

# Physical Management Training, Seclusion, and Protective Hold Manual



2022-2023

Department of Pupil Personnel Services

*Revised October 24, 2022*

## Physical Management Training (PMT), Seclusion and Protective Holds (Physical Restraint)

### Checklist

- ☐ Every parent must be advised of the possibility that the *emergency* use of physical restraint and seclusion may be used as an *emergency* behavior intervention at the initial Planning and Placement Team meeting (PPT) held for their child and subsequent annual reviews. This notification *must* be documented on the IEP.
- ☐ At the building level, the building fills out the google form:  
  
<https://docs.google.com/forms/d/e/1FAIpQLSfgRaMly9RZhr0QXx6WdVVy1LjoxejmAv7OPaLv8QwMI9KFfg/viewform>
  - Building administration is responsible for contacting the parent/guardian day of the incident
  - Central office will send out a hard copy of the incident with a cover letter and send out a hard copy of the incident to the building
  - The building administrator can access all Restraint/Seclusion documents for any of their students by signing into CTSEDs
- ☐ All schools within the Manchester Public Schools must keep all records of Incident Reports of Seclusion and Protective Holds. The incident report must be placed into the student's confidential file. If the student is not Special Education or 504, the report can go into the cumulative file.
- ☐ If you would like to still keep a binder of these reports on an annual basis, you can do so but this is optional.
- ☐ *All* incident reports are entered within *24 hours* of the incident taking place.
- ☐ *Within 24 hours* of the incident taking place, building administrators are responsible for notifying parents/guardians of protective holds or seclusion procedures via a telephone call.
- ☐ Building administrators are responsible for notifying their PMT trained staff of this manual.
- ☐ Building administrators are responsible for distributing copies and reviewing the PMT, Seclusion and Protective Holds (Physical Restraint) Quick Reference/Important Information with their staff annually.
- ☐ PMT trained staff are responsible for maintaining their PMT certification and making arrangements to attend an annual refresher course. Contact Fiona Golemba, for upcoming PMT training schedule and/or training questions at: 860-647-3473 or [b51fgolem@mpspride.org](mailto:b51fgolem@mpspride.org).

## **PMT, Seclusion and Protective Holds (Physical Restraint) Quick Reference/Important Information**

### **What is PMT?**

PMT is a method to deescalate an agitated or aggressive student; while keeping both the individual and the school environment safe.

### **The Goals of PMT:**

- To increase understanding about aspects of the crisis intervention process
- To increase the range of response options available to individual staff and teams
- To develop skills for analyzing one's own style of managing conflict
- To help staff manage their fear response in a crisis situation

### **The Objectives of the PMT Program:**

- To assist staff in preventing injury to students and themselves, while managing the physically aggressive person
- To increase staff self-confidence when facing the angry/violent individual
- To increase student confidence and security in staff member's ability to manage crisis situations
- To increase staff awareness and knowledge of psychological factors during crisis and to develop strategies for identifying and preventing violent outbreaks

### **What is a Physical Restraint (Protective Hold)?**

A physical restraint (protective hold) is a personal restriction that immobilizes or reduces the free movement of one's arms, legs, or head. It does **not** include:

- Briefly holding a person in order to calm or comfort the person
- Restraint involving the minimum contact necessary to safely escort the person from one area to another
- Medical devices/supports, including, but not limited to, supports prescribed by a health care provider to achieve proper body position or balance
- Helmets or other protective gear used to protect you from injuries due to a fall
- Helmets, mitts, and similar devices used to prevent self-injury when the device is part of a documented treatment plan or IEP and is considered the least restrictive means available to prevent self-injury

***\*\*No Manchester Public Schools employee may use physical restraint (protective hold) on a student if they have not passed the PMT training course and maintained the necessary PMT recertification requirements. Any staff member using physical restraint that is not trained or certified in PMT may be subject to disciplinary action.***

### **What is Seclusion?**

Seclusion is the confinement of a person in a room, whether alone or with supervision, in a manner that prevents the person from leaving the room. In a public school, seclusion does not mean any confinement of a child where the child is physically able to leave the area of confinement; including in-school suspension and time-out. Students should always be under a staff member's supervision and monitored when in seclusion. *Students should never be left alone in seclusion. Seclusion is to be used only in an emergency. It cannot be part of a behavior intervention plan or noted in an IEP.*

### **What Physical Restraints and Seclusions are prohibited?**

- No one may use a “life threatening physical restraint.” A “life threatening physical restraint” is any physical restraint or hold that restricts the air flow into your lungs whether by chest compression or any other means.
- No PMT holds/techniques should ever be used on, up, or down stairs.
- No one may use involuntary physical restraint or seclusion on a student except: as an emergency intervention to prevent immediate or imminent injury to you or others or as long as the seclusion is not used for discipline, convenience or as a substitute for a less restrictive alternative.
- Objects such as dividers, mats, etc. that obstruct staff members’ view of a student or completely barricade a student in seclusion should not be used. Under some circumstances however, behavioral intervention plans may approve certain objects such as dividers to be used to decrease stimulation and/or peer/staff attention.

