

**207**

**BEHAVIOR SUPPORT**  
BOARD ADOPTED MAY 15, 2017

**207 BEHAVIOR SUPPORT**

**A. PURPOSE**

1. Students with disabilities, including eligible young children who receive Early Intervention programs and services, shall be educated in the least restrictive environment and shall only be placed in settings other than the regular education class when the nature or severity of the student's disability is such that education in the regular education class with the use of appropriate supplementary aids and services cannot be achieved satisfactorily. The Individualized Education Program (IEP) team for a student with disabilities shall develop a positive behavior support plan if the student requires specific intervention to address behavior that interferes with learning. The identification, evaluation, and plan or program shall be conducted and implemented in accordance with state and federal laws and regulations, and in coordination with the student's school district of residence.

**B. AUTHORITY**

1. The Board directs that the Intermediate Unit's behavior support programs shall be based on positive rather than negative behavior techniques to ensure that students shall be free from demeaning treatment and unreasonable use of restraints or other aversive techniques. The use of restraints shall be considered a measure of last resort and shall only be used after other less restrictive measures, including de-escalation techniques. Behavior support programs and plans shall be based on a functional assessment of behavior and shall include a variety of research-based techniques to develop and maintain skills that will enhance students' opportunity for learning and self-fulfillment. The Intermediate Unit shall coordinate with the student's school district of residence in the development and implementation of a behavior support plan.

**C. DEFINITIONS**

1. The following terms shall have these meanings, unless the context clearly indicates otherwise.
  - a. Aversive Techniques - deliberate activities designed to establish a negative association with a specific behavior.
  - b. Behavior Support - development, change and maintenance of selected behaviors through the systematic application of behavior change techniques.
  - c. Behavior Support Plan or Behavior Intervention Plan - plan for students with disabilities who require specific intervention to address behavior that interferes with learning. A positive Behavior Support Plan shall be developed by the IEP team, be based on a functional behavioral assessment, and become part of the individual student's IEP. These plans must include methods that use positive reinforcements, other positive techniques and related services required to assist a student with a disability to benefit from special education.

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- 39 d. Positive Techniques - methods that utilize positive reinforcement to shape a student's  
40 behavior, ranging from the use of positive verbal statements as a reward for good behaviors  
41 to specific tangible rewards.
- 42 e. Restraints - application of physical force, with or without the use of any device, designed to  
43 restrain free movement of a student's body, excluding the following:
- 44 i. Briefly holding a student, without force, to calm or comfort him/her.
- 45 ii. Guiding a student to an appropriate activity.
- 46 iii. Holding a student's hand to escort him/her safely from one area to another.
- 47 iv. Hand-over-hand assistance with feeding or task completion.
- 48 v. Techniques prescribed by a qualified medical professional for reasons of safety or for  
49 therapeutic or medical treatment, as agreed to by the student's parents/guardians and  
50 specified in the IEP.
- 51 vi. Mechanical restraints governed by this policy, such as devices used for physical or  
52 occupational therapy, seatbelts in wheelchairs or on toilets used for balance and safety,  
53 safety harnesses in buses, and functional positioning devices.
- 54 f. Seclusion - confinement of a student in a room, with or without staff supervision, in order to  
55 provide a safe environment to allow the student to regain self-control.
- 56 g. Students with Disabilities - school-aged children who have been evaluated and found to have  
57 one or more disabilities as defined by law, and who require, because of such disabilities,  
58 special education and related services.

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### 60 **D. DELEGATION OF RESPONSIBILITY**

- 61 1. The Director of Special Programs & Services or designee shall ensure this policy is implemented  
62 in accordance with federal and state law and regulations and shall develop administrative  
63 regulations.
- 64 2. The Director of Special Programs & Services or designee shall provide regular training, and  
65 retraining as needed, of staff in the use of specific procedures, methods and techniques, including  
66 restraints and seclusions, that will be used to implement positive behavior supports or  
67 interventions in accordance with students' IEPs and Board policy.
- 68 3. The Special Education Supervisor or designee shall maintain and report data on the use of  
69 restraints to the student's school district of residence, as required.

