

ALIGNMENT

Arkansas Adds New Requirements for the Use of Restraints in Schools [2021 Arkansas Laws Act 1084 (H.B. 1610); Adopted and Effective 04/30/21]

Alignment to Crisis Prevention Institute, Inc.
(CPI) Training Programs

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Alignment to Crisis Prevention Institute, Inc. (CPI) - *Nonviolent Crisis Intervention*®, 2nd Edition Training Program (NCI™)

For 40 years, CPI has supported education organizations that strive to provide the safest environment for staff and students. Not only will the NCI™ 2nd Edition Training program meet the requirements in Arkansas, CPI's train-the-trainer program and its family of advanced programs also offers a comprehensive array of curriculums that can meet all the needs an organization has for supporting a violence-free space in school districts, with an emphasis on crisis intervention and de-escalation techniques to better assist staff with achieving this goal.

Additionally, by participating in the NCI™ 2nd Edition Training program, staff will gain the skills and confidence necessary to handle crises with minimal anxiety and maximum security. The training will help staff intervene more safely when behavior become dangerous and most importantly it won't damage the educational bond a teaching staff has worked so hard to establish with their students.

The following chart is designed to assist you in identifying some of the ways in which CPI's NCI™ 2nd Edition Training program can help school organizations in the state of Arkansas comply with the new requirements regarding the use of restraint. It may also assist you in identifying areas that may require a review and/or revision in your school organization's policies and procedures.

Definitions

“Crisis intervention” means the implementation of a service, support, or strategy to:

- (A) Immediately stabilize a crisis; and
- (B) Prevent the crisis from reoccurring after the crisis ends.

“Crisis Intervention Training Program” means a program that:

- (A) Provides training using effective evidence-based practices in:
 - (i) The prevention of the use of physical restraint on a student;
 - (ii) Keeping school personnel and students safe when using physical restraint on a student in accordance with the law;
 - (iii) The use of data-based decision-making, evidence-based positive behavioral intervention and support, safe physical escort, conflict prevention, behavioral antecedents, challenging behavior de-escalation, and conflict management; and
 - (iv) First aid, including without limitation recognizing the signs of medical distress and administering cardiopulmonary resuscitation.
- (B) Requires certification, including without limitation periodic renewal of certification in the practices and skills necessary for school personnel to properly implement the Crisis Intervention Training Program.

“De-escalation” means the use of a behavior management technique that helps a student increase his or her control over his or her emotions and behavior and results in a reduction of a present or potential level of danger that in turn reduces the level of imminent danger of serious physical harm to the student or others.

“Physical restraint” means a personal restriction that immobilizes or reduces the ability of a student to move his or her torso, arm, leg, or head freely. “Physical restraint” does not include a physical escort.

“Prone restraint” means restraining a student in a face-down position on the floor or another surface and applying physical pressure to the body of the student to keep the student in the prone position.

“Supine restraint” means the restraint of a student in a face-up position on his or her back on the floor or another surface and with physical pressure applied to the body of the student to keep the student in the supine position.

- (b) (1) School personnel shall use the least restrictive technique necessary to end imminent danger or serious physical harm to a student and others.
 (2) The ability of a student to communicate shall not be restricted unless the use of a less restrictive technique by school personnel will not prevent imminent danger of serious physical harm to the student or others.

(c) When using a crisis intervention procedure or technique, school personnel shall consider the health and safety of a student, including without limitation whether the student has an existing medical condition that makes the use of physical restraint inadvisable.

(d) Supine restraint shall not be used unless:

- (1) The school personnel administering the supine restraint has been trained by a person who is certified by a training program that meets the criteria specified in AR ST § 6-18-2209; and
 (2) A person who is certified by a training program that meets the criteria specified in AR ST § 6-18-2209 determines that supine restraint is required to provide safety for the student and others.

(e) If physical restraint is used on a student, the student shall be continuously and visually observed and monitored while he or she is under physical restraint.

(f) When using physical restraint on a student, school personnel shall:

- (1) Use the safest method available and appropriate to the situation;
 (2) Use the amount of force that is reasonably necessary to protect a student or others from imminent danger of serious physical harm to the student or others; and
 (3) Not verbally abuse, ridicule, humiliate, taunt, or engage in any other similar action towards the student.

(g) Physical restraint of a student shall:

- (1) Be used for a limited period of time; and

The NCI™ 2nd Edition Training Program uses both verbal and physical interventions. We train that the least restrictive form of intervention should always be considered and utilized first, prior to the use of any physical restraint.

CPI does not teach interventions designed to restrict or inhibit a student's ability to communicate. However, if a student's behavior is a risk to themselves or others, as a last resort, the staff might utilize emergency interventions that result in restriction of hands and arms. As a result, a student whose primary method of communication requires the use of their hands could be impaired.

Interventions taught by CPI have been designed to minimize the risk of injury to students and staff. As such, interventions are meant to be free of pain and do not include the use of pressure points or joint locks. While no intervention is completely free from risk of injury to students or staff, all of CPI's interventions have been independently assessed for risk of psycho-social, soft tissue, joint, structural, neurological, cardio-vascular and respiratory injury to both students and staff.

NCI™ 2nd Edition With Advanced Physical Skills teaches staff to respond to high-risk behaviors that result in a student going to the floor in a supine position. However, these skills are taught as a response to a student's behavior and are not taught as a method to force or take a student to the floor. The CPI Supine position is designed to temporarily manage a student engaged in high-risk behavior until the student can be moved to a safer position.

CPI teaches that all interventions should be continuously monitored face-to-face to assess the level of imminent risk and signs of distress that may occur when using restraint and/or seclusion.

