



Little City Foundation

Policies & Procedures

Subject: ChildBridge Center for Education-Behavior Interventions

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PURPOSE

To formalize the approach to discipline and behavior interventions within the ChildBridge Center for Education

Scope

This policy applies to all students and staff members of the ChildBridge Center for Education.

Definitions

Active Engagement-Hybrid of Positive Behavior Intervention Supports (PBIS), Evidence Based Teaching, and Applied Behavior Analysis (ABA).

Functional Behavioral Assessment-Process of observation and data collection to determine the purpose of student behavior.

Behavior Intervention Plan-Individualized support plan for behaviors that are impacting student access to education, and/or are causing harm to the student or those working with the student. The plan has been developed by the IEP team and is approved through the IEP process.

Reinforcer-tangible or social items that encourage behavior to continue. Can encourage positive or negative behavior.

Restrictive Measure-removing/loss of tangible or social reinforce

Staff Directed Sensory Break: In order to ensure the safety of students and staff, it is occasionally necessary to prompt a student to leave the educational environment to access a sensory break.

Student Requested Break: Students have the right to request a break and to leave the learning environment to utilize coping strategies.

Childbridge Center for Education does not have a physical space that fits the ISBE mandated requirements for a “Time Out” and “Isolated Time Out,” therefore

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these interventions will not be utilized. If Childbridge Center for Education ever creates a space meeting the ISBE mandated requirements for “Time Out” or “Isolated Time Out,” Childbridge will notify ISBE and the guardians and districts of the students.

Holding Skills (Physical Restraint): Holding or otherwise restricting the student’s movements only includes the use of specific planned techniques allowed per 23 IAC 1.285. Holding does not include momentary periods of physical restriction by direct person to person contact, without the aid of material or mechanical devices, accomplished with limited force and design to prevent a student from completing an act that would result in potential physical harm to the student or another or damage to property. Any use of restraint is only to be used when a student is a danger to themselves or others and shall not impair a student’s ability to breathe or communicate normally, obstruct a student’s airway, or interfere with a student’s ability to speak. The student should be permitted to have hands-free for brief periods to access their primary mode of communication unless the supervising adult determines that this freedom appears likely to result in harm to the student or others.

Policy

Behavior Interventions within the ChildBridge Center for Education is individualized based on the function of the students’ behaviors. For this reason, it is the policy of the ChildBridge Center for Education to individualize behavioral interventions. Students at the ChildBridge Center for Education require a range of behavioral interventions at various times throughout their enrollment, for that reason a continuum of behavioral interventions is utilized. The following points outline additional policy requirements.

- To comply with 23 Illinois Administrative Code 401.10(a)(10) and 23 Illinois Administrative Code 401.250(b)(4)
- To comply with 23 Illinois Administrative Code 1.285.
- The ChildBridge Center Education utilizes Active Engagement methodologies school wide, to ensure students and staff are continuously engaged in the learning process and have minimal time to engage in challenging behaviors.
- When students display challenging behaviors and Active Engagement techniques do not provide enough support, behavioral interventions are individualized based on Behavior Intervention Plans (BIPs). Staff members are trained on individual programs annually or as often as the BIP changes.
- Reinforcing and Restrictive measures must be identified within a student’s BIP.
- To the greatest extent possible, reinforcing measures must be exhausted prior to the implementation of restrictive measures.
- Care, Welfare, Safety, and Security are the guiding principles of all behavioral interventions.
- Restraint will only be used when there is no known medical or psychological contraindication.

Behavioral Intervention Continuum

- Active Engagement Strategies (See below for additional strategies)
- Sensory Breaks/Sensory Diets
- Tangible Motivators/Social Motivators/Token Economy
- Behavior Intervention Plan Implementation
- Level 1 interventions (See below for additional strategies)
- Level 2 interventions (See below for additional strategies)
 - Holding Skills (Physical Restraint)

Active Engagement Strategies

1. **Redirection**: This procedure utilizes the minimal prompt necessary whether it be verbal, gestural, or intermittent physical to move an individual away from an inappropriate behavior toward a more appropriate, desirable behavior.
2. **Relaxation Training**: Any of a number of procedures to teach a person to calm himself, usually by having him do some combination of breathing exercises, going to a calm environment (not to be confused with timeout), doing progressive muscle relaxation or listening to relaxing music. These procedures are usually trained in special sessions, then introduced in vivo after acquisition of the training.
3. **Communication Training**: Teaching the individual a communicative response that is functionally equivalent to, and a replacement for, the targeted problematic behavior.
4. **Social Skill Training**: Teaching individuals' skills to use in place of inappropriate/unwanted behavior and giving individual-based rationales to using the skill in lieu of inappropriate/unwanted behavior.
5. **Apologizing**: This procedure requires an individual who has done something that fringes upon the rights of another person to apologize to the offended party(ies) for his/her wrongdoing thus providing an appropriate social consequence for the identified problematic behavior.
6. **Contingent Problem Solving**: This calls for the individual or QIDP to develop appropriate strategies for resolving problem situations after the occurrences of the target behavior. This involves the individual, with staff assistance, learning alternatives to exhibiting inappropriate responses to problem situations.
7. **Role Playing**-Having the individual practice appropriate means of responding to problems. It is used to facilitate the effectiveness of problem solving.
8. **Restitution/Simple Correction**: A procedure which requires the individual, the extent possible, restore his/her environment to the condition that existed prior to the display of a target behavior. The individual may, for example, be required to replace overturned furniture to the original position before the disruption or apologizing to the victim.
9. **Token Economies**-A procedure that involves reinforcing an individual with stars, marks, points, etc. ("generalized re-enforcers") immediately following a desired behavior. These generalized reinforcers or tokens may be later exchanged for "backup" reinforcers such as activities, privileges, and other

