies where its use is necessary to prevent an imminent threat of physical harm. PA forbids seclusion, meaning any room from which a child cannot readily exit (locked, blocked by furniture or equipment, held shut by teachers, etc.).
- PA forbids restraints that interfere with breathing and mechanical restraint. It has no limits on dangerous chemical restraints.
- Restraint cannot be used unless less restrictive, less dangerous interventions have failed/would be ineffective.
- PA requires parental notification but sets no deadline. An IEP meeting must occur within 10 days, effectively making this the outer deadline. The position of the majority of states with parental notification rules is to require 24 hour or 1 day notice. Such prompt notification is vital so that parents can seek needed medical care (including for concussions and hidden internal injuries), seek treatment for trauma, care for their child, and work with the school to use behavioral supports that prevent further use of restraint/seclusion.
- Data must be made available to the State when it monitors a school district. But data
  collection is not otherwise required or reported for other districts. Sunshine and reporting
  are important; they help ensure that schools use these dangerous techniques less, and keep
  the public informed.

#### **RHODE ISLAND**

- RI has a regulation with meaningful protections from both restraint and seclusion for all children.
- RI permits restraint only in emergencies where its use is necessary to prevent an imminent threat of serious/substantial physical harm.

- RI forbids restraint that interferes with breathing and chemical restraints.
- RI has no limit on mechanical restraints. But, mechanical restraints are dangerous and cause injury. Children may be strapped into devices or otherwise strapped or tied up and left there for long periods of time.
- RI bans seclusion unless the child is observed, and seclusion has been agreed to in the
  child's Behavioral Intervention Plan. RI does not regulate seclusion when the child is
  observed and seclusion is in the child's behavioral intervention plan. If these two rules are
  met, then the child can be secluded for any reason and for any period of time. There are no
  restrictions on adding seclusion to a child's IEP, and no limit on the reasons for which it can
  be added. Thus, children can be secluded when no one's safety is at risk. Adding seclusion
  to a Behavioral Intervention Plan is dangerous, for the reasons explained in the Connecticut
  section.
- Staff must continuously and directly visually observe children in seclusion.
- Restraint must end when the emergency ends. Restraint cannot be used unless less restrictive, less dangerous interventions have failed or would be ineffective.
- RI requires same day notification of parents, with a fuller written report later.
- State collects data at least annually regarding use of these practices.

#### **SOUTH CAROLINA**

- SC has only nonbinding, suggested guidelines applicable to students with disabilities only.
   While SC's guidelines are highly instructive, they are not statutes/regulations and do not provide mandatory legal protections for children. They are also easily changed, requiring neither a legislative or rulemaking process.
- SC's voluntary guidance suggests banning restraints that interfere with breathing and mechanical restraint. This is not a requirement. SC does not otherwise suggest limits on restraint, permitting it to be used for any reason and under any conditions.
- SC recommends, but does not require, that local school districts ban seclusion. If they do
  not, then SC recommends that other limits be used as stated below. These are simply
  suggestions and not requirements.
- SC recommends, but does not require, that seclusion be used only for emergencies that impose immediate threats of physical harm. SC recommends, but does not require, that the lock on a door to a seclusion room should automatically release.
- SC recommends, but does not require, that staff continually visually monitor children in seclusion. Children who are not watched constantly in seclusion rooms have been injured, have died, and have attempted suicide.
- SC recommends that less restrictive, less dangerous interventions must fail/be ineffective before using seclusion, and that it end when any emergency ends.

#### **SOUTH DAKOTA**

No statute, regulation, or even nonbinding guidelines.

#### **TENNESSEE**

- TN has a statute and regulation with meaningful protections from both restraint and seclusion for children with disabilities only.
- TN permits restraint and seclusion only in emergencies where their use is necessary to prevent an imminent threat of physical harm.
- TN forbids restraints that impede breathing. It forbids mechanical & chemical restraints.
- Staff must continuously and directly visually observe children in seclusion.
- TN does not require that less restrictive, less dangerous methods be used first or be considered ineffective, or that they end when the emergency ends. These are important limits. Without them, restraint/seclusion can be overused; used when positive supports should be used, and used for longer than necessary, increasing the risk of injury.
- TN requires schools to make a good faith effort to notify parents on the same day that the event occurs. Parents must receive a fuller written report later.
- State collects data at least annually regarding use of interventions.

