

SAFE INTERVENTIONS WITH STUDENTS

Background

Medicine Hat Catholic Board of Education is committed to the care, welfare, safety and security of students and staff. The purpose of using safe interventions with students is to effectively and safely manage crisis or conflict situations. The focus is on interventions that will support student safety and regulation and assist staff members to prevent and, if necessary, de-escalate a potential crisis. Safe interventions are acts of care in exceptional circumstances, not discipline or behaviour management techniques.

Procedures

Primary Preventions (preventing and reducing the need for emergency safety interventions):

1. Behavioural interventions with students must consider the right of all children and youth to be treated with dignity.
2. All students should receive responsive educational programming and supports in a safe and least restrictive environment. When a student has ongoing escalations related to completion of school work, delivery, interventions, supports, adaptations and/or modifications to school work and/or schedule should be explored and implemented.
3. Positive behaviour supports and opportunities for social/emotional/behavioural learning should be put in place to promote predictability, positive relationships with staff and peers, self-regulation, social-emotional learning, and an optimum learning environment and approach for the student and the classroom.
4. When a student displays chronic, inappropriate behaviours, a collaborative team meeting that includes parents/guardians will occur in a timely manner. School-based administrators, in consultation with district Learning Services staff as necessary, will decide who should attend this meeting. This meeting should result in a documented plan to explore and implement school-based interventions, supports and/or strategies, to complete needed observations and assessments, and/or to connect students and families to community-based supports. It is the responsibility of school-based administration to ensure follow-up occurs.
5. Student support spaces and regulation tools should be made available to support students in their efforts to develop self-regulation. School-based and school-linked team members will support the process of discovering and implementing personal regulation strategies. A guide to defining and implementing student support spaces can be found in Appendix A – Student Support Spaces.

6. Staff will be trained in Supporting Individuals through Valued Attachments (SIVA) in order to ensure proactive behaviour supports and safe interventions when required.
 - a. A minimum of one school administrator and one other staff member at each school will maintain current SIVA certification.
 - b. All behavioural support staff (i.e. staff who work out of designated student support spaces or who do district behavioural consultation) in the district will maintain current SIVA certification.
 - c. The principal will determine other school staff whom should access the training. Other trainees may include learning assistants and classroom teachers, as determined by student needs.
 - d. District training opportunities will be coordinated by the Associate Superintendent - Learning Services.

Secondary Preventions (Using the least restrictive means possible):

7. In an effort to maintain a safe and caring environment for staff and students, de-escalation strategies will be used to manage a potential conflict or crisis situation. De-escalation involves the process of communicating safety and support to the student (verbally and non-verbally), establishing a positive connection with the student, and helping the student find a way to relieve their distress or agitation. The goal of the process of de-escalation is to avoid the need for physical safety interventions and to give the student a sense of control, calm and security.
8. Physical intervention and/or escort to a safe location is viewed as a “last resort” intervention while maintaining student dignity as much as possible. “Last resort” means that all other possible reasonable interventions have been implemented with fidelity and these interventions have failed to prevent or de-escalate a situation and there is significant concern for the personal safety of the student and/or others. These situations may include:
 - a. The student attempts to injure/assault another person (staff, student, or volunteer);
 - b. The student attempts to self-injure; or
 - c. The student puts own safety at risk, (e.g. moving toward an unsafe area, roadway, etc.).
- 8.1 Physical intervention refers to any procedure in which staff use any part of their body (hands, trunk, legs) or any approved specialized protective device to substantially restrict the movement of a student.
- 8.2 Physical intervention must be consistent with the following principles.
 - a. Physical Safety Interventions are always an act of care. They are not a part of a discipline procedure or a method to gain student compliance.
 - b. Self-Protection, Physical Escorts and Physical Barriers shall be used in the school setting only in cases where there is significant and imminent concern for the safety of the student and/or others.
- 8.3 If a physical safety intervention is used, it should be for the least amount of time possible (i.e. only until that student no longer creates/poses an imminent risk of injury to self or others).
- 8.4 It is recommended in these situations to involve the support and supervision of a second adult if possible.
- 8.5 A restoration space, supervised and supported by a known and trusted adult, will be provided for the student to regain a calm and alert state. See

Appendix A for definition and guidelines for restoration spaces.

