DOCUMENT RESUME

ED 444 080 CG 030 230

AUTHOR Torem, Chris

TITLE Crisis Intervention & Non-Violent Restraint: What's Your

Action-Step?

PUB DATE 2000-03-00

NOTE 17p.; Paper presented at Annual Conference of the National

Association of School Psychologists (New Orleans, LA, March

28-April 1, 2000).

PUB TYPE Guides - Non-Classroom (055) -- Speeches/Meeting Papers

(150)

EDRS PRICE MF01/PC01 Plus Postage.

DESCRIPTORS *Crisis Intervention; Elementary Secondary Education;

*Ethics; *Federal Legislation; *State Legislation; Suicide;

Training; Workshops

IDENTIFIERS *Physical Restraints; *Rhode Island; Self Defense

ABSTRACT

This article is a written version of a workshop on crisis intervention and non-violent restraint. It is geared towards staff responding to crisis calls, and the supervision of crisis intervention in public schools. Reaction to death threats, bomb scares, and weapons are discussed. The NOVA and NEAT principles are briefly integrated into this subject matter. This document examines updated federal and Rhode Island laws and legal bills, the IDEA regulations, the logistics of time-out and time-out rooms, deceleration techniques/non-physical crisis interventions, physical escorts, and proper humane physical restraint. The legal position of several Rhode Island lawyers and the State Department of Educational Advocates were integrated into the program. Additional "real life" examples are included. When training individuals, demonstration and ongoing practice are both imperative portions of this type of staff training. (Contains 16 references.) (MKA)



NASP 32nd Annual National Convention March 30, 2000 New Orleans, Louisiana

MS002 Crisis Intervention & Non-Violent Restraint What's your action-step? U.S. DEPARTMENT OF EDU

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

C. TOREM

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

Chris Torem
School Psychologist
West Warwick School Department
West Warwick RI 02893
(401) 822-8432

U.S. DEPARTMENT OF EDUCATION Office of Educational Research and Improvement EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

- ☐ This document has been reproduced as received from the person or organization originating it
- Minor changes have been made to improve reproduction quality.
- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

Abstract: This article is a written version of the workshop on Crisis Intervention and Non-Violent Restraint. This presentation is also an updated version of the Crisis Intervention and Non-Violent Restraint Mini-skills workshop, presented at the NASP 31^{st and 32nd} Annual Conventions and the ABA 26th Annual Convention. This document is geared towards staff responding to crisis calls, and the supervision of crisis interventions in public schools. A reaction to death threats, bomb scares and weapons have been added to this revised version. The NOVA and NEAT principles are briefly integrated into this subject matter. This document examines updated Federal and Rhode Island laws and legal bills, the IDEA (97) regulations, the logistics of time-out and time-out rooms, deceleration techniques/non-physical crisis interventions, physical escorts and proper humane physical restraint. The legal position of several Rhode Island lawyers (including The Disability Law Center) and the State Department of Educational Advocates were integrated into the program. Additional "real life" examples were included. When training individuals, demonstration and ongoing practice are both imperative portions of this type of staff training.

Legal and Ethical Issues

When examining crisis interventions and non-violent, humane restraint, the training always begins with legal and ethical issues. In Rhode Island, there does not seem to be any documented cases involving restraint in our legal system at this time. The Rhode Island Disability Law Center, the State of Rhode Island Educational Advocate's Office, consultations with private lawyers, one paralegal (1998) and NASP convention personnel, provided much of the following legal information. Some of the Rhode Island cases that never made it to the litigation stage did involve the misuse of physical restraint, timeout and in one case, a parent notified me that her child was "tied to a chair with a shirt." Local parent advocate groups have provided similar stories. Fortunately, although one case is one case too many, these reports of misconduct in Rhode Island have been fairly low in frequency. At this time, the Rhode Island Department of Education's I.D.E.A. regulations are still under revision. Currently, the Rhode Island regulations do not formally address physical restraint.

This crisis and physical restraint training is approved yearly by the Rhode Island Department of Education (RIDE), and converts into five "contact hours" of professional development towards RIDE's re-certification in "related fields." Furthermore, this author served (summer of 1999) on the State of Rhode Island's Ad-Hoc, Physical Restraint Committee. This was through The Rhode Island Technical Assistance Project. The mission of this committee was to provide recommendations to R.I.D.E., in the area of crisis intervention and non-violent physical restraint. The recommendations from this committee will be referenced in the new state IDEA regulations under the School-Health Services



section. The terminology used is "suggested guidelines." The recommendations from this committee will additionally surface throughout the subject matter.

In terms of what is addressed in the current Rhode Island General Law (RIGL), number 16-11.2-2. titled "Qualifications of Teacher Assistants," - Section E reads: "Demonstrate knowledge of basic instructional methods and behavior management techniques, including teacher assistant/teacher collaboration (History of Section. P.L. 1996, ch167, 1.)." Many staff members involved with crisis intervention appropriately question the legalities and safeguards of physical interventions. The Rhode Island General Law does provide some protection for staff members that intervene in crisis situations. Number 9-1-31, reads; "...each school committee and the board of regents shall protect and save harmless any public school teacher or any supervisor or administrator..." who faces litigation, as long as the staff member's actions were not "...reckless, malicious, or grossly negligent, as determined by a court of competent jurisdiction.... " Another section of RIGL Number 9-1-31 reads, "... within the scope of their employment or under the direction of the school committee.... To put it briefly, staff members are expected to act in a professional, ethical, reasonable and responsible manner. Private schools are encouraged to develop a human rights committee to review crisis cases, events and policies.

The West Warwick School Department (Rhode Island) has a Special Education Procedure Manual written by the former Special Education Director, Robert M. Sherman. This document has been presented to the school committee and includes a policy on interventions in the case of possible physical harm. Page 17 of the manual (last revised summer of 1999) reads: "Physical assistance by staff should be applied only to the extent necessary to create a safe condition for that student and others in the environment. In all cases, the level of staff assistance is to be determined by the staff on site at the time of the disturbance who must assess the student's behavior and determine the level of assistance to be provided." The general consensus seems to be that physical interventions should only be employed when a child is a danger to him/herself or others. This author also adds, "when the behavior is a, documented over time, direct antecedent to dangerous behavior." Documented refers to several incident reports, point card notations, graph notations... It is recommended that this type of data taking occur over at least a two week time period, depending on the behavior. Direct antecedent refers to the immediately proceeding behavior in the chain.

level, legal citation found on the Internet On national one (http://leginfo.leg.wa.gov/pub/rcw/title 09a/chapter 016/rcw 9a 16 100), dated 6/02/98, indicated that the state policy was "to protect children from assault and abuse and to encourage parents, teachers, and their authorized agents to use methods of correction, and restraint of children, that are not dangerous to the children. However, the physical discipline of the child is not unlawful when it is reasonable and moderate and is inflicted by a parent, teacher, or guardian for purposes of restraining or correcting the It is important to note that different states may have completely different Another legal citation, positions on this matter. found on the (http://www.atl.org.uk/press/pn9814.html), was titled; "ATL (Association of Teachers and Lecturers) welcomes excellent advice on restraint." An excerpt from that site reads: "...ATL's head of legal and member services, Martin Pilkington, said: This is just the kind of thing that we need. Since the Children act, some teachers have not known what they can do when a pupil is being intolerably disruptive, or have not felt safe in shepherding a pupil around the school. This is clarification of what the law actually says and such it is thoroughly welcome. The Government is being quite brave by setting out when it would be legitimate to use reasonable force." This piece gives some "incredibly helpful examples, such as pupils fighting or a pupil persistently refusing to leave the classroom. Teachers will also be reassured to know what they can do when pupils are in danger of injuring themselves or others. Teachers do have a duty to care and respond, as a reasonable parent would." Mr. Pilkington added "The Association would have liked to see more advice for teachers dealing with Emotionally and Behaviorally Disturbed pupils. There would also be major implications for training. Techniques for restraining pupils



need to be taught and this cannot be done in an hour after school. It will be expensive." Note the reference to "in loco parentis."

