



THE SCHOOL DISTRICT OF
PALM BEACH COUNTY, FLORIDA

WILL GORDILLO
DIRECTOR

KEITH OSWALD
ASSISTANT SUPERINTENDENT


EXCEPTIONAL STUDENT EDUCATION
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August 16, 2012
Bulletin #P-14304-CLS/ESE

Contact Person:
Will Gordillo, PX 48626

Action By:
September 7, 2012

TO: All Principals

FROM: Janis Andrews, Ed.D., Chief Academic Officer 

SUBJECT: PHYSICAL RESTRAINT FOR STUDENTS WITH DISABILITIES POLICY

In accordance with Florida Law and School Board Policy 5.181, a short video has been prepared regarding requirements for restraints of students with disabilities. This video must be viewed by all school principals, assistant principals, ESE Coordinators, 504 Designees, and staff working with students with disabilities. The notification and reporting requirements described within the video pertain to students who have IEPs as well as students who have a Section 504 Plan.

The video may be viewed at <http://trainu.palmbeach.k12.fl.us/course?id=1308>.

Each school is required to authorize two or three individuals to complete the reporting forms on the Florida Department of Education database. The web based reporting system for restraints for the FLDOE is <https://app1.fldoe.org/ESE/RestraintSeclusionIncident/>. Principals must complete the attached form even if the information is the same as last year. The attached form must be completed and sent to Will Gordillo, Director of ESE, FHESC A-203 no later than September 7, 2012. Also attached is the letter for you to utilize when notifying parents each time there is an incident requiring restraint or seclusion. This letter must be sent within 24 hours of the incident.

Attachments

EWG:JA:KO:WJG:jb

Approved: 
E. Wayne Gent, Superintendent

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FLORIDA DEPARTMENT OF EDUCATION DATABASE

FOR RESTRAINT/SECLUSION REPORTING

FY12-13

This information is due to Will Gordillo by Monday, September 7, 2012.

Name of School: _____ School No.: _____

People responsible for data input:

Name: _____ Title: Assistant Principal

Name: _____ Title: ESE Coordinator

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Principal's Name

PLEASE FAX THIS FORM TO 434-8276 (PX 48276)

[SCHOOL LETTERHEAD]

[DATE]

[PARENT/GUARDIAN
NAME & ADDRESS]

Re: [STUDENT'S NAME]

Dear [PARENT/GUARDIAN]

Florida law requires that your child's school notify you, as the designated parent or guardian, each time manual physical restraint or seclusion is used on your child. This law is entitled the "Florida Restraint and Seclusion Law" ("FRSL"). Fla. Stat. 1003.573.

The FRSL requires that your child's school make "reasonable efforts" to notify you by "telephone or computer e-mail, or both," and document those notification efforts. On [DATE], school staff notified you by [INSERT TELEPHONE AND/OR E-MAIL AND TIME(S) OF CONTACT] that [RESTRAINT] was used on your child.

The FRSL also requires your child's school to provide you "written notification of the manual physical restraint" and "provide such notification to you before the end of the school day on which the event(s) occurred." The school is required to obtain, and keep in its records, a signed acknowledgement that you received this written notification. Fla. Stat. 1003.573(c). In order to comply with this notification requirement, please sign and date this letter where indicated below and immediately return it in the enclosed self-addressed stamped envelope. I have also enclosed a copy of this letter for your records.

Please note that the FRSL further requires the school to prepare a detailed Incident Report within twenty-four (24) hours after a student is released from manual physical restraint or seclusion. If the student's release occurs "on a day before the school closes for the weekend, a holiday, or another reason, the Incident Report must be completed by the end of the school day on the day the school reopens." Fla. Stat. 1003.573(a).

You will receive a copy of the completed Incident Report by mail within three (3) school days after your child was manually physically restrained or secluded. Please note that the school is also required to obtain, and keep in its records, your signed acknowledgement that you received a copy of the Incident Report. Fla. Stat. 1003.573(d).

Please contact me should you have any questions or concerns.

Sincerely,

[SCHOOL PRINCIPAL]

Encl. Self-addressed stamped envelope
Copy of letter

c: Will J. Gordillo, Director, ESE
Bruce Harris, Senior Counsel

[PARENT/GUARDIAN TYPED NAME]

Date