

Date XXXX

Re: Student

Address

XXX School

Address and phone numbers

XXXX, Principal

Dear Parent/Guardian/Caregiver/Student:

As a follow up to our conversation on DATE, I am writing to provide you with further information on STUDENT NAME’S safety plan.

As discussed, a Safety Plan is a plan developed for a student whose behaviour is known to pose an ongoing risk of injury to themself and/or to others. It can serve as a crisis-response plan that outlines the roles and responsibilities of staff in supporting and assisting in managing specific behaviours. The development of the safety plan involves all staff that work on an ongoing basis with STUDENT NAME, as well as parents/guardians/caregivers and the representatives from community agencies working with the student and/or family. Students who are 16 years of age or older are included in the consultation process.

Your input is crucial to the development of STUDENT’S Safety Plan. I invite you to provide information that can help to develop the plan by completing the Safety Plan Consultation Form that follows on page 2 of this letter.

If STUDENT NAME has worked with or is currently working with relevant community or agency personnel and you would like them to provide input into the safety plan, please complete the attached consent form. Permission is required from parents/guardians/caregivers or students 16 years of age or older before we can contact them.

Please reach out to STUDENT NAME’S classroom teacher if you would like to discuss the safety plan and/or if you require additional assistance (e.g., translation, a sign language interpreter).

Thank you,

Principal

**Student Safety Plan**

**PARENT/GUARDIAN/CAREGIVER/STUDENT CONSULTATION FORM**

Completion of this consultation form will assist school teams in the development of a Safety Plan for**STUDENT**. All information in the Safety Plan is strictly confidential.

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| --- | --- |
| Student’s First Name | Student’s Last Name |
|  |  |

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| --- | --- |
| **Area** | **Parent/Guardian/Caregiver/Student Input** |
| **DESCRIPTION OF SPECIFIC BEHAVIOUR and/or RISK OF INJURY BEHAVIOUR TO SELF AND/OR OTHERS** |
| **KNOWN TRIGGERS** (known factors that will increase the probability of specific behaviours): |
| **INDICATORS OF ESCALATION** (physical signs/cues that the student is going to display specific behaviours outlined above): |
| **STRATEGIES FOR AVOIDING RISK OF PHYSICAL INJURY** |
| **NON-PHYSICAL RESPONSES, NON-PHYSICAL INTERVENTION/STRATEGIES THAT CAN BE USED**: |
| **DO:** | **DON’T:** |