

**Northwick Park Primary and Nursery Academy**

**PHYSICAL RESTRAINT INCIDENT REPORT FORM**

**DATE:**

**TIME:**

**Name of pupil :**

**Year :**

**Member/s of staff involved:**

**Incident (include any factors that may have led to your intervention):**

**Action taken (included any other agencies, if any, contacted :**

**Form completed by:**

**Date:**