

Behavior Management & Restraint

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Department: All	Revision Date: 04/2004, 07/2005,
References: 18 NYCRR 441.9; 441.17 (a-k); NYCRR 8 200.7(b)(8);	08/2006, 09/2008, 10/2010,
200.22(c)(1)); 200.15(h)(1); 200.22(d)(2)-(4); Voluntary Agency	02/2011, 02/2012, 12/2015, 02/17,
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POLICY:

Mountain Lake Academy promotes environments that reduce the risk of harm to youth and staff. This policy will identify specific training requirements, safety precautions, and procedures regarding the use of physical restraints and/or physical intervention techniques.

PROCEDURE:

Mountain Lake Academy (MLA) will offer a concise and consistent behavior management program to all students. All staff members will be trained to encourage the students to make healthy and positive choices. Each staff member will be trained to employ the least invasive and restrictive methods of intervening through the Therapeutic Crisis Intervention Program. In keeping with Positive Behavioral Interventions and Supports (PBIS), Mountain Lake Academy's Phase System creates opportunities for increased privileges and freedoms to support and encourage healthy decision-making and contribute to a safe environment. Staff will create and maintain appropriate relationships with the students to support positive youth development.

Mountain Lake Academy will create an environment that supports student development. Positive development will focus on student strengths to foster success and competencies to cultivate contributing adults. The primary tools for staff in the prevention of crisis are building positive, supportive relationships with students and using proactive, non-physical supervision of youth. By thoughtful positioning and awareness, students will feel supported. All staff will adequately prepare for their shifts by reading logs, ICSP's, and reports relevant to individual students.

PRACTICE:

- A. Behavior Management System(s):
- Mountain Lake Academy's MountainView Program uses a phase system (five phases, approximately 8 weeks each) to motivate the student to make positive and healthy choices, improve behavioral and social functioning, attain goals and acquire additional privileges with each phase advancement. Behavior, interactions with others, participation in groups, attaining goals and phase advancement are subsequent evidence of progress. The Residential Team meets on a regular basis to monitor each student's progress. Life Space Interviews are used to assist the student in evaluating the quality of his choices and to develop strategies to effectively meet their needs.

- Mountain Lake Academy's BrookView Program also incorporates a phase system and provide
 opportunities to form a positive relationship with staff to develop skills necessary for healthy decisionmaking. While a commitment to behavioral change is essential at the onset, the ultimate goal is to
 assist the youth to generalize their ability to form a trusting relationship to other adults in their life. Life
 Space Interviews are used to assist the student in evaluating the quality of his choices and to develop
 alternative strategies.
- B. Leadership and Administration are dedicated to the effective implementation of the TCI crisis management program, as is evidenced by the following components integral to its implementation and maintenance:
 - The leadership of Mountain Lake Academy has provided, in writing, a Policy and Procedure manual that outlines guidelines for crisis management and physical interventions. These manuals are available in hard copy and electronically.
 - Mountain Lake Academy has a critical incident review process that is compliant with the
 Justice Center requirements for Incident Review Committee. This will include reviewing
 restraints, trends, and recommendations for prevention. The committee will meet monthly
 but no less than quarterly.
- C. Staff who may be called upon to implement a physical intervention will be provided with appropriate training in safe and effective restraint procedures in accordance with the following.
 - Guidelines and programs for in-service education programs for all staff members to ensure effective implementation of school policy on school conduct and discipline
 - Increase staff awareness, encourage positive attitudes and enhance knowledge and skill development in areas including, but not limited to, the following
 - o Child abuse prevention and identification
 - Safety and security procedures
 - o Principles of child development
 - Characteristics of children in care
 - Proactive supervision
 - o Techniques of group and child management
 - Laws, regulations and procedures, including appropriate reporting responsibilities, governing the protection of students from reportable incidents
- D. Training and Documentation:
 - Staff members are trained in the use of Therapeutic Crisis Intervention (TCI) through the Cornell University's Residential Childcare Project/Family Life Development Center/College of Human Ecology.
 - All Mountain Lake Academy staff members who are properly trained and certified in the use of TCI will apply the following methods regarding the rules, which must be observed in initiating and documenting physical restraints and/or physical intervention techniques:

