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Reflection on the Restraint and Seclusion Panel Event

One of the most shocking facts that I learned during this panel is that the use of restraints and seclusion are very prevalent in the state of Maine. It was even more concerning that the rates of the use of restraints and seclusion rose steadily from the years 2014 to 2019, and that the true number is actually much higher than the numbers that are recorded. The U.S Department of Education and the U.S. Senate Committee stated their concerns for using these practices because there are many cases that have led to injury and death, and there is no evidence that using restraints or seclusion is effective in reducing the occurrence of the problem behaviors.

Restraints and seclusion is only permitted to be used when there is imminent danger of serious physical harm to the student or another person, with use of the least amount of force, and restraint ends immediately upon cessation of the imminent danger. Although the numbers of the use of restraints and seclusion are high in Maine, the state has passed legislation to reduce use of restraint and eliminate use of seclusion.

This information relates to the content in this special education law class because most of the restraints and seclusion techniques are being used on students with disabilities. There is a recent Maine law that has been passed to limit the use of restraints and seclusion called LD 1373, which is based on the National Keep Students All Safe Act. The new law outlines what is classified as unlawful, including both mechanical restraints, chemical restraints, physical escorts that are life-threatening, and use of physical restraints or seclusion that is contraindicated based on the student's disability. An IEP team or a 504 team can get together and determine that restraint and seclusion practices are not acceptable for specific students with disabilities based on

their individual needs. Laws from Chapter 33 are still in place to help protect students such as by debriefing, training staff, reporting incidents, notifying families, and having complaint procedures to correct improper practices. This presentation mentioned that there is more protection of students through the IDEA, 504, and the ADA. More specifically, a student's right to get an FAPE through the 504 and IDEA standards can be infringed by the use of restraints and seclusion.

I hope to one day go into pediatric dentistry, treating and educating young people about oral health. The information from this panel relates to my profession because there is no scientific basis for physical restraint and seclusion to control a challenging behavior. In pediatric dentistry, there is use of a papoose to immobilize patients during dental treatment and it is used mostly on patients with special needs. I recognize that the restraint system of dentistry can be physically damaging to children, especially because most children are already afraid of going to the dentist. More ethical options for helping children feel most comfortable when getting dental treatment are allowing parents to hold their child or using anesthesia. I would rather build trust with each child and make dentistry for children a positive experience than use these harmful practices of restraint and seclusion.