Finally, if a trained staff member acts responsibly, ethically and professionally in a crisis, some protection may be sought under the Good Samaritan-Immunity from Liability Law (RIGL, 9-1-27.1.).

Two important questions frequently arise. One, "If I don't feel I can physically restrain this student, then what?" and two, "I am not certified in restraint, can I still physically intervene?" First, addressing the certificate issue, this author is in support of continued/ongoing training, and is against certification. Having the certification does not quarantee it can be done correctly. If a school psychologist is certified to evaluate students PK through 12, then the psychologist should be able to evaluate most students in those predetermined grades. Conversely, if someone is certified to physically restrain, it does not ensure that the certified person can properly restrain anyone. It is described this way; you are a person with a certain amount of knowledge, experience, training, reaction time, size and strength. You may respond to, or have in front of you, a potentially (or already) dangerous situation. If (by you physically entering that situation) you will improve the safety of that situation, then physically entering the situation is one option. If a staff member assesses, that she/he will not improve the safety of the environment, then she/he is responsible for taking another action-step towards safety. Physical restraint is a safety procedure only. If one cannot link it directly to an individual being a 'danger to oneself or others,' then it is unethical to even consider physical restraint. Furthermore, only staff skilled in deceleration techniques and positive behavioral support techniques should be regularly employing physical restraint procedures. These professionals can choose which intervention is most appropriate. Whenever possible, the least restrictive procedure should be attempted first. Physical restraint is about taking good action-steps and professional decisionmaking; it is not solely about individuals with the needed physical attributes and training in physical restraint procedures. Sometimes, "if all you have is a hammer, everything starts to look like a nail."

One important safeguard to remember is, always have the door open, and/or have two staff members present, when performing any physical interventions.

Deceleration Techniques

When staff members react to a crisis situation, there are some extremely important points to remember. First, don't take things personally. Remember that you are the professional, they are often children/young adults with emotional needs. Second, gather control of your emotions. If this is not possible, then let someone else direct the action-steps in the crisis until you are able to do so. Treat, for example, verbal behavior as verbal behavior regardless of what is said. Behavior is either appropriate or inappropriate. Some attention must be given to the setting. Behavior ignored in the self-contained room may be different from behavior ignored on a field trip. Don't over or under-react, depending on what particularly is stressful to you. One example this author always uses during training is the student that comes to class late. (Playing the role of the teacher) One student walks into class tardy and makes a comment about the teacher's long hair, this does not bother the teacher, and hence the student is told to sit down and not to be late the next time. Another student may be just as tardy, however, this student comments on the teacher's male pattern baldness. This student is ejected from class and sent to the office for disrespect and tardiness. Generally speaking, do not correct, punish or use restraint out of anger or stress.

Pick and choose your battles, some expectations may be too high for a particular individual, or too high at a certain time for a particular individual. As B.F. Skinner has stated, "Meet the rat, where it's at." One example is the non-compliant child that comes into school in the morning. Staff often have no idea what went on that morning



before school or what went on the night before. With what research shows on the rates of child abuse, the answer to these previous two questions might be alarming.

Be respectful, even if the students do not return the respect. If you treat students with respect, they are more apt to respect you. Before any verbal behavior occurs, we must pay close attention to the environment and our own non-verbal behavior. Personal space is extremely important. Everyone has a comfort zone around her or him. The comfort zone increases and/or decreases in size, depending on your relationship with the student. You may be able to get as close as one foot to a familiar student and not increase their discomfort. With an unfamiliar student, three feet or more may be needed to keep the comfort level. It depends on the players and the playing field. During a stressful situation, comfort zones usually increase in size.

Non-verbal communication is more powerful than verbal communication. The example this author uses during his presentation is by stating, "You are such a jerk," to one of the members of the audience. It is said in a way that is non-threatening. This author moves away from the targeted member of the audience, shifting weight to the back foot. It is often accompanied with a "who cares like" hand wave. Then this author yells, "I really like you!" in someone's face. This author points his finger and leans forward with a tense facial expression. After a pause, " a lot!" is loudly added to the phrase. The point is well remembered. Incidentally, repetitively pointing your finger at a student, as you are verbally correcting them, is not only inappropriate but also aggressive.

This is all part of the environmental analysis. Remember, if more than one student is in crisis; deal with the most dangerous student first. Then look for group facilitators or anarchy catalysts. These individuals are sometimes not the ones that stand out as you first view the setting. Then begin to quickly formulate a plan. Watch the staff and students non-verbal communication. Body postures, facial expressions, movement, or lack of movement, will often tell you more about the individuals emotional state then the verbal behavior will. Focus on what people are doing before you focus on what they are saying. Finally, use a filtering process. Decide what cannot happen or continue to happen. Decide what options each child does have and look at your available resources (number of staff members, extra rooms, and corridors...). One real life example was when a mother dragged an anxious fifth grade male student into school. The student would not let go of his mother's leg. What cannot happen? Well, since it is the law that children must attend school, he cannot go home. What can happen? The child could start the school day in a place within the school were he feels most comfortable. Where to go within the school, can be his first choice. The separation was a struggle during the first episode. The physical struggle was short in time and fairly low in intensity. The physical struggle only occurred once and did not lead into a physical restraint. The student did not immediately go to class and many other deceleration techniques were employed. Overall, once the child understood that returning home was not longer an option, the child began to attend school on a regular basis.

Someone should always act as the team leader. This responsibility lies with the principals, teachers, and paraprofessionals and support staff. Crisis staff need to make an assessment of the full environment, including the staff members on site. With some teachers or staff, this author merely states, "What can I do to help?" or "What needs to be done?" In other situations, this author quickly realizes he must act as the team leader. In these cases, the crisis staff member must make strong, quick, assertive recommendations to the surrounding staff. Most of the time, staff members will not take offense and they often appreciate the direction. Before you take your action-step, gather control over your emotions. If you are out of control, upset and/or emotional, it is likely that you will not be helpful to anyone. Decide what to do, to make the environment more safe. Consider your relationship to the students and staff involved. Again, don't over-react or under-react. This author recommends taking the lead or at least gathering some information, from the first person involved in the situation. Staff members here must empower each other, no matter what the rank.



