

600 Eagleview Boulevard First Floor Exton, PA 19341 Phone: 484-615-6200

Business Fax: 610-457-1203

Board of Trustees Resolution

WHEREAS the Board of Trustees of Achievement House Cyber Charter School desires to comply with applicable state and federal laws and exercise its authority to promulgate policies for Achievement House Cyber Charter School;

NOW, THEREFORE, be it resolved that the Board of Trustees of Achievement House Cyber Charter School adopts the following policy:

Behavior Support Policy for Students with Disabilities

Achievement House Cyber Charter School (AHCCS) enacts this policy to ensure that AHCCS staff use appropriate behavior support techniques and that, for each disabled or thought to be disabled student who exhibits behavior problems which interfere with the student's ability to learn, the IEP team develops a plan that provides for an appropriate program of behavior management. The purpose of this policy and its implementing guidelines is to ensure adherence by all staff to the requirements of state and federal law as they exist at the time of the adoption of this policy and its implementing guidelines and as they may from time to time be amended and interpreted by the courts and various administrative agencies. To the extent that this policy ever conflicts with federal and state law, federal and state law will control.

General Policy and Definitions

General Policy

The following principles shall govern the use of behavior supports and interventions for children with disabilities:

- 1. Behavior support programs and plans must be based on a functional assessment of behavior and use positive behavior techniques.
- 2. Positive rather than negative measures shall form the basis of behavior support programs to ensure that all students shall be free from demeaning treatment, the use of aversive techniques and the unreasonable use of restraints.
- Behavior support programs include a variety of techniques and research based practices to develop and maintain skills that will enhance an individual child's opportunity for learning and self- fulfillment.
- 4. The types of intervention chosen for a particular child shall be the least intrusive necessary.

- 5. Nothing in this policy shall be construed to require the development of a separate behavior support of intervention plan when appropriate positive behavioral interventions, strategies, and supports that address the behavior can be incorporated in the body of the IEP.
- 6. The use of restraints is considered a measure of last resort, only to be used after other less restrictive measures, including de-escalation techniques.

As used in this policy, the following words and terms shall have the following meanings, unless the context clearly indicates otherwise:

<u>Aversive Techniques-</u> Deliberate activities designed to establish a negative association with specific behavior.

<u>Behavior Support-</u> The development, change and maintenance of selected behaviors through the systematic application of behavior change techniques.

<u>Positive behavior support plans</u>- A 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 behavior assessment, and become part of the individual student's IEP. These plans must include methods that use positive reinforcement and other positive techniques to shape the behavior of the child with disabilities, ranging from the use of positive verbal statements as reward for good behavior to specific tangible rewards.

<u>Restraints</u>- the application of physical force, with or without the use of any device, for the purpose of restraining the free movement of a student's body, excluding the following:

- a) Briefly holding a student, without force, to calm or comfort him/her.
- b) Guiding a student to an appropriate activity
- c) Holding a student's hand to escort him/her safely from one area to another.
- d) Hand-over-hand assistance with feeding or task completion
- e) Techniques prescribed by a qualified medical professional for reasons of safety or for therapeutic or medical treatment, as agreed to by the student's parents/guardians and specified in the IEP.
- f) Mechanical restraints, such as devices used for physical or occupational therapy, seatbelts in wheelchairs or on toilets used for balance and safety, safety harnesses in buses, and functional positioning devices.

Limitations And Requirements

Use of Physical Restraints other than mechanical restraints- restraints to control acute or episodic aggressive or self-injurious behavior may be used only when the child is acting in a manner as to be a clear and present danger to him/herself, to other children or to employees, and only when less restrictive measures and techniques have proven to be or are less effective. The Director of Special Education or his/her designee shall notify the parent/guardian as soon as practicable of the use of restraint to control aggressive behavior of his/her child and shall convene a meeting of the IEP team within ten (10) school days of the inappropriate behavior causing the use of restraints, unless the parent/guardian, after written notice, agrees in writing to waive the meeting. At this meeting, the IEP team shall consider whether the student needs a functional behavioral assessment, reevaluation, a new

or revised positive behavior support plan, or a change of placement to address the inappropriate behavior.

The use of restraints may only be included in a student's IEP under the following conditions:

- The restraint is used in conjunction with specific components of positive behavior support.
- b) The restraint is used in conjunction with the teaching of socially acceptable alternative skills to replace problem behavior.
- c) Staffs are authorized, and have received all training required, to use the specific procedure.
- d) The positive behavior support plan of the student includes a plan for eliminating the use of restraint through the application of positive behavior support.
- e) The use of restraints is not included in the IEP for the convenience of staff, as a substitute for an educational program, or to be employed as punishment.

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

Proscription of Certain Aversive Techniques- the following aversive techniques for handling behavior may not be used in education programs of the ACHHS:

- 1. Corporal punishment.
- 2. Punishment for a manifestation of a child's disability.
- 3. Locked rooms, locked boxes or other locked structures or spaces from which the child cannot readily exit.
- 4. Noxious substances.
- 5. Deprivation of basic human rights, such as withholding meals, water or fresh air.
- 6. Treatment of a demeaning nature
- 7. Electric Shock
- 8. The use of prone restraints, which are those by which a student is held face down on the floor.

Reporting and Monitoring

The Director of Education or his/her designee shall maintain and report data of the use of restraints in a manner prescribed by the Secretary of Education of the Commonwealth of Pennsylvania. Such report shall be readily available for review during cyclical compliance monitoring conducted by the Pennsylvania Department of Education.

Referral to Law Enforcement

If a student's conduct results in referral to law enforcement, an updated functional behavior assessment and positive behavior support plan shall be required for students with disabilities who have positive behavior support plans at the time of such referral. If, as a result of such referral, the student is detained or otherwise placed in a residential setting located outside the District, the Director of Special

Education or intermediate unit is informed of the need to update the functional behavioral assessment and the positive behavior support plan of the student.

Training

Regular Program of Training- The Director of Special Education or his/her designee shall provide for the regular training and re-training, as needed, of personnel in the use of specific procedures, methods and techniques that those personnel will be expected to employ in the implementation of behavior supports of interventions in accordance with the IEP of the child and this policy.