


SAFETY PLAN

 (student picture)	School Safety Plan for:				
	School:			Grade/ Class:	
	Strength/ Likes/ Interests:	Unsafe Behaviour:	Triggers:	Indicators of Imminent Risk:	
Caring Adults/ School Team Members (and Contact Info):	Position:	Role/ Responsibility:	BMS Trained?	Parent/ Guardian/ Caregiver	Contact Phone Numbers
1.			<input type="checkbox"/> yes <input type="checkbox"/> no		
2.			<input type="checkbox"/> yes <input type="checkbox"/> no		
3.			<input type="checkbox"/> yes <input type="checkbox"/> no		
Observable signs of dysregulation:			Observable signs of regulated state returning:		
Non-physical Intervention Methods (use of calming techniques, space, break room, etc.):					
Safe Physical Intervention (last resort):			After any incident where staff, student(s) or others were at imminent risk:		
(Physical containments must be done by BMS trained staff only, with adequate support present, only when imminent risk is present)			<input type="checkbox"/> Communication: If any student was hurt, parents/caregivers will be contacted if needed by classroom teacher or principal		
			<input type="checkbox"/> Documentation: If first aid is required or a near miss has occurred, incident reporting forms should be completed by the end of the day		
			<input type="checkbox"/> Support/Follow Up/Debrief: Arrange debriefing with staff/ student(s) involved. Determine if any changes are needed to the safety plan and follow up with team(s) as needed.		
Developed by:					
<input type="checkbox"/> ABA Team Involved <input type="checkbox"/> CST Team Involved <input type="checkbox"/> CYW/ SW Involved					

*If not supported by Spec Ed/ Wellbeing submit a common referral to ensure appropriate support and proactive strategies are in place and communicated to appropriate staff.

Are there additional plans in place (Safe Response, Wellbeing, Support Plan, Social Emotional Learning Plan, etc.)? yes no ** Please attach a copy to this document**