#### **TEXAS**

- TX has a statute and regulation with meaningful protections from both restraint and seclusion for children with disabilities.
- TX permits restraint to prevent serious property damage or in emergencies where it is necessary to prevent an imminent threat of physical harm. Because of the dangers involved, restraint should only be used when there is an imminent threat of physical danger. See the Kansas section for more information.
- TX does not explicitly ban restraints that interfere with breathing. It does ban them implicitly by forbidding restraints that harm children or restraints that deprive the child of basic needs.
- TX does not explicitly ban mechanical or chemical restraint.
- Texas law forbids the use of locked spaces unless there is a threat of bodily harm and only while awaiting law enforcement. Texas permits time-out, which it defines as an unlocked room from which egress is permitted. Thus, Texas law appears to implicitly forbid unlocked rooms from which children cannot exit (e.g. furniture/equipment against door; staff holding door shut, childproofing, etc.) Still, the absence of an explicit prohibition may be viewed as a loophole that can be exploited to use such rooms.
- TX does not require that less restrictive, less dangerous methods be used first or be considered ineffective. This is an important limit. Without it, restraint/seclusion can be overused; and used when positive supports should be used instead, leading to greater potential for injury.

- TX requires that restraint end when the emergency ends.
- TX requires schools to make a good faith effort to notify parents on the same day that the event occurs. Parents must receive a fuller written report later.
- State collects data at least annually regarding use of practices.

#### <u>UTAH</u>

- UT has nonbinding, suggested guidelines applicable to students with disabilities only. Such
  nonbinding guidelines are not statutes/regulations and do not provide mandatory legal
  protections for children. They are also easily changed, requiring neither a legislative or
  rulemaking process. UT regulations require school districts to consider the suggested
  guidelines but explicitly state that they do not have to apply them. UT also has a short
  mandatory regulation regarding parental notice.
- UT's suggested, nonbinding guidelines suggest restricting restraint/seclusion to situations threatening imminent physical harm or serious property destruction. But UT does not require this.
- No suggested ban on restraints interfering with breathing, or on mechanical or chemical restraint. These are highly dangerous restraints.
- Recommends against using restraint/seclusion unless less restrictive, less dangerous interventions have failed/would be ineffective. But there is no mandatory requirement.
- Parents must be notified within 1 calendar day or 24 hours, per regulation.

#### **VIRGINIA**

- VA has only nonbinding, voluntary guidelines suggested for to students with disabilities only. Such nonbinding guidelines are not statutes/regulations and do not provide mandatory legal protections for children. They are also easily changed, requiring neither a legislative or rulemaking process.
- VA suggests restraint /seclusion be limited to imminent threat of physical harm, but does not require this, leaving schools free to use restraint/seclusion as they wish.
- VA does not suggest limits on restraints that interfere with breathing or prone restraint, mechanical restraint, or chemical restraint. These are highly dangerous restraints.
- VA does not require that children in seclusion be continuously visually monitored. Children who are not continuously watched in seclusion have been injured, died, and attempted suicide.
- VA does not suggest or require that less restrictive, less dangerous methods be used first or be considered ineffective, or that they end when the emergency ends. These are important limits. Without them, restraint/seclusion can be overused; used when positive supports should be used; and used for longer than necessary, increasing the risk of injury.
- VA suggests school districts determine a parental notification schedule, but does not require one. The position of the majority of states with parental notification rules is to

require 24 hour or 1 day notice. Such prompt notification is vital so that parents can seek needed medical care (including for concussions and hidden internal injuries), seek treatment for trauma, care for their child, and work with the school to use behavioral supports that prevent further use of restraint/seclusion.

#### **VERMONT**

- VT has a regulation with meaningful protections from both restraint and seclusion for all children.
- VT permits restraint and seclusion only in emergencies where their use is necessary to prevent an imminent threat of physical harm.
- VT forbids restraints that impede breathing. It forbids mechanical & chemical restraints.
- Staff must continuously and directly visually observe children in seclusion.
- Less restrictive, less dangerous methods must be used first or be considered ineffective.
   Restraint/seclusion must end when the emergency ends. These are important limits.
   Without them, restraint/seclusion can be overused; used when positive supports should be used, and used for longer than necessary, increasing the risk of injury.
- VT requires schools to make a good faith effort to notify parents on the same day that the event occurs. Parents must receive a fuller written report later.

#### **WASHINGTON**

- WA has regulations that provide some protections for all children and other protections only for children with disabilities. The protections are meaningful and apply to both restraint and seclusion.
- For children with disabilities, WA allows restraints for threats of physical harm, property
  destruction, or educational disruption. Seclusion is permitted for any reason. But, experts
  agree that because restraint is so dangerous, it should only be allowed when activity
  threatens imminent physical danger—not for other activity that threatens no one (such as
  destruction of property, educational disruption, discipline, or coercion). (See KS.)
- For all children, WA forbids restraint that interferes with breathing. Mechanical restraints
  are permitted for children without disabilities. For children with disabilities, all mechanical
  restraints are permitted except those that bind a child's limbs to an object or each other.
  Thus, locking chairs, or taping, tying, or strapping a child by the torso are not forbidden.
  WA does not forbid chemical restraints.
- A child may be secluded in a room or other enclosure if it is included in the child's IEP.
   Continuous visual monitoring is required unless the child can free himself/herself from the room, in which case the adult need only remain in visual or auditory range of the child.
- New statute adopted in May 2013 requires same day parental notification of restraint/seclusion, followed by written report within 5 business days, for children with disabilities. No parental notification requirement for nondisabled students.