pleasant events, chosen from a menu by the individual.

LEVEL 1: Requires Approval from School Clinical Team and Parent

1. Contract for Behavior Intervention: The use of a predetermined reinforcer and set of contingencies that outline the desired behavior, interactions, or actions on the part of the individual and staff. These contingencies are negotiated and agreed upon by both parties. These negotiations are subject to review, change, or clarification at any time by either party.
2. Planned Ignoring: Involves the removal of attention, physical contact, or verbal interaction contingent upon the occurrence of undesired behavior. This is implemented when it is assumed that the time-in environment is reinforcing and all outside sources of reinforcement can be controlled. Implementation involves a) looking away from the individual, b) remaining quiet, and c) refraining from any interaction whatsoever for a specific period of time. Reinforcement (i.e., interaction) resumes when the undesired behavior is no longer occurring. There is no time limit on this procedure unless the person's behavior intervention plan indicates a specific time limit. It should be noted however, that behavior that is dangerous to self or others should never be ignored.
3. Passive Behavior Supportive Strategies: Preventing a targeted behavior from occurring by altering antecedent stimuli without actually acting upon the behavior itself.
4. Differential Reinforcement of Other Behavior (DRO): A procedure in which a reinforcer is given at the end of a specified interval of time provided that a prescribed behavior has not occurred during the interval.
5. Differential Reinforcement of Incompatible Behavior (DRI): A procedure in which a reinforcer is given following the performance of a prescribed appropriate behavior that is physically and functionally incompatible with the targeted maladaptive behavior.
6. Differential Reinforcement of Appropriate Behavior (DRA): A procedure in which a reinforcer is given following the performance of a specified appropriate behavior. This may involve discreet occurrences of behavior(s) or at time intervals in which appropriate behavior is to be displayed.
7. Differential Reinforcement of Lower Rates of Behavior (DRL): A procedure in which a reinforcer is given for lower rates of a non-harmful behavior after a specified time interval in order to reduce the rate of the unconventional behavior to a more manageable level. DRL is used when low levels of the behavior are tolerable (question asking, etc.) or the behavior is occurring at such a high rate (100x/day, etc.) that a zero level cannot be expected to be achieved immediately. Once the maladaptive behavior has reached a lower rate, DRA, DRO, or DRI may be implemented to further reduce the rate of the behavior.
8. Differential Reinforcement of High Rates of Behavior (DRH): A procedure where staff reinforce the individual for engaging in successively higher rates of behavior. This procedure is common when attempting to increase work

output.

9. Differential Reinforcement of Compliance: A procedure to teach an individual to comply with requests. Staff makes a request of the individual. If he/she follows the request, staff reinforces him/her. If the individual does not follow the request, the staff member walks away without further interaction.
10. Behavioral Momentum Compliance Training: A method of teaching individuals to comply to requests by making one through three simple high-probability-of – compliance requests, followed by the targeted request, in an attempt to increase compliance to requests made by staff.

LEVEL II- Must be Witten into the Behavior Intervention Plan and approved by the IEP team

1. Protective Equipment-The use of a device placed on a person to attenuate or prevent the unwanted effects of some action of that person on themselves. Protective equipment does not restrict the individual's movement, or the movement of any part of that person's body (as in restraint). Examples include gloves, protective clothing, helmet, etc. Protective equipment should not be confused with devices used for proper body alignment.
2. One to one aide-The introduction of a staff person to work individually with a person for the purposes of intensive educational, vocational, or behavior intervention training. This would be listed as a 1:1 aide Related Service.
3. Staff Directed Sensory Break: In order to ensure the safety of students and staff, it is occasionally necessary to prompt a student to leave the educational environment to access a sensory break.
Student Requested Break: Students have the right to request a break and to leave the learning environment to utilize coping strategies.
4. Physical Escort-This is commonly known as the Transport Technique. This procedure involves the use of hands-on guidance by one or more staff to assist an individual in moving from one place to another, as outlined by the Crisis Prevention Institute.
5. Holding Skills (Physical Restraint)- If an individual who receives services is engaging in behavior that places them and/or others in danger, and less intrusive measures have been ineffective in helping them control such behavior, staff may utilize physical restraint as an emergency procedure to ensure the safety of all involved.
 - a. Physical restraint shall not consist of, or be accompanied by, the use of mechanical restraints, the use of excessive or unnecessary force, or any other action which produces pain, covers the head or any part of the face, or in any way restricts normal circulation and/or respiration of the individual.
 - b. Only persons who are certified as having successfully completed a competency-based training program presenting the specific restraint procedures, knowledge of this policy, and understanding as to situations that warrant shall employ physical restraint.
 - c. An individual must be released from the restraint immediately upon a

