

SARAH



Sarah is a five-year-old student with pervasive developmental delay and limited speech. She currently attends a Kindergarten special day classroom for students with speech and language impairments. There are a total of 20 students in her class, and Sarah has not transitioned well from her smaller preschool program. She has had numerous tantrums within the first two weeks of school that have included dropping to the floor, screaming loudly, and crying for her Mama. These tantrums typically occur after she is asked to end a preferred activity.

Sarah's teacher, Mrs. Abernathy, is brand new to the field. She is gentle and soft-spoken, and has limited behavioral training. Through trial and error, she found that the only way to calm Sarah down is to sequester her in the reading corner. The reading corner is in the back of the classroom, and Mrs. Abernathy moves one large bookcase across the opening of the area to prevent other students from entering. The area has a beanbag chair and picture books that Sarah loves, and she will flip through the pages of the books until she calms down. The class has affectionately renamed the reading corner, "Sarah's Cave."

Sarah usually calms down within ten minutes, and she will independently request to rejoin the class. Mrs. Abernathy will move the bookcase to let her out, and Sarah happily joins her peers. Overall, Mrs. Abernathy is pleased with this behavioral strategy, but she's realizing that the constant moving of the bookcase is resulting in a back injury. She's seeking consultation from her site administrator.

CASE STUDY 1: SARAH

1. In this scenario Sarah's Cave could be considered which of the following:
 - A. Restraint
 - B. Seclusion
 - C. Both a restraint and a seclusion
 - D. Neither

2. The following are all components of seclusion EXCEPT:
 - A. She is allowed to leave at any time
 - B. She cannot freely leave the area
 - C. She is involuntarily removed from the learning groups and contained in an isolated area
 - D. She is alone and her exit is blocked by a bookcase she cannot move

3. Consistent with the BSP protocol, which of the following would be the most appropriate reactive strategy?
 - A. Get a bigger aide to watch her
 - B. Give her an in-house suspension to begin building a case for a more restrictive setting if needed in the future
 - C. Redirect her to the FERB
 - D. Read her a book while still in seclusion to help calm her down

4. All are possible preventive strategies that could be appropriate for Sarah EXCEPT:
 - A. Provide her with success level tasks
 - B. Call Sarah's mother to have her talk with Sarah about her disruptive behavior
 - C. Provide Sarah with a break when she begins to show mild indicators for disruptive behavior
 - D. Verbally praise Sarah when she is engaging appropriately in tasks

CHRIS



Chris is a seventeen-year-old student with a long history of learning and behavior problems. Although he speaks English at school, he is an English Language Learner. Spanish is the primary language used in his home. His initial eligibility for special education services was under Speech and Language Impairment. However, in the eighth grade when academic progress remained poor, his eligibility was changed to specific learning disability. As he entered high school, his performance declined further, and it was noted that he was sensitive about his learning challenges, social deficits, and cultural differences. Chris was assigned a behavioral aide, but soon after, he began to demonstrate self-injurious behavior and aggression towards the aide and other students. He is now eligible for special education under the category of emotional disturbance.

Recently, his teacher has noticed that Chris is increasingly withdrawn, and often sits alone listening to his iPod in his ED-SDC. He rarely completes his work, has a short attention span, dresses in menacing attire, and seeks little social interaction. If his aide nags him, he will sit at his desk, but do very little. If physically prompted, he will become aggressive, throwing materials and shoving staff or students in his proximity. When this happens, his behavior support aide and teacher use a SELPA approved, two person control (immobilizing both arms and restricting mobility) to prevent him from harming anyone, while another adult removes the other students. This is occurring about two times per week.

Despite Chris' problem behaviors, his teacher reports that he often volunteers to do helpful things in the classroom such as watering plants, collecting materials, and assisting a classmate in a wheelchair. He also enjoys helping the office staff by delivering mail, organizing the nurse's office, and handing out hall passes to other students.

CASE STUDY 2: CHRIS

1. This scenario describes the use of a:
 - A. Restraint
 - B. Seclusion
 - C. Both a restraint and a seclusion
 - D. Neither

2. A physical restraint did occur. How do you know?
 - A. The staff used an approved control technique
 - B. The specific procedure is written into the student's BSP
 - C. The song, *Let's Get Physical*, was playing on the student's iPod
 - D. The staff used their bodies to restrict the student's movement

3. What strategy is likely to remove the student's need to use the problem behavior again?
 - A. Use physical prompting more often
 - B. Reinforce the student for his use of the FERB or general positive behavior
 - C. Teach the student to hide his iPod and hold a pen so he looks like he's working
 - D. Give him only the kind of work he will do

4. How will you respond if the behavior occurs again?
 - A. Direct the student to sit down
 - B. Use visual cues to redirect the student to the FERB
 - C. Move the victim away and block or remove materials that can be thrown
 - D. Address all four components of reactive strategies by prompting, redirection to the FERB, blocking and removing others, and debriefing by having the student fill out Thinking About My Inappropriate Behavior form

TOMMY



Tommy is an eleven-year-old student with a diagnosis of Angelman Syndrome. Angelman Syndrome is a genetic disorder characterized by severe speech impairment, ataxia or tremulousness of the limbs, intellectual disability (also known as mental retardation), and a unique behavior of inappropriate happy demeanor that includes frequent laughing, smiling or excitability.

Tommy is educated on an elementary school campus, where he spends the majority of his academic day in a small classroom with one or two adults. He is fully included in a general second grade classroom for the daily Language Arts block. During this time, he listens to the general education teacher read a story aloud. He remains seated in his wheelchair as the class answers questions about the story.