- Less restrictive, less dangerous methods should be used first or be considered ineffective, before restraint and seclusion are used.
- Restraint and seclusion can continue after any emergency ends, even though no one is at risk. This can lead to overusing restraint/seclusion; and using restraint/seclusion for longer than necessary, increasing the risk of injury and harm.

#### **WISCONSIN**

- WI has a statute with meaningful protections from both restraint and seclusion for all children.
- WI permits restraint and seclusion only in emergencies where their use is necessary to prevent an imminent threat of physical harm.
- WI forbids restraints that impede breathing. It forbids mechanical & chemical restraints.
- Staff must continuously and directly visually observe children in seclusion.
- Less restrictive, less dangerous methods must be used first or be considered ineffective.
   Restraint/seclusion must end when the emergency ends. These are important limits.
   Without them, restraint/seclusion can be overused; used when positive supports should be used, and used for longer than necessary, increasing the risk of injury.
- WI requires schools to make a good faith effort to notify parents on the same day that the event occurs. Parents must receive a fuller written report later.
- Parents must be notified within one school day.

**WEST VIRGINIA** 

- WV has a regulation with meaningful protections from both restraint and seclusion for all children.
- WV permits physical restraint only for threats of physical harm or serious property destruction.
- WV bans restraint that interferes with breathing and prone restraint. WV forbids mechanical restraints; does not ban chemical restraints.
- Seclusion is prohibited; but it is defined only as removing child to unsupervised space. This
  is a large loophole, as it allows seclusion without any limits if the child is "supervised."
  Supervised could be staff down the hall or in the same general vicinity. There is no
  continuous visual monitoring provision. Moreover, even if staff is watching the child
  through a window or nearby, the statute allows seclusion for any reason at all, even if there
  is no risk of injury.
- Restraint must end when the emergency ends. There is no requirement to use less
  restrictive, less dangerous interventions before using either restraint or seclusion. These
  are important limits. Without them, restraint/seclusion can be overused; used when
  positive supports should be used, and used for longer than necessary, increasing the risk of
  injury.
- WV requires a "good faith" effort to verbally notify parents on the same day as the event. A written report must be mailed within 1 school day.

#### **WYOMING**

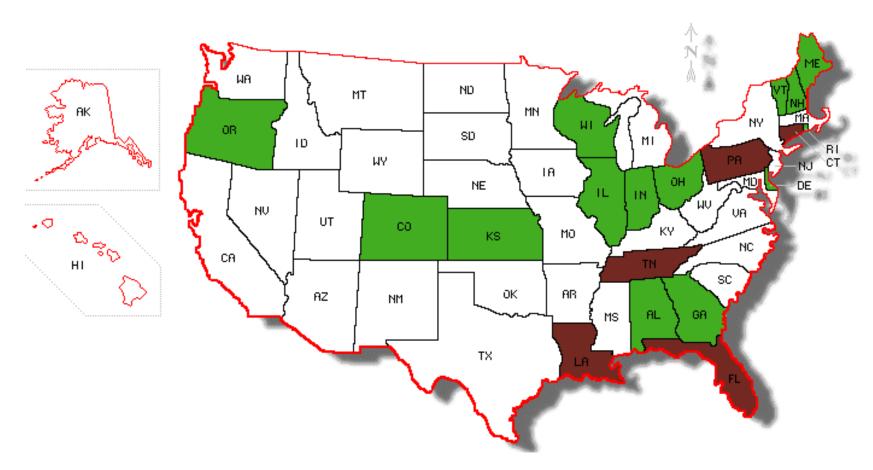
- WY has a regulation with meaningful protections from seclusion for all children.
- WY imposes no limit on physical restraint. It can be used for any reason.
- WY forbids restraint that interferes with breathing and prone restraint. WY forbids mechanical restraint but permits dangerous chemical restraint.
- WY bans locked seclusion. It permits seclusion in other rooms from which children cannot exit (e.g., door blocked by furniture/equipment or held shut by staff) only for emergencies posing an immediate threats of physical harm. This type of seclusion is called isolation in Wyoming to distinguish it from locked seclusion.)
- WY requires staff to be able to see/hear child at all times in isolation, but WY does not require that staff actually see/her child at all times.
- Parents must be notified of restraint/seclusion within 1 calendar day or 24 hours.
- State collects data at least annually regarding use of interventions.