Tertiary Prevention (Interventions to reduce or prevent negative consequences):

9. The Associate Superintendent – Learning Services or designate shall be informed after a situation arises where physical intervention was necessary.
 - a. A [Physical Intervention Incident Report Form](#) must be submitted to the Associate Superintendent – Learning Services immediately following an incident. See Appendix B.
 - b. Parents will be informed during or immediately following an incident that requires a Physical Intervention.
 - c. Post intervention assessment and debriefing focused on restoring safety, maintaining trust and converting negative behavior incidents into positive learning experiences will occur within a reasonable time frame of the incident. Post intervention notes and plans will be documented.
 - d. An individual Safety and Regulation Support Plan shall be developed or reviewed (if one is already in place) by the school based team to inform staff regarding proactive strategies to avoid challenging situations and procedures to de-escalate and manage challenging situations if they do occur.
 - e. Personalized support spaces (Appendix A), support person/people and procedures will be identified within the Safety and Regulation Support Plan that can be used to regulate and/or de-escalate with the individual student.

Reference: Section 20, 60, 61, 113 School Act

STUDENT SUPPORT SERVICES

Background

The Medicine Hat Catholic Board of Education (MHCBE) recognizes its responsibility to provide a safe, caring, and supportive learning and working environment for all students and staff.

It is the goal of the MHCBE to keep students within their natural learning environment to the greatest extent possible. To be successful in natural environments, some students will need supports that may be best delivered within a variety of different student support spaces. The goal of these support spaces is both to connect the student positively and respectfully to school and to prepare or equip the student so that they are able to actively learn, engage and participate within inclusive learning, life, and social contexts.

MHCBE does not support the reactive use of these support spaces as a form of involuntary isolation and/or for disciplinary purposes. As well, the MHCBE does not support physically restricting a student's ability to exit a room, except in the case of an emergency in order to protect the safety of student(s) and/or staff from imminent risk of injury.

These guidelines for use of student support spaces provide a consistent and respectful approach in supporting student personal, social, emotional, academic and behavioral needs/development as well as in the prevention and de-escalation of challenging student behaviour.

Documentation, Collaboration and Parental Consent

- The parent/guardian and student (in accordance with their age and level of understanding) should be informed and agree to the use of a student support space. The parent/guardian should be given the opportunity to see the space if requested.
- When a support space is being used at the targeted or specialized level of the support pyramid, the purpose for using the space and the frequency/duration should be documented in either The Individual Support Plan (ISP), Safety and Regulation Support Plan, or Medical Support Plan.
- Parents must be consulted when changes are made to type of support space being used, purpose of the use of the support space and/or the frequency of the use of the support space. This should be documented, including parent/guardian signature, in either Case Conference Notes, an ISP Update, or a Safety and Regulation Support Plan Reviews.

Definitions

Self-Regulation: Self-Regulation is about managing the brain-body responses to stress, including energy expenditure, recovery, and restoration. Effective self-regulation requires learning to recognize and respond to stressors that occur in the five core domains: physiological, emotion, cognitive, social and pro-social.

Sensory Regulation: Maintaining an appropriate level of physical arousal and alertness in order to respond appropriately across environments to various sensory stimuli (sight, touch, smell, hearing, vestibular and proprioception).

Self-Regulation Strategies: The process of developing personalized strategies related to maintaining a calm and alert learning state through recognizing, reducing and managing stressors across all domains.

Student Support Space: A space within a school focused on responding to personal care, therapy, regulation, developmental, social, emotional, academic and/or behavioral support needs at either the targeted or specialized level of the support pyramid.

- 1. Restoration Space:** a safe place where the student can co-regulate or self-regulate (depending on ability) from their current emotional/arousal state. The restoration space should be an environment that includes items and/or activities that the individual student finds soothing and/or restorative.
- 2. Calming Space:** A sensory-controlled area that a student proactively self-selects to remove him or herself to from overwhelming situations or environments. The purpose of a calming space is not exclusion or punishment. The main purpose of the space is to support the student in the development and implementation of self-regulation strategies, resulting in the reduction of challenging stress related behaviours. The calming space may contain materials to assist the student in calming methods (e.g. personalized calming boxes, albums or books, stuffed animals, squishy balls, visuals of deep breathing, calming music...etc.).
- 3. Sensory Space:** A room that offers a nurturing, student-centered sensory supportive environment. It is used to facilitate self-organization, self-regulation, restoration, and sensory awareness. The goal of the student's program in the room is to address the primary senses of sight, sound, touch, smell, hearing, vestibular and proprioception.
- 4. Low Arousal Work/Testing or Individualized Programming Space:** A modified area identified within a school that offers a low sensory working or testing environment that is self-selected by the student. These areas offer spaces where stimulation in the form of people, sounds, light, noise, time pressures, and movement are reduced.
- 5. Medical, Therapy and/or Personal Care Space:** Spaces that are used to address exceptional medical, personal care or therapeutic needs. Depending on the nature of these needs, these spaces may need to be private or semi-private.
- 6. Junior/Senior High Student Support Space:** A focused staffed environment to provide ongoing support for students with personal, behavioural, regulatory, social/emotional and/or academic needs.