Verbal behavior is often your first overt deceleration mode. Remain calm and particularly use a calm voice. There has been research on startle, however it is often not recommended in a crisis. If possible, remove the audience. Remember that most adolescents will go to jail, or be suspended... before they "lose face" in front of their peers. Allow older students to "save face" whenever possible. Couple a calm voice with confident, respectful, assertive, non-threatening actions. Pay attention to your body language. This is sometimes enough to diffuse many crisis situations. Use a simple (one-part) direction, identify which behavior is inappropriate, and tell the student what she or he should be doing. Informing the student only of what is not acceptable makes the assumption that the student (in an irate state) knows the appropriate course of action to take and is capable of taking that course of action.

After the initial verbal statement, see how the student reacts. It is sometimes helpful to permit verbal venting. One technique is, as the student's voice becomes louder; your voice becomes softer. When analyzing verbal venting, use this benchmark: Is the unwanted verbal behavior increasing or decreasing with time? If the student is calming down, continue to allow the verbal venting. If the student is becoming more irate, take another action-step. Clarifying messages with questions or silence is at times helpful. One example may be, "Are you telling me you are not ready for class?" Finally, ignore the challenge. Remember, don't take it personally; ignore any challenge that may now be set. In a crisis, the behavior often has nothing to do with you. You are the professional; they are the students with emotional needs. A tall staff member was monitoring a time-out procedure with a dangerous adolescent. The adolescent informed the staff member that the only reason he was hired was because he was tall. The staff member calmly responded, "I know," and said nothing else. The time-out ended shortly afterward.

Next, reality-test. Using Dr Glasser's classic work (1965), tell the student what will happen if he or she continues to misbehave, and what will happen if he or she stops the misbehavior. Make sure your consequences are realistic, enforceable, and when possible, a natural consequence (Dinkmeyer, et al., 1997). Don't tell the student that he or she will be suspended if you do not have the power of suspension. Provide as many choices to him/her as possible. Don't give a choice when the student does not have that choice. Remember that choices are one positive change agent for misbehavior with a control function. Allow time for the student to decide. Finally, in order to develop stimulus control over your students, they must be able to trust you and your word. Follow through on your accelerating (reinforcing) and decelerating (punitive) consequences.

Do not counsel or instill oral development at this time. The building of ethics and character are both part of the original Seven Cardinal Principles of Education. It is not recommended that you give them up, but do not attempt to make progress in this area during a time of crisis. Forced apologies lack substance and at times make things worse. Debriefing should occur when the situation is no longer a crisis and appropriate consequences have already been administered. This is an excellent time to ask the student what he/she could do differently in a similar situation.

When re-acting to a fight, analyze the situation. Do not get between the combatants. If you are the only staff member on site, get or send for assistance. Attempt to remove the audience and separate the aggressors. The use of distraction is extremely helpful in breaking the behavior chain. A perfect example was utilized in the motion picture "Saving Private Ryan." Two soldiers in the same unit were about to shoot each other. The highest-ranking officer (played by actor Tom Hanks) calmly asked the group, "What is the pool up to now." This is a subplot that has been previously well established. The betting-pool question was what profession was the group leader (Tom Hanks) in before the service? The group calms slightly and he states that he was a teacher. If possible, use verbal interventions first. Startle can be an effective way to break a behavior chain. With startle, the more one uses it; the less effective it becomes. Finally, humor may be used to break behavior chains. Staff regularly working on crisis teams must have a sense of humor. This technique must be performed tastefully. Humor additionally may help staff debrief after a crisis. It is extremely important that this is not done at a student's



expense. Staff should briefly meet afterwards to share the specifics of the event, analyze and evaluate the interventions, and agree on a prevention plan in case a similar crisis occurs. This may be a different course of action or confirming what was done was an appropriate, ethical course of action.

Some supplementary recommendations are made when a staff member faces a weapon. addition to analyzing the situation and remaining calm, focus on the person, not the weapon. Negotiate and buy time. Avoid rushing the individual. This is also a good time to provide personal space. Finally, if shooting begins, encourage everyone to "hit the deck" or get on the ground. This author has faced several guns. One was in the parking area of a local Rhode Island nightclub. A personal friend owned the nightclub and this author was assisting with club security. Two groups of adult males looked as if they were beginning an altercation in the parking area. This author approached the scene to attempt some verbal deceleration techniques. During the approach, one individual went and retrieved a handgun from his car. He approached the other group, gun in hand, verbally venting and threatening to shoot a member or two, of the other group. His anger or at least verbal behavior was apparently related to some previous "road-rage." point, this author happened to be among the two groups. With seemingly no other viable choice, and giving plenty of personal space, this author calmly and confidently said in a non-threatening manner, "I don't know what you are going to do man but you can't do it here." The armed aggressor irately responded by swearing and expressing strong feelings regarding the other person's driving habits. This author agreed with the man with the gun and added, "... but this is neutral territory man, whatever you are going to do, you can't do it here." After what seemed like a long pause, he said, "OK, your cool." He gathered his comrades, walked to his car and drove off. Of course this intervention is not encouraged unless the crisis intervener has seemingly no other choice.

All in all, be flexible. Even the best systematized disciplinary approach is just a framework. It won't work well for all students. Systematized disciplinary procedures need to be individualized, considering the students, staff and other aspects of the environment.

Time-out (from reinforcement)

Time-out (from reinforcement) procedures offer teachers three levels of behavioral interventions. One is recommended as a safety procedure, and the other two as an often-natural consequence used to reduce disruptive behavior. They consist of isolation in a time-out booth (referred to 'seclusion' in the current Federal Bill HR 1313), removal from the main body of students and remaining in the group while being unable to earn the same reinforcers as the other students.

These time-out interventions are well-researched punishment (Type II) procedures. With each different level, access to reinforcement is withdrawn for a certain period of time. A meta-analysis of interventions (Stage & Quiroz, 1997) reported a 78% reduction of disruptive behaviors in public school classroom settings using time-out and over-correction procedures. While some researchers describe time-out as "a controversial procedure prone to abuse (Harris, 1985 as sited in Stage & Quiroz, 1997)," pediatricians gave time-out the highest rating of acceptability over five other interventions for the treatment of oppositional behavior (Arndorfer, Allen & Aljazireh, 1999). It is also taught as an ethical procedure for parents to employ in the popular writings involving "1,2,3-Magic."