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74 **E. GUIDELINES**

- 75 1. The Intermediate Unit shall assist member school districts with development of behavior support  
76 programs and training of staff in appropriate techniques, at the request of the participating school  
77 district.
- 78 2. Development of a separate Behavior Support Plan is not required when appropriate positive  
79 behavioral interventions, strategies and supports can be incorporated into a student's IEP.
- 80 3. When an intervention is necessary to address inappropriate behavior, the types of intervention  
81 chosen for a student shall be the least intrusive necessary.

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83 **F. PHYSICAL RESTRAINTS**

- 84 1. Restraints to control acute or episodic aggressive behavior may be used only when the student is  
85 acting in a manner that presents a clear and present danger to the student, other students or  
86 employees, and only when less restrictive measures and techniques have proven to be or are less  
87 effective.
- 88 2. The Special Education Supervisor of the program or designee shall notify the parent/guardian and  
89 school district of residence as soon as practicable of the use of restraints to control the aggressive  
90 behavior of the student and shall convene a meeting of the IEP team within ten (10) school days  
91 of the use of restraints, unless the parent/guardian, after written notice, agrees in writing to waive  
92 the meeting. At this meeting, the IEP team shall consider whether the student needs a functional  
93 behavioral assessment, re-evaluation, a new or revised positive Behavior Support Plan, or a  
94 change of placement to address the inappropriate behavior.
- 95 3. The use of restraints shall not be included in the IEP for the convenience of staff, as a substitute  
96 for an educational program, or employed as punishment.
- 97 4. Restraints may be included in an IEP only if:
- 98 a. The restraint is used with specific component elements of a positive Behavior Support Plan.
- 99 b. The restraint is used in conjunction with teaching socially appropriate alternative skills or  
100 behaviors.
- 101 c. Staff is authorized to use the procedure and have received appropriate training.
- 102 d. Behavior Support Plan includes efforts to eliminate the use of restraints.
- 103 5. The inclusion of restraints in an IEP, developed in accordance with the law and issued to the  
104 Parent with Prior Written Notice (PWN), shall be the means by which parental consent is  
105 obtained for the use of such restraints.

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109 **G. MECHANICAL RESTRAINTS**

- 110 1. Mechanical restraints, which are used to control involuntary movement or lack of muscular  
111 control of students when due to organic causes or conditions, may be employed only when  
112 specified by an IEP and as determined by a medical professional qualified to make the  
113 determination, and as agreed to by the student's parents/guardians.
- 114 2. Mechanical restraints shall prevent a student from injuring him/herself or others or promote  
115 normative body positioning and physical functioning.

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117 **H. SECLUSION**

- 118 1. The Intermediate Unit permits involuntary seclusion of a student in accordance with the student's  
119 IEP or in an emergency to prevent immediate or imminent injury to the student or others, but the  
120 seclusion must be the least restrictive alternative.
- 121 2. The Intermediate Unit prohibits the seclusion of students in locked rooms, locked boxes and other  
122 structures or spaces from which the student cannot readily exit.

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124 **I. AVERSIVE TECHNIQUES**

- 125 1. The following aversive techniques of handling behavior are considered inappropriate and shall  
126 not be used in educational programs:
- 127 a. Corporal punishment.
- 128 b. Punishment for a manifestation of a student's disability.
- 129 c. Locked rooms, locked boxes, other locked structures or spaces from which the student cannot  
130 readily exit.
- 131 d. Noxious substances.
- 132 e. Deprivation of basic human rights, such as withholding meals, water or fresh air.
- 133 f. Suspensions constituting a pattern as defined in state regulations.
- 134 g. Treatment of a demeaning nature.
- 135 h. Electric shock.
- 136 i. Methods implemented by untrained personnel.
- 137 j. Prone restraints, which are restraints by which a student is held face down on the floor.

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142 **J. REFERRAL TO LAW ENFORCEMENT**

- 143 1. Subsequent to notification to law enforcement, an updated Functional Behavioral Assessment and  
144 Behavior Support Plan shall be required for students with disabilities who have Behavior Support  
145 Plans at the time of such referral.
- 146 2. If, as a result of such referral, the student is detained or otherwise placed in a residential setting  
147 located outside the student's school district of residence, the Special Education Supervisor of the  
148 program or designee shall coordinate with the student's school district of residence to ensure that  
149 the responsible school district is informed of the need to update the student's functional  
150 behavioral assessment and Behavior Support Plan.