Guiding Principles for Student Support Spaces

Student support spaces will look different in every school as they are meant to be responsive to the needs of the students within the school. These supports spaces may

serve any combination of the following purposes. The following principles should be employed based on the purposes that a specific school's support spaces.

1. Restoration Space – Guiding Principles

A restoration space is used to support a student when in a high-arousal state. The student may need to be encouraged and/or supported to use the space when in this state.

The use of restoration spaces in MHCBE schools is a responsive regulation strategy and is guided by the following principles:

- a. In all situations, it is the intent of the MHCBE to provide the best possible care and to ensure the welfare, safety and security of all involved.
- b. Where a separate room is used as a restoration space, the space should
 - Be a space that does not cause any further emotional or behavioural escalation.
 - Not contain items or fixtures that may be potentially harmful to student in an escalated emotional state.
 - Provide a means by which staff can be present to co-regulate with the student at all times.
- c. When using a restoration space, an adult must be present at all times. The supervising adult's role is to employ strategies that will support the student's de-escalation and restoration. Teaching should not be a component of the restoration process.
- d. Restoration spaces will not be used as a disciplinary measure or as punishment for inappropriate behaviour.
- e. Students will not be restricted in their ability to leave restoration spaces through the use of locks on the door or restricting the student's exit (e.g. holding the door, barring the door way, etc.)
- f. The use of a restoration space must be tracked in the student's anecdotal notes to refine and determine the effectiveness of regulation and de-escalation strategies employed.

2. Calming Space – Guiding Principles

Some students may experience high levels of arousal, stress/anxiety, frustration, and anger while at school as a direct outcome of their personal profile or history. Supporting these students to develop self-regulation strategies is a proactive means of addressing safety issues and providing these student with increased opportunity for success.

A student's Calming Space may be the same space as their Restoration Space.

The use of calming spaces in MHCBE schools is a proactive regulation strategy and is guided by the following principles:

- a. Self-regulation strategies, including the use of a calming space, are implemented in collaboration with the student.
 - Students work with trusted adults in low-arousal times to discover and implement an individual plan for the location and use of a calming space.
 - A trusted adult supports the student in understanding the purpose of a calming space, how to request the use of the space, and how to communicate needs and wants while in the space.
 - The student accesses the calming space voluntarily as part of a predetermined plan. Students accessing a calming space will not be transported physically into or out of that space by staff.
- b. When using a calming space, the students must be supervised. Depending on the developmental needs of the student, the supervising adult may serve as a co-regulator while the student is using a calming space.
- c. Calming spaces will not be used as a disciplinary measure or as punishment for inappropriate behaviour.
- d. Students will not be restricted in their ability to leave calming spaces through the use of locks on the door or restricting the student's exit (e.g. holding the door, barring the door way, etc.)

3. Sensory Regulation Space – Guiding Principles

Sensory regulation strategies and tools can be applied in many contexts. Ideally, they are implemented in the classroom but it may be necessary for some students to explore and implement sensory regulation strategies in spaces outside the classroom.

The use of sensory regulation spaces in MHCBE schools is a proactive regulation strategy and is guided by the following principles:

- a. The sensory regulation space is available for individual students under the supervision of an adult.
- b. The space is used to facilitate self-organization, self-regulation, restoration, and sensory awareness.
- c. The goal of the student's program in the space is to address the primary senses of sight, touch, smell, hearing, vestibular and proprioception.

- d. The level of the child's arousal, either too high or too low, should match the degree, intensity, type and frequency of sensory input.
- e. An occupational therapist should be consulted in the process of developing a plan around the student's use of sensory regulation strategies and tools. This work should include ongoing evaluation and documentation of successful strategies.
- f. The use and scheduling of a sensory space should be explicitly outlined in the student's Individual Support Plan and should reflect strategies that are effective for that individual student.
- g. The student should be encouraged and supported to employ sensory regulation strategies across all environments that he/she functions in.