- Training in TCI physical restraint techniques and methods are delivered by TCI certified instructors.
- Only staff trained in the physical restraint techniques and cleared through the Child Abuse Central Registry as approved by the regional office, Staff Exclusion List (SEL), and criminal background check, may conduct physical interventions.
- Guidelines and programs for in-service education programs for all staff members to ensure effective implementation of school policy on school conduct and discipline
- E. Staff trained in crisis intervention, other than TCI Certified Trainers, will receive a minimum of 28 hours of TCI training. Staff also receives 6 hours every six months thereafter. During these refreshers, staff practice and receive corrective feedback of the main skills (i.e. LSI, behavior management skills, and physical restraint techniques). Staff members are trained and tested by a certified TCI trainer in the core skill areas. A level of competency (i.e. written test) of each staff person is documented and maintained in their personnel file. All staff members who are trained in TCI are required to demonstrate competency before using crisis management skills with young people in crisis. Staff will be provided an opportunity to practice these techniques against resistance. Only those staff members who have successfully completed the regionally approved crisis management and physical restraint training may conduct physical restraints. Mountain Lake will ensure that an appropriate number of staff is trained in TCI. The job titles associated with this requirement will be those with most frequent contact with the students. Mountain Lake Academy may modify this list at any time based on the needs of the population served. All Mountain Lake Academy staff with substantial contact with students must be trained and certified in TCI at the time of orientation. Based on the needs of the program, positions such as Administrative Assistant and those in Maintenance may be exempt from TCI update requirements.
- F. TCI certified instructors will satisfy their training requirements when they facilitate one 6-hour update session within one year following their certification or annual recertification as a TCI instructor through Cornell University. TCI certified instructors will be assessed by other TCI certified instructors to evaluate competency in performing restraints if said instructors are responsible for providing support to students in programming.
- G. As taught through the Residential Childcare Project/Family Life Development Center/College of Human Ecology Cornell University/Therapeutic Crisis Intervention Program (TCI), a <u>physical restraint</u> is the use of trained and competent staff members to contain acute physical behavior. Staff may only use the following TCI approved restraints* during physical interventions** (see attached pictorials and descriptions from Cornell University's *TCI Trainer Manual*):
 - **Supine Restraint:** An intervention designed for average sized adolescents (as opposed to smaller or younger children). The student is secured in the face-up or supine position.
 - Small Child Restraint and Seated Restraint: An intervention that may be considered when the student is physically smaller and shorter than the adults conducting the restraint. Most useful when the staff determine that it is in the best interest of the student to not be placed in a supine position.
 - **Standing Restraint**: A restraint implemented by two staff persons designed for a short period of time in a standing position. Each staff member will hold one arm as taught by TCI.

- H. Mountain Lake Academy Staff will also be trained in TCI approved protective interventions during their TCI training, including:
 - Breaking up a fight technique
 - Deflecting a swing technique
 - Releases Techniques (grabs- 1 arm, grabs-2 arms, grabs-1 arm with two hands, bites, hair pulls, chokes-front, chokes-rear, choke bar arm.)
- I. Mountain Lake Academy prohibits the use of all aversive interventions under any circumstances and will result in disciplinary and/or corrective action as determined by the agency. This will include, but not limited to the following:
 - Room Isolation
 - Corporal Punishment
 - Solitary Confinement
 - Deprivation of meals or scheduled snacks as punishment
 - Pharmacological restraint
 - Mechanical Restraint
 - Electro convulsive therapy
 - Procedures that elicit fear
 - Implementation of the behavior management plan by other than trained, qualified staff
 - Interventions will never be delegated to the students
 - Use of a Time Out Room
 - Use of excessive force
 - Purposefully inflict pain, or fear, or harm
- J. Mountain Lake Academy acknowledges that any physical restraint and/or physical intervention technique involves an inherent risk of injury to the youth and staff, and is to be employed only when its use is determined to be less dangerous than the acute physical behavior it is designed to control. Acute physical behavior includes an intent to inflict physical injury upon oneself or others, or to otherwise jeopardize the safety of any person. It is expected that Mountain Lake staff will weigh the inherent risk of injury against the risk in failing to physically intervene.
- K. Physical restraints and/or physical intervention techniques will not be used when:
 - Staff cannot safely control the student due to the student's size
 - Environmental factors would render the physical intervention unsafe
 - The staff member's negative emotional state adversely affects their judgment
 - A student has a weapon and poses a danger to staff
- L. The use of a physical restraint and/or physical intervention technique is warranted when:
 - A student is causing physical harm to self or others or is displaying acute physical behavior that clearly indicates a risk to cause physical harm to self or others or to otherwise jeopardize the safety of any person,