### **What should be written on the report?**

Schools are required to maintain documentation of use of physical restraint or seclusion. It should include:

- A description of the emergency
- The nature of the emergency
- Other steps (including attempts at verbal de-escalation) taken to prevent the emergency from arising
- A description of the restraint or seclusion, and its duration; and, its effects on one’s medical, behavioral or educational plan

### **Where should these records be maintained?**

- All Incident Reports of Seclusion and Protective Holds should be kept in the student’s confidential file. Schools have the option of also keeping copies in a binder in their building.
- The PMT Reference and Documentation Notebook should be kept in a confidential place, such as in a building administrator’s office or with an administrative designee.

### **How long should Incident Reports of Seclusion and Protective Holds be kept?**

- These records should be kept in the manual notebook in each school for one academic school year and be destroyed at the end of each academic year.

**Who should be notified of an Incident of Seclusion or Protective Hold (Physical Restraint)?**

- A building administrator or administrative designee should be advised of all Incident Reports of Seclusion and/or Protective Hold.
- A building administrator and school nurse should be immediately contacted for any Protective Hold (Physical Restraint) that exceeds 10 minutes. Additionally, one of the following should be notified: School Psychologist, School Social Worker, or BCBA to assess if a 211 (or 911) notification is warranted.
- For any seclusion process that exceeds 15 minutes, the building administrator should be immediately contacted to determine if continued use is necessary as an emergency intervention. Additionally, one of the following should be notified: School Psychologist, School Social Worker, or BCBA to assess if this emergency intervention should continue. After an additional 30 minutes assessment should be made to determine if a 211 notification is warranted.
- Parents should be notified by both a telephone call made home by a building administrator if their child required a protective hold and/or seclusion procedure.
- A school nurse should see all students after they have been placed in a Protective Hold/Physical Restraint; even if no injuries were noted and/or if any injuries or physical complaints occurred while in seclusion.
- Students requiring a Hold/Restraint that exceeds 10 minutes and/or are unable to calm down on their own and/or continue to pose a safety concern must be assessed by appropriate school staff and evaluated if further assistance is needed. This includes, but is not limited to, contacting 911, Emergency Mobile Services and/or the police etc. (Holds should not exceed 10 minutes).

**Other important information:**

- If a student is being physically restrained (protective hold) they must be continually monitored by staff.
- If a student is placed in involuntary seclusion they must be monitored by staff.
- Each building must have a formal crisis intervention team. This team must respond to incidents in which the use of physical restraint or seclusion may be necessary as an emergency intervention to prevent immediate or imminent injury to a student or others.

- In both situations, students must be regularly evaluated by staff for signs of physical distress. Each evaluation must be entered into your record.
- If emergency restraint or seclusion is utilized on a student 4 or more times within 20 school days a meeting must be convened with the administrator, teacher, parent, and school psychologist/school social worker. At this meeting, “Child Find” considerations should be discussed.
- If a student receives special education and/or related services, a PPT must be convened if this emergency intervention occurs 4 or more times within 20 school days.
- If a student is in the referral process for consideration of special education and or related services, a PPT must be convened if this emergency intervention occurs 4 or more times within 20 school days.
- The seclusion room must have a window or other fixture allowing the student a “clear line of sight beyond the area of seclusion.

#### Debriefing:

Within 24 Hours of incident

Staff involved, led by Administrator:

1. Did anyone get hurt?
2. Was the action necessary? Was there imminent danger to self or others?
  - a. Did we use all of our resources to avoid going hands on?
  - b. Did we give the student enough time/space to de-escalate?
  - c. Did we have staff who have relationships with the upset person in the situation as it escalated? Did that help? Could it have?
3. Did we follow all PMT protocols?
4. What can we do to be preventative for the student?

#### Who can you call if you have questions about the use of seclusion, restraint or PMT?

District Contact Personnel	Telephone Number	Consultant For:
Sarah Burke	860-647-3452	All Schools, PMT Supervisor
Liama Holmes	860-647-3494 x4	MRA, Bentley, MTC, MHS
Nathan Philbrick	860-335-0464	Bennet
Bethany Lauer	860-647-8233 x 60100	IMS, MMA

Wendy Landman	860-647-3571 x 70519	Bennet
Teena DeGros	860-647-3430	Highland Park, Martin, Buckley, Bowers
<a href="#">Thierry Ngarambe</a>	860-647-3383	Verplanck, Keeney, Waddell

***\*\*If you cannot contact your district consultant and/or have any concerns please contact Sarah Burke (860-647-3452)***

**PMT Trained Staff:**

- Are responsible for their own certification and renewal
- Must attend a refresher course annually
- Are responsible for attending and arranging when to attend the refresher courses

For training questions and training schedules contact *Fiona Golemba* at 860-647-3473 or [b51fgole@mpspride.org](mailto:b51fgole@mpspride.org)