

Emergency Seclusion Reference Guide

The Emergency Seclusion Reporting Tool is used to document and submit required information regarding incidents of emergency seclusion in accordance with 603 CMR 46.00 and 603 CMR 18.00. Users should complete all required fields and ensure information entered is accurate and consistent with local documentation.

Step 1: Access the Reporting Tool

After logging into the Security Portal, navigate to the **Restraint and Emergency Seclusion Data Collection** application.

On the landing page:

1. Select your organization.
2. Select the appropriate school or program.
3. Select the reporting year.
4. Click **Next** to begin entering a new incident.

Restraint and Emergency Seclusion Data

uat User Name:

School Year 2025-2026 Restraint and Emergency Seclusion Data Collection

This reporting system collects all information on the use of each physical restraint and emergency seclusion on students in publicly funded elementary and secondary education programs, including all Massachusetts public school districts, charter schools, virtual schools, collaborative education programs, and special education schools approved under 603 CMR 28.09, as provided in 603 CMR 18.05(5)(h)

This reporting system has been enhanced to reduce duplicative reporting efforts related to restraints that result in student and/or staff injuries. By completing and submitting a data record in this system, **you no longer need to complete and submit the separate "Student/Staff Restraint Injury Report" whenever such notification to the Department is required.**

You may review the Prevention of Physical Restraint and Requirements regulations (603 CMR 46.00) at:<http://www.doe.mass.edu/lawsregs/603cmr46.html>.

You may review the updated regulations for 603 CMR 46 and 603 CMR 18 at: <https://www.doe.mass.edu/specialeducation/policy/dese/advisories/memo-sy2025-2026-1.html>.

If you have any questions or need assistance with the Student Restraint and Emergency Seclusion Data Collection system, email restraint@doe.mass.edu for restraint questions and specialeducation@mass.gov for questions regarding emergency seclusion.

Please enter the application by first selecting your organization below, and then clicking "Next".

Organization:

ACCEPT Education Collaborative - 05500000

Schools/Programs:

All

Year :

2025-2026

Next

Step 2: Locate the Student

To begin a new emergency seclusion report:

Restraint and Emergency Seclusion Data for Worthington (03490000) - School Year 2026-2027

[Return to Organization List](#)

The 'Incidents Submitted' table below tracks the student restraint and emergency seclusion entries that are completed and added for review and/or export to Excel. To edit an existing student restraint or emergency seclusion entry, click the associated edit or delete link listed in the table. The 'Incidents Saved Partially' table below tracks the student restraint and emergency seclusion entries that are partially completed, and additional information is needed to validate and add for review. To edit an existing partially saved restraint or emergency seclusion entry, click the associated edit or delete link listed in the table. The partially saved entries must be completed and submitted in order to certify the Restraint and Emergency Seclusion collection for your district.

[Add New Emergency Seclusion](#)

[Add New Student Restraint](#)

1. Add New Emergency Seclusion
2. Enter the student's SASID (State Assigned Student Identifier).
3. Select **Lookup Student**.
4. Verify that the student's information displays correctly before continuing.

Add new Emergency Seclusion Incident Data - Worthington(03490000) - School Year 2026-2027

[Return to View Existing Student Data](#)

Student Information

Please enter SASID of the Student and click the 'Lookup Student' button to start adding a new emergency seclusion incident.

SASID:

*

[Lookup Student](#)

The system will display the student's name, date of birth, and other identifying information.

Step 3: Enter School and Incident Information

Complete the following required fields:

School Information

- School or program where the incident occurred.
- Whether the student has an Individualized Education Program (IEP).

School Information

School: *

Does student have an IEP: *

Select One

Select One

Incident Details

- Date of incident.
- Start time of emergency seclusion.
- End time of emergency seclusion.
- Location where emergency seclusion occurred.

Incident Details

Date of Incident: *

Start Time: *

End Time: *

Describe Location of Emergency Seclusion: *

Does this report involve multiple episodes of seclusion? *

Select One

Was the student secluded for longer than 30 minutes? *

Yes

No

The system will calculate the duration based on the start and end times entered. You will also be asked whether the student was secluded for longer than 30 minutes.

Step 4: Document Personnel Involved

Provide information for staff involved in the emergency intervention.

Staff Administering Emergency Seclusion

For each staff member involved, enter:

- Name
- Job title
- Whether the individual received behavior support training within the past year

Personnel Involved

Person 1: Who Administered the Emergency Seclusion

Name: *

Title: *

Received behavior support training in the past year? *

Select One

Person 2: Who Administered the Emergency Seclusion

Name:

Title:

Received behavior support training in the past year?

Select One

Person 3: Who Administered the Emergency Seclusion

Name:

Title:

Received behavior support training in the past year?

Select One

Observers

For each observer, enter:

- Name
- Job title
- Whether the observer received behavior support training within the past year

Observer 1

Name:

Title:

Received training in the past year?

Select One

Observer 2

Name:

Title:

Received training in the past year?

Select One

Observer 3

Name:

Title:

Received training in the past year?

Select One

Include all staff who administered or continuously observed the student during the incident.

Step 5: Complete Narrative Descriptions

Several narrative fields require detailed descriptions of the incident.

Antecedent Conditions

Describe events, circumstances, or environmental factors that occurred immediately before the behavior escalated.

Behavior Prompting Emergency Seclusion

Describe the student's behavior that resulted in the emergency intervention.

De-escalation Strategies Attempted

Describe all calming and de-escalation techniques, supports, and alternatives attempted prior to emergency seclusion.

Description of the Emergency Seclusion Process

Describe the incident from the moment the student was not permitted to leave the space until the student was permitted to exit.

