

**Revere Public School
Physical Restraint Report**

Student _____ **Date of Restraint** _____

Student SASID Number _____ **Student IEP:** YES NO

Report Prepared by _____ **Position** _____

Time restraint began _____ AM/PM

Subject (circle one)

Academic
Enrichment
Homeroom
Study Hall
Lunch
Recess
Other

Location of Restraint (circle one)

Classroom
Hallway
Cafeteria
Gymnasium
Bathroom
Outside
Other

Length (circle one)

< 1minute
1-5 minutes
5-10 minutes
10-20 minutes
>20 minutes

Staff administering restraint:

Name _____ Title _____

Restraint Trained YES NO

Name _____ Title _____

Restraint Trained YES NO

Observers (if any):

Name _____ Title _____

Name _____ Title _____

Was anyone injured during the restraint? YES NO

Description of injuries and medical care provided, in any:

Description of the child's behavior and reaction during the restraint; how the restraint ended; and how the child's well-being was monitored:

Description of why restraint hold was chosen:

Antecedent activity in the classroom:

Description of de-escalation techniques and alternatives to restraint that were attempted:

Description of disciplinary action taken:

Behavior that justified the need to use restraint:

If the restraint lasted longer than 20 minutes please provide an explanation for why an extended restraint was required:

Name of Principal or designee who was immediately notified and if necessary approved continuation beyond 20 minutes:

Administrator verbally informed of restraint: *Written Report by next working day

Name _____ Title _____

Reported by _____ Title _____

Parent/guardian who was informed of this restraint: *Must be within 24 Hours, written report within three working days with Opportunity for Parent Comment

Name _____ Phone _____

Called by _____ Title _____

Restraint has been listed in school's physical restraint log: YES Date: _____

If student has been restrained multiple times within a week period Principal has reviewed circumstances with the team: N/A YES Date: _____

***Principal will review physical restrain log monthly to consider patterns and need for additional training.**