- A youth is physically attempting to leave the boundary of a residence and the potential decision clearly indicates the intent to inflict physical injury to the youth or others or to otherwise jeopardize the safety of any person
- M. At no time will a restraint be used to purposely inflict harm, used as punishment, used for the convenience of staff, enforce compliance, or as a substitute for systematic behavioral interventions that are designed to change, replace, modify, or eliminate a targeted behavior.
- N. Physical restraints and/or physical intervention techniques will only be used in accordance with staff's knowledge of special considerations regarding the youth's health and history.
 - Physical intervention will only be used when other forms of intervention are either inappropriate or have been tried and proven unsuccessful.
 - A physical intervention will be employed for the minimum amount of time necessary, using the least amount of force necessary, and the least risk of injury to maintain safety.
- O. Physical restraints and/or physical intervention techniques will be considered only after less intrusive approaches (appropriate, non-physical behavior management techniques) have been attempted unsuccessfully to manage escalating acute behaviors or when there is no time to try such alternatives. Whenever possible and appropriate, staff members are expected to use trauma informed intervention techniques that rely upon effective communication and successful problem-solving to reduce conflict, avoid power struggles and manage crises. The following intervention are clearly specified in the approved TCI curriculum developed by Cornell University and are proactive non-physical means to address maladaptive behaviors:
 - Crisis Communication and Active Listening
 - Non-verbal techniques
 - Reflective and empathic responses
 - Managing the environment to include Proactive Supervision
 - Prompting
 - Caring Gestures
 - Hurdle Help
 - Redirection and distractions
 - Proximity
 - Directive Statements
 - Time away
 - Emotional First Aid
 - Crisis Co-Regulation
- P. An **Individual Crisis Support Plans (ICSP)** is developed for each student enrolled in the program. This document is a learning and educational tool that identifies preferred de-escalation strategies and interventions that may be successful in supporting the student. All ICSP's contain the following information:
 - Limitations on the use of various interventions in response to Medical and Mental Health assessments
 - Suggestions and ideas provided by the student and his family regarding the best way to support successful outcomes. The students will be involved in developing the ICSP with

- their Treatment Coordinator during the initial intake process. The Treatment Coordinator will discuss in detail how the ICSP is used by both staff and student.
- Specific triggers and related stressors to include patterns of behavior and the student's response to specific interventions.
- Recommendations regarding strategies for intervention
- Modifications and/or restrictions to an approved intervention technique. This plan will
 include medical conditions or mental health conditions that would be exacerbated if the
 student were to be involved in a physical intervention.

ICSPs will be reviewed and updated after each restraint or whenever necessary (i.e. change in medical or mental health conditions) and made available to the professional community. Staff will be notified of updates to ICSPs through meeting minutes or other notifications. Hard copies of the ICSP are located in assigned staff offices.

Q. Safety precautions:

- Reducing risk. A physical restraint must be immediately stopped and/or medical assistance immediately obtained if any of the following conditions are present
 - Medical emergencies. Staff must immediately contact medical personnel and/or initiate CPR if necessary.
 - Youth requests medical attention
 - Absence of breathing, labored breathing, or complaints of an inability to breathe.
 - Vomiting
 - Inability to speak
 - Visible injury or complaint of an injury
 - Incontinence
 - Loss of consciousness or going limp
 - Altered consciousness or complaint of altered consciousness
 - Change in Skin color
 - Excessive sweating
 - A request for medical attention
 - Head banging, collision with an object (i.e. wall, furniture, etc.), falling or other potentially injurious behavior before, during or after restraint
 - Exhibited behavior suggesting the need for a mental health evaluation and/or treatment
- The following warning signs will be monitored continuously by the staff supervising the restraint:
 - Skin Color
 - Breathing
 - Level of consciousness
 - Level of agitation
 - Range of motion in the extremities

- R. All Students will receive a health review by medical personnel, or otherwise trained personnel (i.e. WFR, AFA, EMT, etc.) within one hour of the conclusion of the restraint or physical Intervention.
 - If First Aid is needed it will be immediately administered by trained staff
 - If circumstances prevent a student being evaluated by medical personnel, the specific circumstances will be documented in the medical review of the Incident Report. Medical personnel will be informed of the event and schedule to meet with the student for a health review no later than the following day.
 - Staff accompanying a student for a health review must be a staff who was <u>not</u> involved in the physical restraint. Witnesses to the physical restraint should not accompany a student unless no other staff is available.
 - The health review will occur in the medical office to ensure access to supplies and confidentiality. The report of the review will be kept in the student's medical record
 - Note: The health staff on duty may attend to injuries on the unit and may observe a youth who refuses to go to the clinic on the unit for obvious injuries, but that will not be considered the post-physical restraint health review as it does not provide for a confidential interview
 - Note: Privacy must be provided to the youth and health staff so a confidential interview may occur
 - If a student refuses a health review following a restraint, the staff and student must complete a medical refusal form.
 - The following questions must be asked by the health care professional in complete privacy to ensure confidentiality:
 - o What happened?
 - o Do you have any injuries or pain?
 - O How did you get the injury?
 - If it appears the youth has sustained and injury requiring professional medical attention, staff trained in health care will examine the student. If a student reports an injury, health care staff must inquire about the source an injury. Photos of any injury will be taken and maintained.
 - If the health care professional observes injuries that appear to be inconsistent with the reported incident; learns that the restraint was not authorized; or suspects inappropriate staff conduct, the following steps will be followed:
 - o Injuries will be photographed using the agency's digital camera
 - O Photographs will be taken by medical staff when they are on duty.
 - Two full body photos (one front and one back) of student fully clothed
 - Two photographs of each view of a youth's injury or purported injury.
 - All photographs will clearly show the actual injuries or purported injury