It is the core belief of CPI that every effort should be made to prevent the need for physical restraint. We teach that physical restraint should only be used as a very last resort when all nonphysical options have been exhausted. For last-resort circumstances, we teach safer, nonharmful restraint techniques that are the most adaptable in the industry.

CPI teaches that all emergency interventions should end at the earliest possible moment, when the pupil is no longer an imminent risk to the physical safety of self or others.

<p>(2) Not be used:</p> <p>(A) When imminent danger or serious physical harm to the student or others dissipates or a medical condition occurs that puts the student at risk of harm;</p> <p>(B) Unless the behavior of the student poses an imminent danger of serious physical harm to the student or others;</p> <p>(C) After the threat of imminent danger of serious physical harm to the student or others dissipates; or</p> <p>(D) In the following manner:</p> <ul style="list-style-type: none"> (i) To punish or discipline the student; (ii) To coerce the student; (iii) To force the student to comply; (iv) To retaliate against the student; (v) To replace the use of an appropriate educational or behavioral support; (vi) As a routine safety measure; (vii) As a planned behavioral intervention in response to behavior of the student that does not pose an imminent danger of serious physical harm to the student or others; (viii) As a convenience for school personnel; or (ix) To prevent property damage unless the act of damaging property committed by the student poses an imminent danger or serious physical harm to the student and others. <p>(h) School personnel shall not use the following on a student:</p> <ul style="list-style-type: none"> (1) Mechanical restraint; (2) Chemical restraint; (3) Aversive behavioral interventions that compromise health and safety; (4) Physical restraint that is: <ul style="list-style-type: none"> (A) Life-threatening; or (B) Medically contraindicated unless the behavior of the student poses an imminent danger of serious physical harm to the student or others; or (5) Prone restraint or other restraint that restricts the breathing of a student. 	<p>CPI trains that restraints should only be used when a person poses an immediate threat of harm. When a person no longer presents a potential for harm to themselves or others the restraint should be immediately discontinued.</p> <p>CPI training programs are built on the fundamental principles of <i>Care, Welfare, Safety and SecuritySM</i> for students and staff alike. Abuse of any kind including the infliction of emotional trauma, humiliation, and other verbal abuse is not consistent with the tenants of our programs.</p> <p>CPI does not endorse or train the use of mechanical or chemical restraints.</p> <p>CPI's interventions are designed to allow a student in crisis to breathe freely and without obstruction. CPI's interventions do not utilize skills that apply pressure to the neck or torso, which can compromise the ability of the student to breathe.</p>
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AR ST § 6-18-2209. Crisis Intervention Training Program-Criteria	Correlation with NCI™ 2nd Edition Training
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<p>A program used by a school district to train school personnel on the use of physical restraint on a student shall:</p> <ul style="list-style-type: none"> (1) Teach evidence-based techniques that are shown to be effective in the prevention and safe use of physical restraint; (2) Provide evidence-based skills training relating to positive support, conflict prevention, de-escalation, and crisis response techniques, including without limitation: <ul style="list-style-type: none"> A) Guidelines on understanding when there is an imminent danger of serious physical harm to a 	<p>The NCI™ 2nd Edition Training Program uses both verbal and physical interventions. We train that the least restrictive form of intervention should always be considered and utilized first, prior to the use of any physical restraint. Within this training, we also introduce a risk assessment matrix which helps staff to consider what level of intervention to utilize based on the level of risk. The <i>Decision-Making MatrixSM</i> and Physical Skills Review both assist staff decision-making in the use of physical restraints. The physical restraints include lower-, medium-, and higher-level holding skills to safely manage risk behavior. Our Advanced Physical Skills course also includes the use of Emergency</p>
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student or others;

(B) Guidelines on when to intervene when there is an imminent danger of serious physical harm to a student or others;

(C) An emphasis on safety and the respect for the rights and dignity of each person involved in an incident that involves the use of physical restraint on a student;

(D) An emphasis on using the least restrictive form of intervention and taking incremental steps in an intervention;

(E) The provision of updates on information concerning alternatives to the use of restrictive interventions;

(F) Strategies for the safe implementation of restrictive interventions;

(G) The use of emergency safety interventions that include without limitation continuous assessment and monitoring of the physical well-being of a student and the safe use of physical restraint throughout the duration of a restrictive intervention;

(H) Prohibited procedures;

(I) Debriefing strategies, including without limitation the importance and purpose of debriefing; and

(J) Documentation of methods and procedures concerning the use of physical restraint on a student.

- (3) Be competency-based and include measurable learning objectives, measurable testing using written documentation of behavior and observation of behavior on the objectives of the testing, and measurable methods to determine passing or failing the program;
- (4) Require recertification at least biennially.

Floor Holding which is designated as higher-level holding. Beyond physical restraints, CPI does not teach or speak to any other form of restraint (such as mechanical or chemical).

CPI's train-the-trainer model ensures that the training and the related materials are easily customizable to meet the needs of the staff engaged in the training and provides practice, roleplaying real-life scenarios, and problem solving activities to ensure that staff remain engaged in learning. In addition, our eLearning offerings are designed to be highly interactive and engaging and incorporate numerous learning strategies effective with adult learners. Our train-the-trainer model, coupled with either our highly customizable classroom materials or our interactive eLearning offering makes it easy to rollout training to a large number of staff.

CPI advocates for refresher training to take place at least annually. To help you with this, CPI has the largest selection of refresher courses to not only refresh your staff in existing content, but to give them new skills as well. Topics ranging from trauma-informed care to communicating with those who have autism spectrum disorder can help you refresh and expand staff confidence and competency when intervening in crisis situations.