Date

Parent Name

Address Line One

Address Line Two

Dear Sir or Madam,

This is to notify you that on \_\_\_\_\_\_\_\_(date) at \_\_\_\_\_\_(time), your child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name), was restrained at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(placement) because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Please know that preventive strategies for de-escalation were implemented prior to avoid the use of a restraint. Immediately following the restraint, debriefing occurred with your child. This debriefing included strategies that may have prevented the use of restraint, as well as potential supports identified by your child.

Please contact the facility for any concerns or questions you may have regarding your child’s care. In addition, you may follow up with your child’s assigned specialist \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Signature by facility supervisor or leadership

Signee’s title