

Jan. 30, 2021

While Marklund Day School administration agrees that schools need to actively work toward a systemic reduction of isolated time out, time out, and physical restraint, as presented in HB2263, we oppose the complete ban on prone restraints. Prone restraints have been an effective therapeutic intervention that aides in de-escalating or calming students who pose an imminent danger to him or herself as well as staff and other students. We are concerned that if the prone restraint is fully banned, the students who require individualized supports and intervention may have their rights to a free and appropriate public education altered or ultimately denied.

Marklund Day School, a nonpublic therapeutic school located in Bloomingdale, Geneva and Elgin, is a placement option for multiple school districts when the needs of their students are no longer able to be met in public school.

A majority of the students who are placed at Marklund are considered to be in the one percent of the special education population who earnestly need intensive therapeutic services as identified in their Individualized Education Programs (IEPs). It is important to mention, the IEP is developed with input from all key stakeholders: the parents, home school district representatives, and the therapeutic team at Marklund.

The typical learner profile is non-verbal, cognitively impaired, and has unique medical needs. Due to the fact that some students are unable to express themselves verbally, they often express their wants, needs, and emotions in the form of behavior. At times, the intensity of the behavior increases and poses an imminent danger of serious physical harm to themselves, other students, and staff. The prone restraint is performed as a last resort intervention by trained staff, not as a punishment but rather a therapeutic technique, to assist the student in calming. Once the student is calm, the prone restraint ceases and the student resumes regular program activities.

When implemented under strict oversight and by properly trained staff, the prone procedure is safe for everyone involved--students and staff. At Marklund, our primary focus is to identify each student's skill and/or performance deficit and establish a plan to teach the student replacement behavior so that "physical aggression" does not continue to serve as the primary mode of communication.

Marklund is asking that the legislation allow for the use of prone restraint when deemed clinically and therapeutically appropriate.

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