



Midwestern Intermediate Unit IV
Safety-Care Documentation

Date _____

Student _____ Referring Staff/Teacher _____

Dates Parent Was Notified

Date call made _____

Date letter sent home _____

Date IEP Team Meeting Scheduled for _____

IEP team meeting held within 10 school days of restraint

Yes No On _____

Date IEP Waiver Signed by Parent _____

- Waiver not signed or returned by parent
- Attempts to get waiver signed (A minimum of three times)

Considerations and discussions during IEP meeting

- FBA
- Reevaluation
- New Behavior Support Plan
- Revised Behavior Support Plan
- Change of Placement

Restraints listed in IEP

Yes No

****REPORTING OF RESTRAINT IS A MAXIMUM OF 3 SCHOOL DAYS FROM INCIDENT****

****ANY INJURIES AS A RESULT OF RESTRAINT MUST BE REPORTED WITHIN 24 HOURS****

Were there any injuries due to the restraint? _____

Type of injury due to restraint:

Student _____

Staff _____

If a student is injured during a restraint they must be seen by the nurse and the Student Accident Form completed within 24 hours of incident.

If staff is injured during the restraint, the staff person should complete a Worker's Compensation form within 24 hours of incident.

For Office Use Only

Date restraint/injury reported to district
