

Actions of Staff:

Physical Intervention (Type(s) of Right Response):

Result of Actions:

1. Were local law enforcement involved? (Attach Police Incident Form) _____
2. Were there bruises, scratches, contusions or other marks on the client? _____
3. Were there bruises, scratches, contusions or other marks on the staff? _____
4. Was medical attention required by client, staff, or others? _____

Other Person(s) Involved with Physical Intervention:

<i>Name</i>	<i>Position/Title</i>	<i>Type of Involvement</i>

Follow-Up Plan:

Staff Signature _____ **Date** _____

Supervisor Signature _____ **Date** _____

Parent Signature _____ **Date** _____