

APPENDIX 1: Reporting templates for physical restraint

Instructions

1. Attach the debriefing forms and any other relevant form (eg, Injury Form) to the Physical Restraint Incident Form.
2. Place copies of these forms in the student's file. Make the copied forms available to the student's teacher/s and the student's parents or caregivers.
3. Share data on physical restraint incidents with the Board of Trustees via the Principal's report. Only share this data in a session that excludes the public.

1. Physical restraint incident report (staff)

- The staff involved in restraining the student should complete this as soon as possible and within 24 hours.
- The incident report should be signed off by the staff involved, any staff who witnessed the incident, and the Principal or Principal's delegate.

Note: If the Principal applied the restraint, a delegated senior management team member should sign off the report.

2. Physical restraint debriefing form (staff)

- Within two days of the incident, a debriefing with the staff involved should be held by the Principal or Principal's delegate. Another member of staff who was not involved in the restraint should attend.
- If a behaviour specialist from the Ministry or RTLB service is supporting the student's team, they should be part of the debriefing process.

Notes: The Principal is responsible for facilitating the debriefing unless they are the person who applied the physical restraint. If this is the case, a suitable senior leader in the school should take this role. If police have been involved they should be invited to the staff debriefing too.

3. Physical restraint debriefing (parents or caregivers and, if appropriate, the student)

- The parents or caregivers should be notified and involved in discussion about the incident with the Principal or Principal's delegate as soon as possible so they can monitor their child's physical and emotional wellbeing at home.
- The parents or caregivers should be given the opportunity to discuss the incident and invited to become active partners in exploring alternatives to restraint.

Note: The staff member who applied the physical restraint should not be part of this meeting.

Physical restraint incident report

Report completed by	Date of incident		Date of report	
Name of student				
Date of birth		Gender M <input type="checkbox"/> F <input type="checkbox"/>		
Ethnicity				
Time restraint started				
Time restraint ended				
Name/s of staff member/s administering restraint				
Trained in safe physical restraint?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Other staff /adults who witnessed				

Place where restraint occurred	
Classroom	
Corridor	
Assembly hall	
Outdoor area	
Toilet block	
Administration area	
Other (identify)	

Behaviour directed at	
Staff member – name	
Student – name	
Self – describe how they intended self-harm	
Property – describe potential injury to self or others	

Reason restraint was considered necessary	
Imminent danger, serious risk of injury – describe	
Actual injury – describe and attach injury form	

Please turn over and complete the reflection section.

Reflection

Events leading to the incident

Describe what was happening before the behaviour started to escalate. What was the student doing? What do you think might have triggered the behaviour? How were other students reacting to the student?

Behaviour of the student

What did you notice about the student's behaviour that alerted you that they were struggling to cope? Think about the way they looked, for example facial expressions, physical signs, language.

What did you try before the restraint?

Describe the alternative techniques and interventions tried to prevent the emergency, including a description of the de-escalation strategies you used. What was the response from the student?

The restraint method used

Describe the nature of the physical restraint. Include the type of hold and number of people required.

Monitoring

Describe how the student's physical and emotional distress was monitored while they were restrained.

After the restraint ended

Describe the mood of the student following the restraint. What help and support were they offered?

If there's a next time

What could be done differently in the future to prevent the need for restraint?

How about you?

How are you feeling and what support do you need?

Signature of person who applied the restraint

Signatures of any staff witnesses

Debriefing form for staff involved in physical restraint incident

Date of incident	
Date of debriefing	Time of debriefing
Names of the people at the debriefing	
Findings of debriefing	
Next steps/actions	
Principal or Principal's delegate signature	

Physical restraint debriefing form – parents or caregivers, student

Date of incident	
Date of debriefing	Time of debriefing
Names of the people at the debriefing	
Findings of debriefing	
Parent or caregiver – comments and suggestions	
Student – comments and suggestions	
Next steps/actions agreed	
Signatures	
Principal or Principal's delegate:	
Parents or caregivers:	
Student:	

Incident of Physical Restraint Form

Information for the Ministry of Education and the Employer			
Completed by			
Date of Incident		Date of Report	
School name & number			
Student's National Student Number (no name)		Date of Birth	
Gender		Year Level	
Ethnicity			
First time the student has been physically restrained?	Yes / No (delete one)	The student was physically restrained more than once during the day?	Yes / No (delete one) If yes, how many times?
The student has an Individual Behaviour Plan?	Yes / No (delete one)	Physical restraint was a part of the plan?	Yes / No (delete one)
Were parents notified?	Yes / No (delete one)		
Was anyone injured?	Yes / No (delete one) If yes, describe		
Was the staff member who applied the restraint a teacher or authorised staff member?	Yes / No (delete one) If no, provide details		

<p>Role of staff member who applied the restraint</p>	<p>Teacher / Other (delete one)</p> <p>If Other, describe role:</p>
<p>Did the staff member who applied the restraint receive any training prior to the incident?</p>	<p>Yes / No (delete one)</p> <p>If yes, what training?</p>
<p>Why was the use of physical restraint considered necessary?</p>	
<p>Serious and imminent risk to the safety of the student or any other person – describe</p>	
<p>Any other comments</p>	

Required Action

Complete the form above and email it to the Ministry of Education at <mailto:physical.restraint@education.govt.nz> Provide a copy to the employer (board of trustees, sponsor of a partnership school kura hourua, or manager of a private school)

Note: The information in this form may be the subject of requests made under the Privacy Act 1993 and the Official Information Act 1982.