Research has been completed on three different types of time-out procedures. First, and most restrictive, is the isolation or seclusion type of time-out. Reinforcement is withdrawn and the subject remains in a separate room, usually a small room or booth, for a certain period of time. The small room or booth may or may not have a door. Bigelow, et.al. (1974) used a time-out booth to decelerate alcohol consumption with chronic alcoholics. Costenbader & Reading (1995) removed students from their classroom and placed them in a "secluded room" when dealing with severely disruptive behavior. A less



restrictive type of time-out is the exclusionary time-out. Reinforcement is withdrawn and the student remains in a separate classroom or separate section of the main classroom (in which the rest of the class remains), for a certain period of time. Lahey, et al., (1973) decelerated obscene vocal tics and facial twitches in a 10-year-old boy by using a room adjacent to the main elementary school classroom. Finally, nonexclusionary time-out occurs when reinforcement is withdrawn and the student remains in the classroom, but may be removed from the activity (in which the rest of the class is engaged in), for a certain period of time. Doleys, et al., (1976) used the corner of the room as an area for non-exclusionary time-out for non-compliant students. Foxx & Shapiro (1978) used the well known "ribbon procedure," as a form of non-exclusionary time-out. Here children were not removed from the activity. In this study, children without ribbons would remain included in the activity, but would not receive the normal reinforcers. Results show that removing a child's ribbon for three minutes significantly reduced disruptive classroom behavior. The separation among the three types of time-out procedures is sometimes partly subjective.

More latitude is given to teachers and clinicians when employing the latter two types of time-out. This author supports using exclusionary and non-exclusionary time-out as part of Positive Functional Behavior Plans. Obviously these plans would emphasize a variety of reinforcement procedures for the building of replacement behaviors. When using isolation or the seclusion type of time-out, some safe guards are both recommended and necessary. This author does not support the use of isolation or seclusion time-out, as an intervention to decelerate unwanted behavior. The use of isolation or the seclusion type of time out is exclusively reserved for safety situations. This intervention is often a favorable alternative to a possible physical restraint procedure. As with the use of physical restraint, the use of isolation or seclusion time-out is only appropriate when it is used for dangerous behavior and/or a documented, direct antecedent to dangerous behavior. Staff skilled in other deceleration techniques should be the only ones that employ the isolation or seclusion time-out procedures. An expert in this area should train, and retrain, these staff members on a yearly basis, at the least. In addition, the continued use of isolation or seclusion time-out is only justified after an in-depth functional analysis and a positive behavior plan has been implemented. The frequent use of seclusion or isolation time-out requires ongoing attempts at prevention plans. It is also unethical to use any aversive or punishment technique without the use of a higher rate of positive reinforcement techniques.

In terms of the physical structure of an isolation or seclusion time-out room, the rooms need to be well lit, well ventilated and temperature controlled. Page 81 of Rhode Island's current regulations (I.D.E.A.), requires the delivery of services to be in a facility that is "properly ventilated, heated, or cooled and lightning shall be adequate throughout." The lighting, ventilation and temperature of the small room or booth should be extremely close to that of the main classroom. A room with a window or without a door is necessary for constant 100% staff monitoring. I do not recommend the one-way peepholes that are often used in apartment complexes. If the isolation or the seclusionary type of time-out room has a door, it cannot have a lock. Mechanical holds are acceptable if, and only if, when the staff member releases the device (stops holding the handle); and walks away, the mechanical hold automatically releases. Some written, signed documentation of Incident reports are acceptable, however, a signed log with the event is essential. time-in, time-out and direct antecedents, is often more helpful in the analysis of environmental determinates (Touchette, MacDonald, & Langer, 1985). Parental notification is necessary. This may occur after each incident, or there may be a mutual understanding between the teacher and the parent. In this case periodic or weekly notification may be suffice. In the case of periodic notification, both parties must be if full agreement that this frequency of communication is acceptable. If both parent and teacher are not in full agreement, parents then need to be notified each day that isolation or seclusionary time-outs have occurred. It is important to note that dangerous behavior that occurs in isolation or the seclusionary time-out room must be reacted to. Another action-step towards safety must be taken. This may include physical restraint, however the current



Federal Bill HR 1313 (in congress at this time) still prohibits the simultaneous use of seclusion and restraint.

When supervising time-out procedures, there are a variety of principles that must be considered. In Rhode Island, the current State IDEA regulations state; "Any aversive techniques used in therapy or behavior modification programs ... shall be closely supervised by the school psychologist involved with the student (Page 80)." Research shows that short periods of time-out work as well as long periods of time-out (White, Nielson, & Johnson, 1972). In addition to a time contingent exit, a brief work contingent or response (behavior) contingent exit (Patterson & White, 1970) should be added. A non-stressful task may be a positive change agent for inappropriate behavior with an avoidance function. It is also realistic to expect a child to display, safe, controlled, overt behavior, before being released from a time-out area. Debriefing of the incident is necessary, but should be done after the time-out is completed. When the situation is no longer a crisis, debriefing should be attempted. Attempt to debrief in a different environment. Debriefing should never take place during the time-out period. Finally, do not carry over time-out until the next day. Attempt to begin every day anew. In the rare case where it may be necessary to carry over time-out to the next day, make sure the student does not begin his/her school day in time-out.

To decrease the likelihood time-out will reoccur; some additional principles should be kept in mind. First, time-out is time-out from reinforcement. Exposing the student to as little reinforcement as possible will hopefully decrease the likelihood of time-out reoccurring. The amount of people talking, the amount of people in view of the child in time-out, and the physical proximity of the monitors (Van Houten, etal., 1982) may all be significant contributing factors. Attempting to increase the reinforcing proprieties of time-in may also decrease the likelihood of time-out reoccurring. This must be done fairly.

NOVA/NEAT Crisis Response- Death & Suicidal Threats

Many professionals, particularly school psychologists and social workers, receive crisis calls after the crisis has taken place. Specifically, these often involve death/bomb threats, suicidal threats, the knowledge of crimes and a variety of disasters.

The NOVA/NEAT (National) Teams do extensive crisis response training. These national teams have responded to the many publicized school shootings. A quick overview of the crisis response principles (SS-VV-PP) reminds us to first make people feel safe and secure (SS), before allowing individual venting and the validation of their story/reactions (VV). During the validation stage, crisis response team members are discouraged from either self-disclosing or attempting to facilitate the sharing of feelings as one would do in another counseling session. The survivors are encouraged to share sensorial experiences. The survivors are encouraged to "tell their story." Team members should respond with, "I'm sorry this happened" statements and validation. Team members should avoid the word "normal" when responding and attempt to substitute words like common. Finally, the survivors and community are helped to predict and prepare (PP) for the future and help explore what may happen over the next few weeks, months or years. (Taken from the National Organization For Victim Assistance, 1987, 1994, 1998; Community Crisis Response Team Training Manual: Second Edition, Chapter 11: Group Crisis Intervention Techniques.)

In the case of a bomb threat, as one would with a fire drill, remove the students from the building in an orderly fashion. Next, call the fire, police and/or city disaster teams. Your district may want to set up an interagency agreement with your local or city disaster team(s). Let the city disaster teams search the building and make the determination as to whether or not the building is safe. Next, it is recommended that the school department's administration inform the staff and students before they read about it in the newspaper the next day. I recommend dispelling rumors, don't lie, and avoiding the use of the word "bomb." Emphasize the importance of drills and safety. This usually



is more effective when done in small groups. Sometimes the classroom teachers would prefer to conduct a small group meeting on such a topic. In other classes, the teacher (or substitute teacher) would rather have a support staff member inform their class and answer questions that may arise. If a staff member does not have control of his/her emotions, that staff member is not going to be helpful to their students. After this is completed, attempt to have counselors available for particular students and staff that may require more assistance and support. Before the school day ends, staff need to inform (by telephone) the parents of the students that have been most heavily affected. Make sure the school returns to the predetermined schedule by the end of the day. Follow the regular schedule, after a natural break (perhaps after lunch), this will attempt to send a symbolic message (generalization) that the world has not fallen apart.