Although Tommy is ambulatory, he spends the majority of his day in his wheelchair due to his difficulties with balance. He has a history of falling and/or bumping into people and objects as he walks, even when walking a short distance. His school team is very careful to ensure his safety, and they make sure that the seat belt on his wheelchair is buckled at all times. Typically, Tommy does not get out of his wheelchair during the day except for his toileting routine and his adapted physical education sessions (twice a week).

Tommy has been able to get out of his wheelchair on a few occasions, but this has been resolved by using a new buckle that he is unable to unlatch on his own. The two times in which Tommy got out of his chair, were within his 1:1 discrete trial lessons. In both instances, he stumbled over to a corner of the room where a small tent was set up for break time.

CASE STUDY 3: TOMMY

1. This scenario describes the use of a:
 - A. Restraint
 - B. Seclusion
 - C. Both a restraint and a seclusion
 - D. Neither

2. The strategy used in this scenario is a(n):
 - A. Appropriate safety measure
 - B. Physical prompt
 - C. Mechanical restraint
 - D. Physical restraint

3. Which of these would be an appropriate strategy to use when Tommy runs out of his chair?
 - A. Let him go
 - B. Hold onto to him so he doesn't hurt himself
 - C. Block him from getting up by pushing his chair under his desk
 - D. Ask him where he wants to go then follow him and provide him physical support if needed

4. Which of these would NOT be an appropriate preventive strategy?
 - A. Establish a safe zone where Tommy can easily go when frustrated
 - B. Establish a procedure for securing an extra buckle on his wheelchair during less preferred activities
 - C. Establish safe walking zones, with handrails that Tommy can use for support
 - D. Provide Tommy with a choice of activities

CARL



Carl is a seven-year-old student with a diagnosis of Attention Deficit Hyperactivity Disorder (ADHD). He's enrolled in a 1st grade special day class, and has a full time instructional aide working with him. Carl's biggest academic deficit is with writing tasks. He has a history of difficulty with both developing content and the fine motor components of written expression. His reading is at the primer level. Math is fortunately an area of relative strength.

Carl is also very irritable, oppositional, and frequently misinterprets his aide's support as "picking on him," or "being unfair." His parents and school are concerned about Carl's noncompliant and aggressive behaviors, which continue to affect both his learning and relationships with peers.

Yesterday, Carl didn't want to complete his writing assignment. So, he crossed his arms, turned away from his aide, and began verbally protesting. When given the direction to continue working, Carl threw the materials to the floor. His aide immediately prompted him to go to the time-out room to "cool off." He verbally protested with, "I didn't do anything wrong!" and backed himself into the corner. His aide physically guided him inside the room, and told him he could come out when he was nice and calm. This was defined as Carl stating the phrase "I'm ready to join my friends," in a neutral and modulated voice.

The time out room is an adjacent therapy room with one entrance door and no windows. Upon entry into the room, Carl began to pound on the walls and the door. His instructional aide waited outside the room for him to regain control of his behavior. After about ten minutes, Carl calmed down and stated his phrase. The aide then moved away from the door allowing Carl access back to the class. He was then directed back to his desk to resume his writing assignment.

CASE STUDY 4: CARL

1. This scenario describes the use of a:
 - A. Restraint
 - B. Seclusion
 - C. A restraint and a seclusion
 - D. Neither

2. This scenario illustrates seclusion of the child because:
 - A. The aide is large and physically intimidating
 - B. The movement of the child's body parts are being restricted by a mechanical device
 - C. The child is being contained in a secured area from which he is physically prevented from leaving
 - D. The child verbally protested entering the time-out room

3. An appropriate preventative strategy to reduce the reoccurrence of this scenario is...
 - A. Instead of time-out, Carl remains in the SDC classroom with his aide in a designated corner working on anger management techniques
 - B. The aide intervenes when Carl begins to show signs of agitation by making accommodations to the written work assignment and prompting Carl to request a break
 - C. While Carl is verbally protesting, the aide prompts him to make a choice between listening to music or taking a walk, both of which are calming strategies identified by the IEP team
 - D. The aide reminds Carl he will receive extra work if he doesn't calm down

4. All of the following are appropriate reactive strategies for this scenario, EXCEPT:
 - A. Immediately utilize a supine restraint to calm Carl before taking him to the time-out room
 - B. Maintain the safety of peers and the student by removing the audience and any potentially harmful objects and/or furniture in the vicinity
 - C. Redirect with additional supports and prompt Carl to use his functionally equivalent replacement behavior
 - D. Provide a gentle but directive "no," and redirect with a first/then statement

DEVON



Devon is a six-year-old non-verbal student with a diagnosis of autism. He attends a special day classroom designated for students with autism that utilizes many environmental supports, including a high adult to student ratio. Unfortunately, Devon has difficulty with transitions. He also has a history of elopement, especially at dismissal time when he and his classmates are escorted to the bus.

On the first day of school, Devon darted past the school bus and towards the street. Luckily the crossing guard was right there to intervene, and stopped him before he entered the busy intersection. As a result, Devon's teacher and classroom aide have been holding onto his backpack as they escort him to the bus. At the end of the school day, the aide helps Devon put his backpack on and secures all of the straps (a chest and waist buckle) before they walk to the bus. It is now 27 days into the school year and Devon has had zero instances of elopement. However, he has tried to wiggle out of his backpack on numerous occasions.

MIA



Mia is an eight-year-old student with a diagnosis of intellectual disability (also known as mental retardation). She attends a 2nd-3rd grade moderate/severe special day class. Although Mia is able to complete the majority of her daily routines independently, she is very resistant during Language Arts, specifically with her color matching tasks. Often, Mia is so resistant that the aide must sit behind Mia straddling her chair so that she can physically motor her through the activity. Typically, Mia will be the last of the students to complete her lesson, because the aide spends so much time repositioning Mia between her legs. At times, the matching task can take up to 25 minutes to complete.