### **MAPS**

- States Limiting Restraint to Emergencies Threatening Physical Danger
- States Either Banning Seclusion or Limiting it to Emergencies Threatening Physical Danger
- States Requiring Parents to Be Notified of Restraint/Seclusion Use

A more complete set of maps is available in <a href="How Safe">How Safe IS THE SCHOOLHOUSE? AN ANALYSIS OF STATE</a>
<a href="Seclusion and Restraint Laws and Policies">Seclusion and Restraint Laws and Policies</a>. There are also charts that summarize information for many different issues (states banning restraints that impede breathing, states banning mechanical restraint, etc.)

#### **States Limiting Restraint to Emergencies Threatening Physical Danger (Aug 2013)**



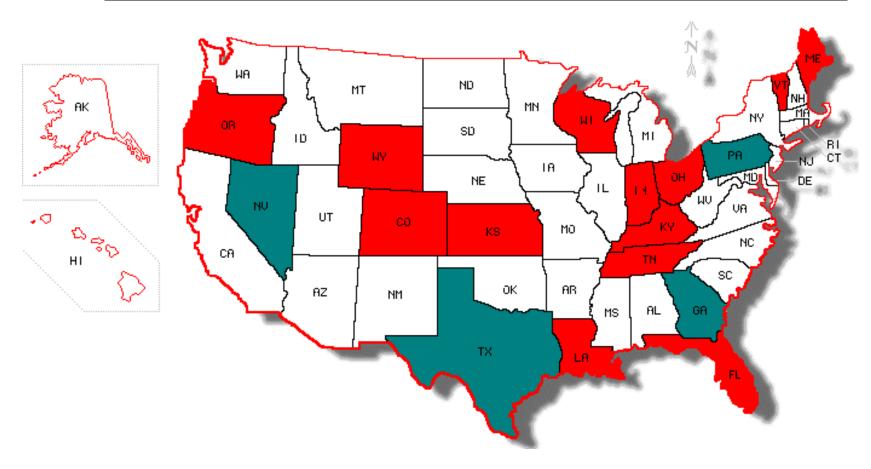
Green (medium): By law (statute/regulation), restraint limited to emergencies threatening physical danger for all children.

Brown (dark): By law (statute/regulation), restraint limited to emergencies threatening physical danger for children with disabilities.

White: State does not by law limit restraint to emergencies threatening physical danger.

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#### Seclusion: By Law, State Either Bans Seclusion or Limits to Emergencies Threatening Physical Danger (Aug. 2013)



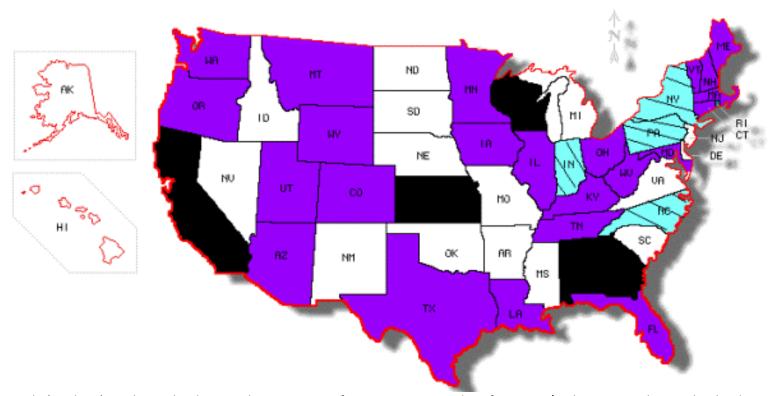
Red (darker): By law, state bans seclusion: all children (GA), children with disabilities (PA, NV, TX).

Green (lighter): By law, state restrictions seclusion to emergencies threatening physical danger. Laws in FL, LA, and TN are limited to children with disabilities; other states apply their laws to all children.

White: State lacks law either banning seclusion or limiting it to physical danger emergencies.

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#### Restraint/Seclusion: States Requiring Parental Notification (August 2013): Students with Disabilities



Purple (medium): By law, school must take steps to notify parents on same day of restraint/seclusion or within 1 calendar day. Many of these states also require a fuller written report to be mailed to parents within a few days.

Black (dark): School

Cyan (lightest, slashes): Law has other notification provisions. IN (as soon as possible), PA (within 10 days or by next IEP meeting), NY (no specific deadline), NC (only very limited number of things must be reported to parents, others need not be reported, and school gets 30 days to do so)

White: No laws regarding parental notification.

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