When the school community must react to the death of a staff member or student, some additional action-steps have been helpful. If the death occurs, after school hours, notify the staff before school begins the next day. Have a staff meeting the next morning and help with the emotional state of the staff members. Here again, teachers may prefer a support staff member to first tell their students. Others may want support staff members to merely be on site and on call. Some students will have more difficulty with the news than others. Small group crisis-response sessions are recommended. The NOVA/NEAT principles (SS-VV-PP) are helpful here as well. Classes and small groups may find it helpful to make cards (or some other item) for the victim's family and friends. Again, make sure the school returns to the predetermined schedule by the end of the day.

This program is not a suicidal prevention or treatment program, however, being a crisis response professional, you may be called when a student threatens suicide or homicide. When reacting to suicidal threats, a few safeguards are recommended. First, release the child only to the parent. If the parent is unavailable or, perhaps working in conjunction with the parent, access the local mental health agency for their suicidal assessment. This is the safest course of action. Make any other decisions with at least one other professional. At the very least, contact the parent and contract with the student for safety. Have the contract written and signed by a professional and the student. Use simple language in the contract. If possible, have the student write it. Notify the school principal about the suicidal threat, if she or he does not know already. Remember it is not confidential in a school system if someone is going to get hurt or if it involves criminal activity (frequently rape or drugs). I remind professionals, even if you are in a school counseling setting, you do not keep criminal activity or personal safety confidential. Before either counseling or a crisis assessment begins, provide the student with the "rules on confidentiality and reporting." These suggestions apply to homicidal threats as well. Additionally, in the case of a homicidal threat, you should notify the parents of the potential victims(s) and make some assessment of police involvement. Your district may have a policy on this already. In 1998, a female high school student wrote a list of students she would have liked to kill. Not every parent on the list was notified and some were irate. An open meeting was held the next day. Both parents and students were in attendance. Parents and students were able to vent. Rumors were dispelled and feelings were validated. They were informed about the action-steps towards safety that had already been taken. Suggestions in the area of prevention were No legal promises were made regarding the case, however a detailed safety addressed. plan was presented.

Your school may want to take a look at the NASP recommendations and develop school crisis response teams.

An Overview of Physical Interventions

It takes training and practice to safely utilize ethical, physical interventions. Any physical hold, release, escort or self-defense move requires proper demonstration and practice first with immobile individuals. Practice then progresses to using compliant individuals in slow motion and then to slightly resistive individuals who are moving



faster. Even staff who are naturally good with self-defense and safe immobilization, need ongoing practice.

As with the use of restrictive time-out procedures, physical interventions are used to keep everyone safe. This is not to say that one must wait until the situation is unsafe. It is acceptable to physically intervene in reaction to a documented direct antecedent to dangerous behavior. As previously mentioned, documented refers to written notation, and antecedent behavior includes a direct correlation over time. Physical interventions are used when a student has demonstrated that he or she cannot make safe behavioral choices. If a time-out room or time-out area is available, staff may have enough time to attempt to prompt the student to "go to time-out." If a student refuses to comply, students are usually given the option to "go to time-out on your own, or I must help you, you decide." Within a few seconds, depending on age, if the student does not move towards the time-out area, some staff members will attempt a physical escort. Hopefully, if the staff member does not feel comfortable physically entering the situation, they will not have given the student the proceeding choice (which may lead to physical intervention). Do not attempt to physically escort, unless you are prepared to physically intervene in a more restrictive manner. Remember, based on you as an individual, if you feel that physically entering the situation will improve the safety of that situation, then physically entering the situation is an option. The phrase, "you as an individual," refers to a person's experience, level of training, physical attributes and skills in deceleration techniques, etc. This author recommends imagining the entire crisis is being video taped. With this image in mind, choose actions that you are prepared to defend under the circumstances that are taking place. If staff members put themselves in danger, they cannot be of assistance to anyone. The American Red Cross teaches you not to impulsively run into a burning building, only to have placed yourself in danger as well. Your first responsibility is to yourself. If a staff member does not feel comfortable physically entering an unsafe situation, then that staff member, as a professional, is responsible for taking another action-step toward safety.

It is important to have two staff members present with all physical interventions. If this is not possible, at least leave the door to the room you are in, open. In addition, if marks ever occur while having any physically contact with a student in any way, contact the parent, your direct supervisor, if possible the school nurse, and write an incident report. Contact the parent before the student arrives home from school. This author does not feel it is absolutely necessary to write an incident report after every hold and escort. This of course depends on the intensity. It is recommended that someone contact the parent(s) and write an incident report after every physical restraint, no matter what the intensity.

When engaging in physical interventions, some physiological principles are important. The most powerful part of the body is the legs. Even if you are physically much stronger than the unsafe student, in most cases, do not attempt to immobilize a student's leg(s) with your hands and/or arms. If you feel you are in danger of being knocked over, lower your center of gravity and widen your base (feet/stance). It is more difficult to knock over an end-table than a stool. With your feet parallel, it is important to keep a wide, stable base. Finally, never turn your back on a dangerous student. This author has staff members and administrators incurring injuries that hospitalization as a result. In the presence of a hostile, dangerous student, keep your feet parallel and take a side position. "Giving them your side," is less dangerous than facing the student. Generally, you can sustain more intense injuries if you are hit in the front of your body, when compared to being hit in your side. When leaving the room (for help or escape), keep your feet parallel, your center of gravity low (bend your knees) and do not turn your back on the aggressor. When backing away, attempt to avoid crossing your feet/legs. This makes you vulnerable. The skill takes practice.

The following written description of physical movement is a summary of a live presentation and practice. The following written material cannot be used in isolation as a training tool.



Self Defense Techniques

If attacked, you must be able to defend yourself without causing harm to the child (Quinn & Mathur, 1998). Johns and Carr (1995) recommend most of the following techniques (pressure points excluded):

If someone grabs your wrist, quickly, with a twisting action, push or pull towards the index finger and thumb of the attacker's hand. This is the weakest part of their hold. If this is unsuccessful, place your elbow firmly against your hip and repeat the action using your forearm as a lever.

Professionals with longer hair are extremely susceptible to hair pulls. An aggressor can easily entangle their hand(s) and finger(s) in ones hair. First, do not pull away. Johns and Carr recommend pushing towards the pull. If this is unsuccessful, place two fingers under the aggressor's arm (in the armpit), and with a drilling action, press in. Remember that this movement is only to release the entanglement. It is not preformed quickly or aggressively. The movement should be done in two stages. First place, and after a pause, apply pressure. It should not be used for anything but a hair entanglement or if an aggressor has a hold of a body part that causes intense pain and/or damage. If possible you must, attempt less restrictive interventions (without pressure points) first. Check your individual state laws. Some states have outlawed pressure points.

