Duluth Public Schools #709
Annual Summary of Use of Restrictive Procedures

School: _____ **Date:** _____

Staff Training:

How many staff members received the required training in your building? _____

What are the training needs for next year? _____

Physical Holding:

How many physical holdings were used during the school year? _____

Were physical holdings used only in response to an "Emergency?" Yes____ No ____

If the answer is "no," explain why and the corrective action taken: _____

Prohibited Use:

Did the debriefing teams find incorrect or prohibited use of a restrictive procedure? Yes____ No ____

If "yes," what corrective action was taken: _____

Building Oversight Committee Recommendations for the Next Year:

Signature of person completing this form: