

2/6/2017

Members of the House Corrections and Juvenile Justice Committee,

I am Kathryn Ellerbeck, Director of the Center For Child Health and Development (CCHD) at the University of Kansas Medical Center. I am a Developmental Pediatrician and a Past President of the Kansas Chapter of the American Academy of Pediatrics. The Center For Child Health and Development and the University of Kansas Medical Center sees over 1100 children per year for screening and diagnosis of Autism Spectrum Disorders and developmental delays. We serve the entire state of Kansas, including being national leaders in the use of telemedicine to better serve children from rural areas. Our Center is a part of the Department of Pediatrics at KUMC and includes a Developmental Pediatrician, Psychologists, Speech-Language Pathologists, Occupational Therapists and Social Workers to assist in the diagnostic and follow-up process for our families.

I am writing in testimony against HB 2243 allowing the use of mechanical restraints by school personnel who are not law enforcement officers. I believe that this bill is not in the best interest of children with special needs and not only violates the agreement made in 2016 regarding restraint and seclusion, but ignores the hard work and testimony of that committee. Almost all of the children seen at the CCHD qualify for Special Education services of some type, and usually qualify for an Individualized Education Plan (IEP) once they are of school age. As such, given that we see over 1100 Kansas children a year who have neurological and developmental disabilities, we believe we have a good understanding of these children, and the kinds of service needs in general children with these disabilities in Kansas schools.

The use of restraint for children with Autism Spectrum Disorder and developmental delays should only be done as a last resort and should be done by personnel trained in working with this population and in following specific behavioral support programming listed in the child's IEP. For children with Autism, who often experience significant sensory issues, the use of such restraint is especially damaging, and can destroy years of work by special education professionals in implementing well thought out programming.

In our experience, most children with Autism and other developmental delays do not need to be physically restrained or secluded if appropriate and well-designed programming is provided and

the IEP is followed. We are concerned that the use of physical restraints outside the arena of law enforcement by personnel who may not have adequate training will be harmful to children who have behaviors that result directly from their neurological and developmental disabilities. As a developmental pediatrician, I would never recommend such physical restraint be used, and would hope that proper behavioral and educational programming is encouraged. I urge you follow the original guidelines outlined by the Emergency Safety Intervention Task Force in 2016.

Kathryn Ellerbeck, M.D., MPH, FAAP

Director, Center For Child Health and Development