If another individual is biting you, again do not pull away. Push in towards the bite, if this does not release the jaw, take another action-step. Place your index finger and thumb on either side of the biter's cheek where the two major jawbones meet. Squeeze until the biter opens his or her mouth. If this is still unsuccessful, place two fingers under the biter's nose, and with a sawing action press inward. Again only use these movements to release the bite. They are not done quickly (two stages, place and then pressure). They are not performed aggressively, and they are not used for anything but a bite release when other less restrictive interventions have already been attempted. Again some states have prohibited the use of pressure points.

Chokeholds can be life threatening. Quick action is imperative. If you are being choked, place your own hands together and quickly and forcefully; push them over your head while turning your body 180 degrees. If the aggressor is facing you during the chokehold, shoot your hands up between the aggressor's arms. If the aggressor is behind you when attacked, quickly run forward while simultaneously attempting to separate the attacker's hands. Your leg strength will make it more difficult for the attacker to hold your neck. As with the wrist grab, attempt to break the hold at the weakest link.

Defending a punch gives you an opportunity to position yourself behind the aggressor. Use the aggressor's momentum against him or her by pushing or pulling the punching arm in the direction of the punch. If one were quick enough to grab the punching wrist, this would be even more effective. This way it will be easier to at least get behind the aggressor. Kicks can be successfully blocked by raising your near leg and bending your knee. You should be in a side position already. As with all self-defense moves, the difference between defending oneself and performing an aggressive act, may be a matter of shifting one's weight or moving one's leg or arm less than an inch. With an attacking student, raising your leg and shifting your weight backward is self-defense. The exact same movement with a half-inch extension of the knee may very well be an assault on that student. If this difference is not fully understood, then that person should not be involved in physical restraint procedures.

One-Person Prompted Escorts, Without A Physical Hold

When students are given a choice such as, "go to time-out on your own, or I must help you, you decide." A staff member has already decided that physically entering the situation will improve the safety of that situation. Placing your hands on anyone is a



violation of personal space and may facilitate aggression. Escorts that include prompting or physical contact may lead to a more dangerous situation. Only attempt escorts with prompting, if the environment is potentially dangerous, or if the teacher or professional cannot conduct class (or an event) with the student present. Before a prompted escort is attempted, ask yourself this question, "If this situation becomes more dangerous, can I physically create a safe environment." If as a professional you feel you can, then proceed with the prompted escort. React to the resulting behavior as a professional. Crisis escorts, like time-out procedures, are not the time for a lengthy discussion or a time to attempt to instill moral development. Use the same quidelines for time-out to govern your verbal behavior. When physically prompting a student during an escort, take a side position. Place your hand on the child's wrist, forearms, upper arm (humorous bone) or on the near shoulder. Particularly with older students, the hand and far shoulder may have a sexual overtone. Placing your arm around a student or having your hand over the far shoulder of a student may be inadvertently reinforcing, even if it the student does not perceive the behavior as carrying a sexual overtone. When escorting a known severe biter, place your hand on the nape of the student's neck. This way during the escort you will feel the head turn and you may prepare yourself more quickly. Of course non-prompted escorts are usually less problematic.

One-Person Physical Holds

Historically, the most commonly taught hold is the Basket-hold. Basically, you attempt to get behind the dangerous student, wrap your arms around the student (bear-hug). You then grab the students left wrist with your right hand and the student's right wrist with your left hand. At this point, the crisis worker is required to pull the student's wrists so that the student's arms are crossed in front. The crisis worker remains behind the student the entire time. Staff members are warned to keep their nose and face away from the back of the student's head. This author has seen noses break from swinging heads. It is usually recommended that the crisis worker turns to the side and lean backward. In a standing position, this is an acceptable hold. A seated version of this hold has been taught in the same manner, only the crisis worker additionally crosses his or her legs around the student. This places the student between their inner thighs. The Rhode Island Rape Crisis Center considers the inner thigh a sexually targeted area. This author does not endorse this version of the hold. The Standing Basket-hold can be modified for slightly stronger students. It is preformed in the same manner, however the crisis worker grabs one of the student's arms with both hands. This reinforces the hold or grip. The student's other arm must be inside the crisis worker's two arms or the student will not be appropriately immobilized. One seated version of both basket-holds is acceptable, when the child is in a chair (possibly at a desk or table), and the staff member is kneeling or squatting behind the seated student. This may or may not be safer than the standing version. The crisis workers on site must make that determination. Particularly for known biters, it is sometimes helpful to have a student seated; with the crisis worker behind the student as in the acceptable seated Basket-hold, however the crisis workers may want to hold the student's wrists differently. With known biters, perform the hold in the same manor, in a chair, however the crisis worker grabs the student's wrists by first coming under the student's arms. Here it is easier to grab the student's right wrist with the crisis worker's right hand (and left wrist with the crisis workers left hand). Instead of having the crisis worker's arms outside or around the student's arms, the student's arms are over the crisis worker's arms. In the seated position (at a table or desk), it is easy to push both the student's and crisis worker's hands under the table or desk. this position, all four hands are safe and if the biter is going to have access to an arm, it will be their own arm first.

The hold this author has found to be most useful is the "Double Chicken-wing." The term originated from the wrestling term Chicken-wing, referring to the same hold on only one arm/shoulder. From behind the dangerous student, (in bear-hug fashion) the crisis worker shoots their hands into the armpits of the dangerous student. The crisis worker shoots their right hand into the student's right armpit and left hand into the left armpit simultaneously. This move locks the student and crisis worker's shoulders together. The



student's shoulders are drawn backward. From a physiological standpoint, this is a fairly safe position for the shoulder to be in. The head of the humorous bone fits into the glenoid cavity of the shoulder created by the clavicle and scapular. The clavicle is a smaller bone in the front that attaches to the sternum. The scapular is much larger and comprises most of the back of the shoulder. Shoulders are often more injured when they are forced forward. This is a common injury that occurs in a weightlifter who benchpresses large amounts of weight. Chiropractors will often set shoulders into place by using manipulations that pull the shoulder backward. The preceding information is drawn from the school of exercise physiology and should not be considered medical advice. Once the hold is applied, the crisis worker now has the option of clasping their own hands together (behind the student's back) to tighten this double arm lock. Here also the crisis worker must turn their own head to the side to avoid the student's head potentially flailing out of control. This procedure can be applied guickly and effectively. It additionally places both student and crisis worker in a takedown-ready position. The arms are locked and immobilized fairly well. It is important to note that this author does not endorse movements such as the Half or Full Nelson. These moves are dangerous and put pressure on the back of the neck.

Escorts with Holds (One & Two Person)

Certainly, any of the above holds may be used in a physical escort. If the staff member feels comfortable, that she or he can perform the combination of a hold and an escort safely, then the combination is an option. If not, a professional staff member must take another action-step. When engaged in an escort, involving a physical hold, walk the student backward. This way if the student drops "dead weight," the escorter may be able to drag the student on his or her heels. It also gives the escorting staff member an added advantage and places the student at a slight disadvantage. This position can additionally save a crisis worker's back from being injured or unduly stressed. It is important to minimize the struggle that frequently occurs. When performing the single person escort, with a hold, this author prefers to use the double chicken wing.