Include:

- How the student entered space.
- How staff-maintained safety.
- The name or role of the staff member and location of the staff member when continuously observing the student.

Narrative Descriptions

Antecedent conditions: *

Behavior that prompted emergency seclusion: *

De-escalation techniques and alternatives attempted prior to the use of emergency seclusion: *

Please describe the incident, beginning when the student was unable to leave the space and ending when the student was permitted to exit. Include the name of the staff member who observed the student throughout the incident.

Monitoring and Observation

Describe how continuous monitoring occurred throughout the incident.

Ongoing De-escalation Efforts

Describe calming and de-escalation strategies used during the intervention or explain why additional interventions could not be safely implemented.

How the Incident Ended

Describe the circumstances under which the student was permitted to leave the space.

Description of monitoring and observation of student: *

Ongoing attempts at de-escalation and calming or why such attempts were unsafe or counterproductive: *

How emergency seclusion ended: *

Step 6: Injuries and Medical Care

Indicate whether any injuries occurred to the student and/or staff member as a result of the emergency seclusion incident.

- Select **No injuries** if neither the student nor staff sustained an injury.
- Select **Injury to Student** if the student sustained any injury during the incident.
- Select **Injury to Staff** if a staff member sustained any injury during the incident.
- Select all options that apply.

If an injury occurs, provide a brief description of the injury in the **Injuries Description** field, including:

- Who was injured (student and/or staff);
- The nature of the injury; and
- Whether medical care or assessment was provided.

Note: Selecting **Injury to Student** and/or **Injury to Staff** will automatically notify the Department. Please ensure the injury description is accurate and complete.

Injuries and Medical Care

Injuries and Medical Care (if any): *

☐ No injuries ☐ Injury to Student ☐ Injury to Staff ☐ Injuries to Both

In the event of a student and/or staff injury, the Department will be automatically notified.

Injuries Description:

Step 7: Documentation Requirements

The reporting tool requires confirmation that all required documentation existed prior to the use of emergency seclusion.

Documentation Requirements

Did the School/Program obtain all required documentation prior to the emergency seclusion?*

This documentation must include: the student has a history of repeatedly causing serious self-injuries and/or injuries to other students or staff, or historical nonresponse to directives or other lawful less intrusive behavior interventions, or interventions deemed inappropriate or failed to ensure the safety of the student and others; documentation by a licensed physician that there are no medical contraindications; documentation by a licensed mental health professional that there are no psychological or behavioral contraindications; and consent from the student's parent and, if appropriate, the student, to use seclusion in an emergency situation; written approval by the principal; documentation that each adult anticipated to engage in the emergency seclusion received alternate behavior intervention and management technique training.

☐ Yes

☐ No

If no, please explain:

Indicate whether the school or program obtained the required documentation prior to the emergency seclusion, including:

- Documentation of repeated serious self-injury or injuries to others, or historical nonresponse to directives or other lawful less intrusive behavior interventions, or interventions deemed inappropriate or failed to ensure the safety of the student and others.
- Documentation from a licensed physician indicating no medical contraindications.
- Documentation from a licensed mental health professional indicating no psychological or behavioral contraindications.
- Parent consent and, when appropriate, student consent.
- Written approval by the principal; documentation that each adult anticipated to engage in the emergency seclusion received alternate behavior intervention and management technique training

If any required documentation is not available, provide an explanation.

Step 8: Document Room Conditions

Confirm whether the room used during the emergency seclusion:

- Was clean.
- Was safe.
- Was sanitary.
- Was appropriate for calming the student.

You will also be asked to provide:

- The date of the most recent room inspection.
- An explanation if the room was not inspected or did not meet requirements.

Room Conditions

Was the room that was used during the Emergency Seclusion clean, safe, sanitary, and appropriate for the purpose of calming the student? *

☐ Yes

☐ No

If no, please explain:

Date of last room inspection:



If room was not inspected by the School/Program, please explain:

Step 9: Follow-Up and Notifications

Enter information regarding required notifications and reporting.

Principal Notification

Record:

- Whether verbal notification was provided to the principal or designee.
- The time notification occurred.
- The date the report was submitted to the principal.

Principal Notification

Verbal Notification to Principal:*

☐ Yes

☐ No

Time:

▼

:

▼

▼

Report to Principal Submitted On:*

Parent/Guardian Notification

Record:

- Whether notification was provided.
- The date notification occurred.
- The method used (e.g., telephone, email, in person).

Written Report

Record:

- The date the written report was provided to the parent or guardian.
- The language used for communication.

Opportunity to Comment

Indicate whether the parent, guardian, or student was provided an opportunity to comment regarding the incident.

Parent/Guardian notification or documented attempts to contact (within 24 hours):

Parent/Guardian Verbal Notification Date:

Method:

Select One

Additional Comments:

Written report of administration of emergency seclusion sent to parent/guardian within 3 school working days on:

Date:*

Report sent in primary language of the parent/guardian:*

Select One

Please note that it is the obligation of the agency/program/LEA to ensure that any printed version of this information that may be used to satisfy the written reporting requirements of 603 CMR 46.06 is complete, accurate and meets the requirements of all applicable regulations. It is further the obligation of the agency/program/LEA to maintain copies of all such reports in the individual student record.

Final Review and Submission

Before submitting:

- Verify that all required fields marked with an asterisk (*) are complete.
- Review narrative descriptions for clarity and accuracy.
- Confirm dates, times, and personnel information.
- Ensure all required documentation and notification information are included.

Once reviewed, submit the incident record through the reporting tool.

Cancel

Submit Emergency Seclusion Form

Print
