



Position Statement: Physical Restraint and Seclusion¹

NAPSEC members serve as a vital component in the continuum of alternative placements, as required under the Individuals with Disabilities Education Act. These highly specialized schools were developed to educate students with the most significant psychiatric, psychological, developmental, and cognitive needs. Some students are referred to these programs because they engage in disability-related self-injury and/or dangerously aggressive behaviors. These students may require emergency intervention, including physical restraint performed by trained and qualified staff and the limited use of clinically indicated and properly conducted seclusion, to ensure their safety.

Strict regulations are needed to govern the use of restraint and seclusion in schools to ensure safety and well-being. NAPSEC strongly condemns the misapplication and improper or abusive use of restraint and seclusion, which can be both dangerous and highly traumatizing to the student and the staff involved. However, regulations must distinguish the dangerous misuse of restraint and seclusion from their safe, effective, and appropriate use as part of a carefully designed, function-based emergency intervention.

Restraint and seclusion must only be utilized when student behavior poses the immediate risk of significant physical harm to the student or others and must only be considered after less restrictive interventions have proven ineffective. Restraint and seclusion must never be used as a punitive measure, as a means of coercion or retaliation, or for the convenience of staff. Only staff trained in an approved curriculum should implement a restraint. If a student develops a history of self-injury or dangerously aggressive behaviors that necessitate the use of restraint or seclusion, schools must obtain parent or guardian consent for the use of emergency procedures. Further, consultation with medical professionals must occur to identify any medical conditions contributing to the problem behavior and any contraindications for the use of restraint or seclusion.

The misapplication of restraint and seclusion often results from insufficient training, oversight, and accountability. Licensed professionals with experience and training in the assessment and treatment of severe problem behavior must oversee the use of restraint and seclusion. Competency-based staff training, ongoing monitoring and data collection to evaluate effectiveness, and parental involvement and consent are necessary safeguards to protect against misapplication. Careful attention to this spectrum of needs and the appropriate protections, rather than blanket bans on specific procedures, can keep students safe and enrolled in the least restrictive and most appropriate environment.

Without access to the full range of emergency interventions, some students would be referred from day programs to residential settings to better ensure safety, placing them in a more restrictive environment despite a history of success in a day placement. Without the option for restraint or seclusion during a crisis situation these highly specialized programs would be forced to seek assistance from law enforcement unfamiliar with the unique needs of the student, potentially criminalizing disability-related behavior.

NAPSEC unequivocally believes students must have safe learning environments while maintaining access to effective, clinically indicated and evidence-based interventions. This access allows students to safely remain in highly specialized schools where they can learn in the least restrictive most appropriate environment.

¹ References in this document to “restraint” encompass the terms “physical restraint” and “mechanical restraint” as defined by the U.S. Department of Education Civil Rights Data Collection (CRDC). References to “seclusion” encompass “seclusion” as defined in the CRDC.

NAPSEC supports the following principles related to the use of physical restraint and seclusion² in highly specialized schools:

- Parents/guardians must be aware of school policies regarding restraint and/or seclusion
- Parents/guardians must be informed of each instance of restraint and/or seclusion
- Positive behavioral interventions and supports must be present
- Trauma informed care must be present
- Highly individualized behavioral assessment and intervention must be in place and implemented by trained staff
- Behavior supports must be designed and implemented to ensure the safety and dignity of the student
- Behavior supports must utilize the least restrictive/least invasive behavioral interventions sufficient to achieve the student's safety, behavioral, and instructional goals
- Every effort must be made to prevent the use of restraint and seclusion
- Mechanical restraint must never be used
- Physical restraint must only be used when a student's behavior poses imminent danger of serious physical harm to the student or other people and less intrusive methods have failed
- Seclusion must only be used when a student's behavior poses imminent danger of serious physical harm to the student or other people and less intrusive methods have failed
- Restraint and/or seclusion must only be implemented by trained staff
- Restraint and/or seclusion must never be used as a punitive measure for a student
- Restraint and/or seclusion must never be used for the convenience of school staff
- Restraint and/or seclusion must never be conducted in a manner that restricts breathing
- Restraint and/or seclusion repeatedly used as an intervention for a student must initiate a review of strategies to address behavior
- Every instance of restraint and/or seclusion must be continuously and visually monitored to ensure appropriate use and safety of all involved
- Every instance of restraint and/or seclusion must be subject to review
- All instances of restraint and/or seclusion must be reported and subject to continuous quality review by appropriately trained and licensed staff

² The CRDC defines **physical restraint** as: A personal restriction that immobilizes or reduces the ability of a student to move his or her torso, arms, legs, or head freely. The term physical restraint does not include a physical escort. Physical escort means a temporary touching or holding of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is acting out to walk to a safe location.

The CRDC defines **mechanical restraint** as: The use of any device or equipment to restrict a student's freedom of movement. This term does not include devices implemented by trained school personnel, or utilized by a student that have been prescribed by an appropriate medical or related services professional and are used for the specific and approved purposes for which such devices were designed, such as: Adaptive devices or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports; Vehicle safety restraints when used as intended during the transport of a student in a moving vehicle; Restraints for medical immobilization; or Orthopedically prescribed devices that permit a student to participate in activities without risk of harm.

The CRDC defines **seclusion** as: The involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving. It does not include a timeout, which is a behavior management technique that is part of an approved program, involves the monitored separation of the student in a non-locked setting, and is implemented for the purpose of calming.