Violent students can be safely escorted (or held) by two staff members as well. This is providing both staff members have been trained and communicate well with each other. With this procedure, both staff members face the student (The student is facing the staff members as well). One staff member is on either side of the student. Both staff members reach with their closest (to the student) hand, for the closest armpit of the student. Each staff member simultaneously shoots there near hand and near arm underneath the student's armpit. Then they lift slightly upward, locking the arms. One staff member ends up on either side of the student. Student and staff are facing in opposite directions. The staff members have there near or closest arms locked on either side of the student. The staff member's arms must be tightly locked under the student's armpits. The student is then in a good position to be safely escorted backward, while staff members are walking forwards. Doorways are challenging and require quick, efficient communication. When a pair of staff members work well together, this escort can be extremely safe and efficient

<u>Takedowns</u> (Buttocks-to-Floor)

Many staff training programs teach frontal takedown procedures, with straddling hold-downs, once the student is on the ground. This author feels a frontal takedown is usually more dangerous and straddling students is inappropriate. Whether the student is in a two-person or one-person hold, this author suggests first placing the student in the previously described double chicken wing, with one staff member. This staff member then performs the takedown. Once the student is safely on the ground, the other staff member is added to the physical restraint. Obviously transitioning from a two-person escort, to a one-person double chicken wing requires communication and may be performed before or after the "takedown." If the student is standing, and a staff member has the student in the double chicken wing, the staff member needs to make sure she or he has enough space behind them. The staff member quickly brings the student's buttocks to the floor by



stepping and pulling backward. The takedown is fairly well controlled and the buttocks are the first body-parts to hit the ground. A mat may increase the safety of this procedure by further minimizing impact. If the takedown will well controlled, a mat is not a necessity. The body-part with the most adipose tissue, falls the shortest distance and touches the ground first. This author feels this is the safest movement to control a fall in a takedown. The staff member must also kneel and remove his or her own legs, before they are trapped under the student. Next attempt to get the student seated with both the students' legs positioned straight out in front of them with their knees locked (strait, not bent). In this position, a smaller staff member can gain more control of a larger student, by leaning into the student's back, bringing the student's chest toward the student's own legs. Getting a student to this seated position can be done from the two person (arm-locked) escort without first transferring to the double chick-wing hold. Both staff members quickly walk the student a few steps backward. Then both staff members kneel simultaneously. Even with this type of two person takedown, it is recommended that one staff member take her or his free arm and get behind the student and then perform the double chick wing. The student remains in a seated position the entire time.

The only other takedown I have used is the hip-toss. This procedure is only used with students that are small and light in comparison to the staff member. One guideline this author recommends is, do not use the hip-toss takedown unless you are 100% sure, you can safely control the fall forward. Usually staff position themselves behind the child, grab hold of the child's upper arms, slowly roll a smaller child over their hip/leg on one side. Completely controlling the fall, the staff member places the child on the ground.

The Corkscrew (Chest-to-Floor)

In some states a face down restraint is prohibited and this technique must be changed, eliminated or modified. With either the one-person or two-person takedown, the staff member is eventually kneeling behind the seated student, holding the student in a double chicken-wing. The student is seated on his or her buttocks, with both legs straight out (knees locked) in front of him/her. The final part of the takedown is called the corkscrew. From this seated position, simply turn the student by placing the student's chest to the floor. The student ends up lying on the floor on their chest and the staff member's chest may be on the student's back, depending on the size of each person. In states, where facedown restraints are prohibited, do not use the corkscrew (chest-tofloor) move. One may want to bring the students back to the floor after the takedown (butt-to-floor). This would result in a face up restraint. A face down restraint is more immobilizing and the aggressors breathing must always be monitored. If the student is in the face down position, and is still not safely immobilized a smaller, lighter staff members may get up on their toes for some added leverage. If the student's legs are failing, (face down only) another staff member may immobilize the legs safely by placing the staff member's hip, over the student, above the student's buttock area (small of the back). This is approached from the top of the student and away from the legs. The staff member is now facing the student's head and slowly rolls down, 180 degrees, towards the student's feet. Most staff member's end up on their side, with their side on the student's calves. This usually causes a progressive restriction of the legs until they are safely immobilized. The restriction is applied slowly and gradually. Immobilizing an irate student's legs any other way is usually more dangerous. Two staff members may also hold a student down by the arms. One staff member should be on either side of the student and each staff member should hold one arm of the student. If the student's arm can still move, staff members may lock their own elbows for added leverage. This type of hold-down can only be done if the student's legs are safe. If the legs are unsafe, each staff member may attempt to place their near foot over the near leg of the student while still holding down the arm. The staff members may be able to immobilize the near leg with their own shin. Both staff member's knees remain outside the student. The "knee to the back" move sometimes used by police officers is inappropriate in a school setting and never used by school crisis staff members.



Even thought, physical restraint is never used as an aversive procedure, and is never used for convenience, a criterion for allowing the student to get up is recommended. Usually both verbal and topographical evidence that the student can make safe choices is required. A gradual reduction of restriction is recommended. As with the time-out procedures, get the student up and out of restraint as quickly as possible. Again, as with time-out procedures, documentation, monitoring and parent contacts are all necessities. If marks ever occur, have the student checked by the school nurse and notify the parent and your direct supervisor as well. One staff member should write an incident report.

Up from Restraint

The verbal behavior used with a student being released from physical restraint is similar to that used with a student being released from a time-out procedure. Say only what the criterion is to be released from the restraint. Usually some evidence of safe behavior is required. You may want to use the broken record approach. If this seems to be unsuccessful, stop speaking altogether, and give periodic reminders. Record the time in and out of restraint, the environment and if possible the reason for the time-out/restraint along with the setting event. Sign or at least initial this record. Upon review, a behavior analyst may be able to link some common environmental threads. This should be helpful in a Functional Behavioral Assessment. Finally, if you are going to place your hands on a student, you must have ongoing training in this area.

Ongoing Training

As previously recommended, any staff member engaged in crisis intervention and non-violent, physical, humane restraint, needs practice in mock settings before they attempt crisis situations. Furthermore, ongoing training and re-training is officially recommended. If possible, non-violent, physical, humane restraint should be modeled by more experienced personal, before being first attempted in the applied setting.

References

Arndorfer, R.E., Allen, K.D., & L. Aljazireh, (1999). Behavioral health needs in pediatric medicine and the acceptability of behavior solutions: Implications for behavioral psychologists. *Behavior Therapy*, 30, 137-148.

Bigelow, G., Liebson, I., & Griffiths, R. (1974). Alcoholic drinking suppression by brief time-out procedure. Behavior Research and Therapy, 12, 107-115.

Costenbader, V., & Reading-Brown, M. (1995) Isolation time-out used with students with emotional disturbance. *Exceptional Children*, V61, N4, 353-363.

