BEHAVIOR INCIDENT REPORT

Participant N	ame:			
Facility/Loca	tion:			
Date:			Time:	
Submitted by	7:			
What activity was doing se before the inchim/her, ever	veral hours before cident. For examp	g before become the incident ple, write dow	and what he/s on any outings	? This can include what he/she he was doing immediately s, visitors or activities done with to the Communication Book
that may be r	elevant or directly	y related to his	s/her agitation	to him/her becoming agitated a. For example, did you ask a change in the routine?
Incidents of What behavior		ve (if they occ	eur in a specifi	ic order, please number them).
☐ Grabbing	☐ Pinching	☐ Kicking	☐ Slapping	☐ Hitting ☐ Swearing/Yelling
	☐ Hair Pulling			
_			_	ving things
				<u> </u>
				·
- Other bene	aviors (piease des	c110c)		<u>.</u>
Describe the	Incident:			

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What did you do to try to de-escalate th What did you do or say?	ne situation or prevent it from getting worse?
Did you have any physical contact with For example, did you have to grab his/h	
Did he/she spend any time in their bedr 1) How he/she went to room – volu 2) How long he/she spent in the roo 3) What did he/she do while in roo	oom?
How did he/she finally calm down?	
Describe the indicators that he/she was	becoming agitated.
Did you need to call for back up?	
Reporting Staff Signature:	Other Staff Present:
Supervisor:	Date:
Program Coordinator:	Date:
Executive Director:	Date:
OFFICE USE ONLY Response & Recommedations:	
Who was contact in the response and re	ecommendation?
Parents/Guardians Notified?	