



Behavior Services Reporting Variance Form

Under 12.a.4.7, the 2013 Provider Manual states, "Behavior service providers may request a reporting variance from the DIDD Director of Behavioral and Psychological Services when uses of specialized behavioral safety interventions are anticipated to exceed ten (10) uses per month." To request a recording variance please complete the following form and send to Bruce E. Davis, Ph.D. at bruce.davis@tn.gov.

Name of Person Supported	
Name and title of Person Making Request.	
Describe Restraint or Protective Equipment (Attach pictures).	
Describe how the restraint is used (Attach BSP).	
Describe the current use of the restraint in terms of frequency and duration.	
Describe efforts to fade the use of restraint or protective equipment.	
Describe the data collection method.	
Name and title of person who will complete the narrative for the monthly IRF.	
Name and title of person responsible for submitting the monthly IRF.	
Sample narrative for IRF using most recent month's data or projected data.	