Restrictive Intervention Debriefing Inventory

Question 1: Please tell me what happened on/when?
Elements:
Time of Day:
Date/Day of the week:
Duration:
Location:
Specific Behavior indicating physical threat or danger:
Frequency:
Injury/Description of any injuries:

Question 2: What was going on before you got angry or upset?
Elements:
What were you doing that might have given the staff worker an idea that you were upset or angry?
Did you feel that you were going to hurt yourself or anyone?:
Were you damaging any property?:
Were you threatening anyone?:
Did you need help?:

Question 3: When you were upset, what did the staff worker do?
Elements:
What specifically did he or she do?:
What specifically did he or she do that was helpful?:
What was not helpful?:
Did you feel that the response was supportive and respectful?:

Question 4: Did the staff hold you, or put you in S or R while you were angry and upset?
Elements:
Please describe what the staff person did?:
Were you hurt, frightened, etc?:
Did you see a nurse or a doctor?:
How did you feel?:
Have you been held or restrained before?: How often?:

Question 5: When the incident was over whom did you talk to? Did you and the staff talk about what happened?
Elements:
When did this talk happen?:
How long did it take?:
What did you learn from the talk?
Has your behavior changed since this incident?: In what way?:
Did you develop any plan to help control your anger or frustration?:
Did this incident affect how you feel about the worker, other staff or the facility?:
Did you talk to your parents about the event?:

Question 6: Looking back on the incident how are you feeling about being here?
Elements:
Do you have any worries or fears about getting out of control, being physically restrained?:
Is there anything you can do to help feel better?:

Age
Length of stay
Gender
Reason for placement