4. Low Arousal Work/Testing or Individualized Programming Space – Guiding Principles

Some students struggle in school because of the high level of sensory input or anxiety within the school, classroom or testing environment. This may be particularly relevant for students with an Autism diagnosis, sensory processing difficulties, or sensory (vision or hearing) impairment. Low Arousal Work or Testing Spaces are designed as teaching, learning or testing areas and are a means to lower student stress/anxiety.

The use of low arousal work and testing spaces in MHCBE schools is a proactive regulation strategy and is guided by the following principles:

- a. The use of space should be discussed and agreed upon with the parents and students (in accordance with their age and level of understanding). Purpose for the use of the space and frequency of use should be documented in the student's ISP.
- b. Sensory and environmental clutter should be reduced as much as possible in the space.
- c. Students should always have a choice whether or not to access the space. There should be no physical or other restrictions preventing the student from leaving the space.
- d. Pupils must be supervised at all times while using a space.

“Pull-out” refers to implementation of individualized programming which occurs in an Individualized Programming Space outside of the student's classroom. Where it has been determined that outcomes or interventions designed for an individual student cannot be optimally met in the classroom setting, and alternative learning environment may be accessed.

For a student to receive instruction or intervention in an alternate learning space the following criteria must be met:

- It has been demonstrated that the learning cannot optimally occur in the student's assigned classroom.
- The use of an alternative learning space has been discussed and agreed upon with parents and student (in accordance with their age and level of understanding. Purpose for the use the space and frequency/conditions of use should be documented in the student's ISP.

- There is a plan in place to transfer skills learned in an alternative learning setting to the inclusive classroom context.

5. Medical, Therapy, and/or Personal Care Space – Guiding Principles

Some personal care, medical, and therapeutic tasks can and should be carried out within the natural learning environment. Others will have to happen away from the general education spaces, sometimes in a specialized space.

The following guiding principles will serve to uphold the safety and dignity of students and staff:

- a. The student should be ensured full privacy for any care or therapy that requires removal of clothing (i.e. only child and necessary adults should remain in the space and privacy screens or curtains should be used if there are windows in the room).
- b. Visual privacy (doors, portable screens, blinds, curtains) should be used to ensure the dignity of the student related to specialized care or therapy.
- c. Specialized care and therapy that is delivered in alternative spaces should not be discussed in a way that students or staff not involved with the care/therapy could overhear.
- d. Care and therapy should be delivered in a way that facilitates movement toward the student gaining skills in directing their care.
- e. Immediate access for safe disposal of waste and hand-washing for staff should be available in spaces that are used for medical or personal-care procedures.
- f. Secure, known, documented, and safe storage spaces and plans should be in place for students who require medical equipment (epi-pens, suctioning equipment, emergency trach replacement kits...etc.), medicine (refrigerated or locked) and g-tube equipment and feeding supply storage. Documentation of this information should be included in the Student's Medical Support Plan.
- g. A suitable and respectful place for resting or recovery after a seizure should be part of the medical emergency plan for any student who is known to have seizures.

6. Junior/Senior High Student Support Space – Guiding Principles

The spaces support students who are struggling to be more successful within the context of the school environment. Students who access these spaces will have a written support plan. The plan is a collaborative document that is designed to share key information about a student with staff who work with the student. The plan will be developed with input from the student, staff, parents and outside agencies when applicable.

The use of these support spaces in MHCBE schools may be either a proactive or responsive strategy and is guided by the following principles:

- a. Staff assigned to the support space have a key healthy adult connection to students who access the space.
- b. The school-based team, including staff assigned to the support space, will monitor student progress through any combination of informal ongoing monitoring, Check-in/Check-out, Term Reports, Anecdotal Notes/Checklists,

and/or Team Collaboration Meetings. Students and families will be connected to needed school and community supports (including mental health) when deemed necessary through monitoring processes.

- c.** The student is able to autonomously access the space as an alternative learning environment or regulation space on as-needed basis. Procedures for accessing and using the space in this way will be included in the student support plan.
- d.** The space may be used to implement any support components of the school's progressive discipline procedures, including, but not limited to, facilitating development of self-regulation skills, social-emotional learning, academic or organizational support, strategy development, working with students using principles of SIVA, restorative justice or collaborative problem solving (Ross Greene), providing an alternative classroom space during times of stabilization or reflection...etc.
- e.** Staff will support the process of de-escalation, regulation, problem solving and restoration on an as-needed basis. The student will be supported to develop problem solving and self-advocacy skills that help him/her learn acceptable alternatives to inappropriate behavior and work habits.

Reference: Section 20, 60, 61, 113 School Act