

☐ Emergency ☐ In accordance with IEP

Manchester Public Schools - Incident Report of Seclusion

Any use of physical restraint is to be documented and placed in the building-based binder and to be shred at the close of the school year. All incident reports are sent to the Assistant Superintendent for Pupil Personnel Services.

Seclusion: The confinement of a person in a room, whether it be alone or with supervision in a manner that prevents the person from leaving the room. In a public school seclusion does not mean any confinement of a child where the child is physically able to leave the area of confinement including in-school suspension and time-out.

District Information

School District: Manchester	Address: 45 North School St	Telephone: 860-647-3452
School: _____	Address: _____	Telephone: _____
Date of Restraint: _____	Date of Report: _____	Person Preparing Report: _____
Time Seclusion Initiated: _____	Time Seclusion Ended: _____	Total Time of Seclusion: _____

Student Information

Student's Name: _____ SASID: _____ DOB: _____ Age: _____

Gender: ☐ M ☐ F Grade: _____ Race: _____ Disability: _____

☐ The student currently receives special education services. ☐ 504

☐ The student is being evaluated or considered for eligibility for special education services.

Staff Information

Name of staff administering seclusion: _____	Title: _____
Name of staff monitoring/witnessing seclusion: _____	Title: _____
Name of staff monitoring/witnessing seclusion: _____	Title: _____
Name of staff monitoring/witnessing seclusion: _____	Title: _____

Student activity/behavior precipitating use of seclusion

Describe the location and activity in which the student was engaged just prior to the seclusion:

Describe the risk of immediate or imminent injury to the student secluded or to others, that required the use of seclusion:

Staff Activity/Response

Describe other steps, including de-escalation strategies implemented to prevent the emergency which necessitated the use of seclusion:

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Describe the nature of the seclusion: (Was it used as an emergency procedure to prevent immediate or imminent injury to the student or others? Was it used as a behavior intervention as indicated in the IEP? If in the IEP, did the situation/emergency meet the criteria as outlined?)

Did the student demonstrate physical distress while in seclusion? ☐ Yes ☐ No

Indicate time student was monitored for physical distress:

Describe the disposition of the student following the use of seclusion:

Was the student injured during the emergency use of seclusion? ☐ Yes ☐ No

If "Yes", complete and attach a Report of Injury.

Parent/Guardian Notification

Was parent/guardian notified within 24 hours of the incident? ☐ No ☐ Yes (indicate manner) _____

Was a copy of the Incident Report sent to the parent/guardian within 2 business days? ☐ No ☐ Yes

Is a PPT recommended to modify the IEP? ☐ No ☐ Yes IF "Yes", date of notice: _____