- Photos will be labelled with
 - date and time of incident
 - date, time, and location of the photographs
 - The name of the youth photographed
 - The name, title, and signature of person taking the photographs
- A ruler or object for measurement, will be placed close to the site of the injury
- Two copies of each photograph will be printed
- Each photograph will have the youth's signature
- One set of photographs will be attached to the post-restraint medical exam form in the physical restraint packet, and a second set will be filed in the student's medical record.
- The Residential Director or person in charge will be notified
- o A report to the VPCR will be submitted in accordance with reporting guidelines.
- S. Processing of a physical restraint and/or use of physical intervention technique with the student, through a Life Space Interview, will occur as soon as the conditions permit. Factors to consider include the students readiness, staff and student availability (emotional and physical), and recommended supports that are available.
 - Following each physical restraint and/or physical intervention, staff uninvolved with the restraint (unit manager or higher or licensed mental health professional) will debrief and offer support to youth using the student debrief format. The purpose is to review section "P," outlined above.
 - After each physical restraints and/or physical intervention, staff involved will debrief the
 incident with a trained department head, supervisor, or designee, and will review the role of
 trauma informed care and cultural competency. In addition to exploring crisis preventions
 strategies for future use with this youth, debriefing also allows the staff to express their
 thoughts regarding the intervention. This information will be documented on a staff
 debrief form.
 - All physical restraints and/or physical intervention techniques are documented via incident reports. The incident report will include a description of the incident explaining the reason the restraint was deemed necessary, de-escalation and less intrusive interventions that were used, as well as the student's reaction to the restraint as per regulation. Incident reports will also include
 - The name and date of birth of the student
 - The setting and location of the incident
 - The name of the staff or other persons involved
 - The intervention used to include duration
 - O A statement as to whether the student has a behavioral intervention plan
 - Details of injuries sustained by the student or others, including staff
 - o Contact and notification will occur the same day and include:

- The parent guardian or individual legally responsible for the of student
- Attorney for the child
- Authorized agency with legal custody of the youth, if different
- VPCR as applicable
- Person in charge immediately after the situation is under control
- Department head, supervisor, or designee trained in TCI will conduct all debriefs to include interviewing the youth by an uninvolved staff and interviewing staff involved in the restraint.
- Staff that witnessed or involved with the physical restraint will complete a report independently and without collaborating with other staff
- O Documentation of a restraint will be completed within 72 hours
- Events leading up to the situation
- Justification for use of physical restraint
- Restraint technique(s) used
- When assistance was contacted and who responded
- Use of de-escalation techniques used and youth's response
- Injuries or complaint of injury
- Staff and youth witnesses
- Youth's behaviors during restraint
- o Preservation of video surveillance footage where video is present/available
- All restraints will be documented in the system of record (i.e.
 Connections) and will include a summary of the incident and the reason the restraint was determined to be necessary.
- All documentation of physical interventions will be reviewed by supervisory personnel and, as necessary, the school nurse or other medical personnel. For additional information see agency policy and procedures on "Incident Reporting."
- Daily records of the number of students involved in physical interventions including the name, age and type of restraint used with each student will be maintained using incident reports as per regulation. This information is tracked using the ARTS database.
- T. Addendums for Incident Reports will include
 - Restraint Monitor Report if applicable
 - Review Witness Reports
 - o Administrative Review by Program manager, Director, or Officer.
 - administrator reviewer not involved in the restraint conducted within 24 hours of the incident
 - Complete the agency administrative review form
 - provide a written recommendation to the director or designee regarding whether further action is recommended
 - Director of facility review or designee within 2 business days after the physical restraint
 - Preserve and document an administrative review of the video surveillance footage

- Determine follow up action when unauthorized use of physical restraint and/or untrained techniques were used
- To confirm whether allegations of abuse or neglect were reported to the VPCR, if applicable
- Implement a safety plan when staff misconduct has been identified
- o Medical Review
- Student Debrief
- Staff Debrief
- Review and copy of Student's individualized crisis support plan.
 - ***Note: if a "Restraint Packet," is requested by the Office of Children and Family Services, it will refer to information in section "S" and "T" above.
- U. Restraint Reduction will be reviewed during Mountain Lake Academy's Incident Review Committee as the following information is documented in meeting minutes on a monthly basis:
 - Incident and restraint data
 - Systemic factors that may have had impact on the incidents
 - Recommendations for reduction
- V. No changes or modifications in Mountain Lake Policies on restraint shall be made without prior written approval of the department. All approved changes will be recorded in the agency's policy manual. Mountain Lake will conduct its program of restraint in accordance with its approved policy.