Dinkmeyer, D., McKay, G.D., & Dinkmeyer, J.S., (1997) Systematic training for effective parenting. American Guidance Services, Inc. Circle Pines, MN

Doleys, D.M., Wells, K.C., Hobbs, S.A., Roberts, M.W., & Cartelli, L.M. (1976). The effects of social punishment on noncompliance: A comparison with time-out and positive suppression and generalization. *Journal of Applied Behavior Analysis*, 9, 471-482.

Foxx, R.M., & Shapiro, S.T. (1978). The time-out ribbon: A nonexclusionary time-out procedure. Journal of Applied Behavior Analysis, 11, 125-136.

Glasser, W. (1965). Reality Therapy, A new approach to psychiatry. Harper & Row.

Johns, B.H., & Carr, V.G. (1995). Techniques for managing verbally and physically aggressive students. Denver: Love.



Lahey, B.B., McNees, P.M., & McNees, M.C. (1973). Control of an obscene "verbal tic" through time-out in an elementary school classroom. *Journal of Applied Behavior Analysis*, 6, 101-104.

Patterson, G.R., & White, G.D. (1970) It's a small world: The application of "timeout from reinforcement. Learning and foundations of behavior therapy. New York: John Wiley

Quinn, M.M., & Mathur, S. (1998). Managing Antisocial Behavior. American Federation of Teachers, A Project of the Educational Issues Department, Educational Research and Dissemination Program.

Stage, S.A., & Quiroz, D.R. (1997). A meta-analysis of interventions to decrease disruptive classroom behavior in public education settings. *School Psychology Review. 26*. 333-363

Touchette, P.E., MacDonald, R.F., & Langer, S.N. (1985). A scatter plot for identifying stimulus control of problem behavior. *Journal of Applied Behavior Analysis*. 18. 343-351.

Van Houten, R., Nau, P.A, MacKenzie-Keating, S.E., Sameoto, D. & Colavecchia, B. (1982) An analysis of some variables influencing the effectiveness of reprimands. *Journal of Applied Behavior Analysis*, 15, 65-83

White, G. D., Nielson, G., & Johnson, S.M. (1972). Time-out duration and the suppression of deviant behavior in children. *Journal of Applied Behavior Analysis*, 5, 111-120.

Rhode Island General Law (RIGL):

Number 16-11.2-2. Number 9-1-31 Number 9-1-27.1.

Regulations of the Board of Regents for Elementary and Secondary Education Governing three Special Education of Students with Disabilities. August, 1992. (I.D.E.A.)

Current Federal Bills

Bill HR1313 Patient Freedom from Restraint Act of 1999 (an addition to) Part B of title XI of the Social Security Act,

Manuals

West Warwick School Department Special Education Procedures Manual, West Warwick, Rhode Island, (Revised, summer of 1999), by the Special Education Director, Robert M. Sherman,

National Organization For Victim Assistance, 1987, 1994, 1998; Community Crisis Response Team Training Manual: Second Edition, Chapter 11: Group Crisis Intervention Techniques.

Internet Citations (1998)

(http://leginfo.leg.wa.gov/pub/rcw/title 09a/chapter 016/rcw 9a 16 100) (http://www.atl.org.uk/press/pn9814.html)





U.S. Department of Education

Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)



REPRODUCTION RELEASE

(Specific Document)					
I. DOCUMENT IDENTIFICATION:					
Title: Crisis Intervention & Non-Violent Restraint What is your action-step?					
Author(s): Chris	s Torem, MA, C.A.G	S. School Psycho	logist		
Corporate Source: West Warwick Public Schools Publication 7/31/0					
In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, Resources in Education (RIE), are usually made available to users in microfiche, reproduced paper copy and electronic media, and sold through the ERIC Document Reproduction Service (EDRS). Credit is given to the source of each document, and, reproduction release is granted, one of the following notices is affixed to the document. If permission is granted to reproduce and disseminate the identified document, please CHECK ONE of the following three options and sign at the bottom of the page.					
The sample sticker shown belo		mple sticker shown below will be ted to all Level 2A documents	The sample sticker shown below affixed to all Level 2B docum		
PERMISSION TO REPRODU DISSEMINATE THIS MATER BEEN GRANTED BY	PERMIS UCE AND DISSE RIAL HAS MICROFICH Y FOR ERIC CO	SSION TO REPRODUCE AND MINATE THIS MATERIAL IN HE, AND IN ELECTRONIC MEDIA DILLECTION SUBSCRIBERS ONLY, AS BEEN GRANTED BY	PERMISSION TO REPRODU DISSEMINATE THIS MATER MICROFICHE ONLY HAS BEEN G	ICE AND RIAL IN	
Sample		_ Sample			
TO THE EDUCATIONAL RES		EDUCATIONAL RESOURCES RMATION CENTER (ERIC)	TO THE EDUCATIONAL RESC INFORMATION CENTER (I		
1	2A		2B		
Level 1		Level 2A	Level 2B		
X					
Check here for Level 1 release, permitti and dissemination in microfiche or othe media (e.g., electronic) and pap	er ERIC archival and disseminal	Level 2A release, permitting reproduction ion in microfiche and in electronic media archival collection subscribers only	Check here for Level 28 release, preproduction and dissemination in mix		
		d as indicated provided reproduction quality pr rut no box is checked, documents will be proc			
as indicated above contractors requires	e. Reproduction from the ERIC mic	rofiche or electronic media by pers r. Exception is made for non-profit re	ssion to reproduce and disseminate th sons other than ERIC employees an eproduction by libraries and other serv	d its system	

Sign here,→ please Printed Name/Position/Title:
Chris Torem, School Psychologist
Telephone: (401) 822 FAX:
823-8390
E-Mail Address: 8432 Date: 8/3/00

ERIC

Full Text Provided by ERIC

02893

III. DOCUMENT AVAILABILITY INFORMATION (FROM NON-ERIC SOURCE):

If permission to reproduce is not granted to ERIC, *or*, if you wish ERIC to cite the availability of the document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents that cannot be made available through EDRS.)

Publisher/Distributor:	
Address:	
Price:	
•	
IV. REFERRAL OF ERIC TO COPYRIGH	IT/REPRODUCTION RIGHTS HOLDER:
If the right to grant this reproduction release is held by some address:	one other than the addressee, please provide the appropriate name and
Name:	
Address:	
L	

V. WHERE TO SEND THIS FORM:

Send this form to the following ERIC Clearinghouse:

University of North Carolina at Greensboro ERIC/CASS 201 Ferguson Building PO Box 26171 Greensboro, NC 27402-6171

However, if solicited by the ERIC Facility, or if making an unsolicited contribution to ERIC, return this form (and the document being contributed) to:

ERIC Processing and Reference Facility 1100 West Street, 2nd Floor

Laurel, Maryland 20707-3598

Telephone: 301-497-4080
Toll Free: 800-799-3742
FAX: 301-953-0263
e-mail: ericfac@inet.ed.gov
WWW: http://ericfac.piccard.csc.com

ີ່ -F-088 (Rev. 9/97) PREVIOUS VERSIONS OF THIS FORM ARE 0່BSOLETE.