ABSTRACT

This is a new Regulation. It establishes the Department of Education’s (“DOE”) policy and procedures regarding intervention and de-escalation, and contacting 911 for students experiencing behavioral crises. This Regulation shall become effective on August 1, 2015.

I. BEHAVIORAL CRISIS DE-ESCALATION/INTERVENTION AND CONTACTING 911

A. This Regulation establishes the Department of Education’s (“DOE”) policy and procedures regarding intervention and de-escalation, and contacting 911 for students experiencing behavioral crises. It becomes effective on August 1, 2015. When a student engages in behavior that poses a substantial risk of serious injury to the student or others, schools must determine the appropriate way to manage the behavior and consider whether the situation can be safely de-escalated by school staff as set forth below. In such situations, the following procedures must be followed:

1. The principal/designee must be notified of the situation and must attempt to reach the parent. The parent must be given an opportunity to speak by telephone or in person with his/her child where safety considerations permit and where it will not interfere with school staff’s efforts to de-escalate the situation.

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1 The policies and procedures regarding contacting 911 for emergency medical services for a physical injury or medical condition are contained in Chancellor’s Regulation A-412.

2 “Parent” means the student’s parent or guardian or a person in any parental or custodial relationship to the student, or the student if he/she is an emancipated minor or is 18 years or older.
2. Every effort must be made by responding school staff to safely de-escalate the behavior where possible using: 1) strategies and interventions for addressing behavioral crises; and 2) the in-school and community resources identified in the school’s Crisis De-escalation Plan (see Section III below). If the classroom teacher or the responding staff member is unable to de-escalate the behavior, the teacher/staff member should seek assistance from staff members trained in crisis de-escalation. The teacher/staff member may also seek assistance from other appropriate staff and resources including the assistant principal, dean, a member of the school’s Crisis Intervention Team, a member of the Building Response Team, a guidance counselor, School-Based Mental Health Clinic (SBMH) or a School-Based Health Center with mental health services (SBHC) if there is one on-site, or the Children’s Mobile Crisis Team if available in the borough.

3. However, where a student’s behavior poses an imminent and substantial risk of serious injury to himself or others and the situation cannot be safely addressed by school staff or the support services set forth above, the principal/designee must call 911. In such situations where it is not practicable to contact the principal/designee, the responding staff member/School Safety Agent must call 911 and immediately thereafter notify the principal/designee.

II. SCHOOLS’ RESPONSIBILITIES WHEN 911 IS CONTACTED

A. When 911 is called for a student, the principal/designee must immediately attempt to reach the parent to notify him/her that 911 was called.

B. If the parent has arrived at the school and it will not interfere with the proper discharge of the on-scene 911 responders’ duties and responsibilities, the parent must be given an opportunity to speak to the on-scene 911 responders and the student.

C. If the parent has not arrived at the school but has been reached by phone, the parent must be given an opportunity to speak to the on-scene 911 responders and the student if it is feasible and it will not interfere with the proper discharge of the on-scene 911 responders’ duties and responsibilities.

D. If the parent requests that his or her child not be transported to the hospital, the on-scene 911 responders will obtain relevant information from DOE staff, the parent and others as appropriate and determine whether the parent’s request may be honored in accordance with FDNY policies and procedures for Refusal of Medical Assistance.
E. If it is determined that the student does not require emergency treatment and/or transport, school officials and the parent shall discuss appropriate immediate next steps, including but not limited to whether the student should be returned to class.

F. If the school staff is unable to contact the student’s parent, the on-scene 911 responders will obtain relevant information from DOE staff and others as appropriate and then determine whether the student requires emergency medical treatment and/or transport. If it is determined that the student will be transported to the hospital, school staff must accompany the student. If the parent does not arrive by the end of the staff member’s school day, the staff member must contact the principal/designee for further instructions.

G. In no circumstance should 911 be called or employed as a disciplinary response or disciplinary measure because of a student’s behavior. Furthermore, 911 should not be used in lieu of or as an alternative to de-escalation strategies or resources, where such strategies and resources can be safely used to address the crisis as set forth in I.A.2 above.

H. Schools may not request or require a mental health clearance letter as a condition of a student attending or returning to school.

I. Following any behavioral crisis, school staff should meet with the parent (and the student where appropriate) to discuss appropriate positive behavioral supports and interventions for the student.

III. CRISIS INTERVENTION PLANS

A. Each school’s Crisis Response/Prevention Education/Intervention Team (Crisis Intervention Team) must complete a Crisis De-escalation Plan as part of its Consolidated School and Youth Development Plan. Such plan must:
   1. include strategies for de-escalating behavioral crisis situations;
   2. identify locations in the school building in which students in crisis may be safely isolated from others;
   3. identify any school staff trained in de-escalation techniques;
   4. identify in-school and community resources that are available to the school and parents (e.g., mental health clinics, mobile crisis teams, facilities that provide urgent/same-day mental health assessments); and
   5. describe how crisis de-escalation and response protocols are communicated to school staff.

IV. REPORTING PROCEDURES

A. The principal/designee must notify the DOE’s Emergency Intake Center (EIC) at (718) 935-3210 whenever 911 has been contacted.
B. The principal/designee must file an Online Occurrence Report (OORS Report) within 24 hours of the incident for all school-related incidents, including all incidents for which 911 was contacted.

C. The Office of Safety and Youth Development (OSYD) provides a help desk to assist with any technical questions regarding the filing of an OORS report. The help desk is available from 8:00 am to 5:00 pm Monday through Friday. To contact the help desk, call (718) 935-5004 and ask for the OSYD Web Support.

D. Upon request, parents have the right to receive a copy of their child’s occurrence report in accordance with Chancellor’s Regulation A-820 and the Family Educational Rights and Privacy Act (FERPA).

V. NOTIFICATION

A. Each Crisis Intervention Team must conduct an orientation for all school staff, including non-instructional staff by October 31st. The orientation session must include a presentation of the policies and procedures set forth in this Regulation and the school’s Crisis De-escalation Plan.

B. Each school must certify by October 31st that it has conducted the orientation session in its annual Consolidated School and Youth Development Plan.

C. By October 31st, the policies and procedures set forth in this Regulation and the Crisis De-escalation Plan must be addressed at a School Safety Committee meeting at which an in-house School Safety Agent Level III/designee must be present.

D. A copy of this Regulation must be made available to parents upon request.

VI. INQUIRIES

Inquiries regarding this Regulation should be addressed to:

Office of Safety and Youth Development

N.Y.C. Department of Education

52 Chambers Street – Room 218

New York, NY 10007

Telephone: 212-374-5501

Fax: 212-374-5751