determination by the staff member administering the restraint that the student is no longer in imminent danger of causing physical harm to himself, herself, or others or if the student indicates any respiratory distress.

- d. No single instance of restraint may exceed 15 consecutive minutes unless a licensed educator or licensed clinical practitioner knowledgeable in the use of restraint evaluates the appropriateness of continuing the procedure in use.
- e. If the physical restraint is a supine restraint all components of 23 IAC 1.285 (d)(5) will be followed.
- f. All documentation required under 23 IAC Part 1.285(f) utilizing the ISBE 11-01 form will be completed and submitted in accordance to this Part.

Holding Skills (Physical Restraint) Crisis Intervention Procedures

- Little City Foundation & the ChildBridge Center for Education utilizes the Crisis Prevention Institute's (CPI) Non-Violent Physical Crisis Intervention and procedures outlined therein to address crisis situations (see CPI Instructor's Manual and Little City Foundation's training curriculum). Little City Foundation also utilizes adaptation training based on the CPI model.
- Little City Foundation & the Childbridge Center for Education additionally utilizes Ukeru which is a restraint free and trauma-informed crisis management system. Training of Ukeru includes verbal and nonverbal communication, managing and de-escalating conflict by converting or diverting aggression, building an environment focused on comfort versus control, and recognizing traumatic experiences of individuals who receive services for developmental, behavioral, and mental health needs. It also involves a system of blocking techniques to protect oneself and others during behavioral episodes including physical aggression utilizing specially designed child friendly blocking pads that can also be used for daily activities.
- Prone restraints **not** an approved intervention for use per ISBE.
- All ChildBridge Center for Education staff are required to receive annual training on the Center's approved use of approved CPI procedures and shall receive at minimum 8 hours of developmentally appropriate training. This shall include, but not be limited to:
 - Crisis de-escalation.
 - Restorative practices.
 - Identifying signs of distress during physical restraint and time out.
 - Trauma-informed practices; and
 - Behavior management practices.

ADDITIONAL REQUIREMENTS

1. The use of physical restraint shall be subject to the following requirements and limitations. 1) Pursuant to Section 10-20.33 of the School Code, physical restraint may only be employed when: A) the student poses a physical risk to himself, herself, or others, B) there is no medical contraindication to its use, and C) the staff applying the restraint have been trained in its safe

- application.
2. If a student is restrained in 3 days in a 30-school day period or a supine physical restraint in 2 separate instances within a 30-school day period, the school personnel who initiated, monitored, and supervised the incidents shall initiate a Restraint Review, which is a review of the effectiveness of the procedures used. Parents/Guardians have the right to request a meeting after any instance of the use of restraint. The meeting will be convened within 2 school days unless extended by the parent.
 3. **Following the hold, the student will be given a body check by the school nurse or another certified staff that was not involved in the hold. This will be documented in the incident report.**
 4. Notification requirements will be sent to parents, referring school districts and ISBE per ISBE mandated time requirements as found in 1.285. Parents will be informed of their rights, provided with a copy of the standards for when restraint can be used, and told they have the right to file a complaint with the Illinois State Superintendent. All incidents will be recorded on ISBE form 11-01 and the school Principal will be the designated school official who will be informed and will maintain notifications.
 5. Injuries will be evaluated, and an annual review conducted as per 1.285 (j)(5): a description of the district's or other entity's annual review of the use of isolated time out, time out, or physical restraint, which, at a minimum, shall include:
 - a. The number of incidents involving the use of these interventions.
 - b. The location and duration of each incident.
 - c. Identification of the staff members who were involved.
 - d. Any injuries or property damage that occurred.
 - e. The timeliness of parental or guardian notification, timelines of agency notification, and administrative review.

PROHIBITIONS

- No person shall be subjected to corporal punishment, cruel or unusual punishment, verbal threats such as statements that have personal meaning that are emotionally damaging, e.g., saying hospital to someone fearful of hospitals, or derogatory remarks as part of any treatment plan under any circumstances.
- Chemical restraint is strictly prohibited.
- Mechanical restraint is strictly prohibited.
- Physical restraint shall never be employed as discipline for rule infractions, for retaliation, for the convenience of staff, or as a substitute for a program.
- No individual shall be subjected to group discipline because of the misbehavior of another individual.