This report has been prepared by:

Name:

CODE: JGAB-Form-4 ADOPTED: 12/10/18

## **Debriefing Notes: Physical Restraint / Seclusion Incident**

Within two (2) school days of use of physical restraint/seclusion, a documented debriefing by appropriate staff, including staff involved in the restraint/seclusion must occur. OAR 581-021-0556(2). The purpose of the debriefing is to review the incident and take any necessary actions to reduce the chances that such an incident will reoccur. Those attending the debriefing meeting shall have the opportunity to review the Physical Restraint/Seclusion Report documenting the incident. Parents must be invited to debriefing meetings and receive a copy of the debriefing report. Physical Restraint Incident Seclusion Incident Date of Incident Date of Debriefing: Time: Location: A. Student Information: Name: DOB: IEP Grade: 504 Plan GenEd student **B. School Information:** School: District: C. Debriefing Notes: D. Further Action To Be Taken / Follow-up Actions: 2. Signature of those attending debriefing meeting **Position** Teacher Principal or Administrator Case Manager/SpEd Teacher Parent

Position:

<sup>\*</sup> Send the completed form to: Building Administrator, Cum file, Working file, Special Education Office & Parent.