



School Emergency Plan

School year 20__ - 20__

School Name:

Address:

Main Office Phone #:

Student Start Time __:__

Student Dismissal Time __:__

Principal:

Cell Phone #:

Number of students:

Number of Staff:

Building square footage:

Cluster Superintendent:

Office Phone #:

Cell Phone #:

Cluster Sergeant:

Cell Phone #:

Name of the person who completed this plan:

Date Plan was submitted to DSSS for review/approval:

___ / ___ / ___

Reviewed and approved by:

Date:

ICS CHAIN OF COMMAND, COMMAND TEAM, AND OSET POSITIONS

The **Incident Command System (ICS)** is a nationally recognized organizational and management tool that is utilized by RCSS when responding to an emergency that identifies an incident commander and **on-site emergency team (OSET)** members who are assigned specific duties/responsibilities to respond to an emergency. **Command Team** members, who are also members of OSET, should follow the structure of the ICS and coordinate emergency efforts with OSET members. Staff must be identified in advance, due to the critical nature of these positions.

Assignment
Incident Commander (Principal/Designee)
1.
2.
3.
4.
Operations Team Leader
1.
2.
3.
Planning Team Leader
1.
2.
3.
Logistics Team Leader
1.
2.

Finance/Administration Team Leader
1.
Recorder/Tracking Coordinator
1.
2.
3.
Student/Staff Accountability Coordinator
1.
2.
3.
Parent/Child Reunification Coordinator
1.
2.
3.

COMMAND POST

Indoor and outdoor command post locations must be determined. The indoor command post is a securable location/room from which the command function/incident management will operate during the emergency. Access to computer(s), printer, phone(s), fax and emergency kit is recommended. Also, it is imperative that the school's emergency kit, and a laptop, if available, are brought to the outdoor command post.

Indoor Command Post Locations (i.e., main office, workroom, principal's office):

Primary Location: _____ . **Alternate Location:** _____ .

Outdoor Command Post Locations (i.e., parking lot, athletic field, stadium):

Primary Location: _____ . **Alternate Location:** _____ .

TASKS TO BE CONSIDERED BEFORE, DURING, AND AFTER AN EMERGENCY

During the school year, a staff member will be designated for the following:

1. Maintain emergency kit.
2. Maintain the NOAA weather radio.
3. Bring the emergency kit when school evacuates.

Location of AED (Automated External Defibrillator):

Location of First Aid Kits:

TYPES OF EVACUATIONS

Fire: Evacuate at least **300 feet** from the building.

Bomb Threat or Multi-hazard Threat: Evacuate at least **1000 feet** from the building.

EVACUATION SITES

On-Campus Multi-hazard Evacuation Locations: (i.e., athletic field, stadium, parking lot, playgrounds)

Primary Location: _____ . **Alternate Location:** _____ .

Off-Campus Multi-hazard Locations: (i.e., church parking lot, another school, vacant field, cul-de-sac).

During inclement weather should have alternate site inside a structure.

Primary Location: _____ . **Alternate Inside Location:** _____ .

STUDENT/STAFF ACCOUNTABILITY

Students/staff will be accounted for during any emergency, to the extent possible. This duty is assigned to the accountability coordinator. All information will be relayed to arriving emergency personnel.

SAFE LOCATIONS

If outdoor activities are in progress when a Lockdown is activated in the school building, students and staff who are outdoors should be notified by public address system or portable radio and move away from the threat to a predetermined safe location(s). Staff should first visually scan, if practical, the safe locations for potential danger. Staff should, if possible, notify the school of their location. Depending on the circumstances of the emergency, the safe location(s) may need to be reconsidered. Please identify at least three safe locations for use by students and staff who are outdoors when Lockdown is activated.

1. _____
2. _____
3. _____

MEDIA STAGING AREA

This area must be separate from any multi-hazard evacuation location or parent/child reunification area.

Off Campus: (i.e., nearby street, park, open area, commercial area,) large enough to handle several large media trucks for several days if needed. _____.

AREAS OF REFUGE (AOR)

An AOR is established to shelter students/staff only, during a fire emergency evacuation, who cannot traverse stairways and when use of the elevators is prohibited.

Location of AOR _____.

Please identify students/staff with special needs and plan specifically for their needs. When possible:

- AORs on the second floor should face the outside (so you have outside windows).
- AORs should be close to the emergency exit stairwells.
- AORs should be separated by fire doors/smoke doors in hallways.
- AORs should have signage posted on the exterior window stating "Areas of Refuge," and also in the hallway by the classroom door.
- There should be two-way communications in that room and/ or a telephone that can be used for communications.
- AORs should be identified on the School Emergency Plan.
- Students and staff using the AOR should be identified on the School Emergency Plan.

SCHOOL FLOOR PLAN (one page per floor)

Each emergency plan must include the building's floor plan indicating the following: classroom numbers; weather-safe areas; gas; **main** electric, water, HVAC emergency cut-off locations, fire extinguishers, first aid kits, AED; and all relocatable classrooms, including their designated room numbers and locations of their exit doors. Do not include staff names.

Have there been any **physical changes** in your building and/or relocatable classrooms since last school year? Yes No.

***** If yes, submit an updated floor plan with this year's emergency plan. *****

PARENT/CHILD REUNIFICATION (PCR) PROCESS

Your school's **parent/child reunification process** should include the details of reuniting children with their parents/guardians. The methods of communicating the PCR process to parents/guardians also should be included in the emergency plan (i.e., principal's newsletter, school web page). The parent/child reunification process is an integral part of the emergency plan. Procedures for completing the PCR process and the Authorization for Release form are included in the attached instructions.

Name of Parent/Child Reunification Coordinator: _____.

Methods(s) to Inform Parents/Guardians about the PCR Process: _____

_____.

Name of Staff Person Who is Responsible for the PCR Box: _____.

The PCR box is a file box, paper box, or similar container that can be easily recognized and labeled and should be kept near the school's emergency kit. The contents should include student schedules, student emergency information, preprinted PCR process logs, completed Authorization for Release forms, clipboards, pens, pencils, directional signs, and tape for hanging the signs. Additional materials may be needed for reunification, such as two way-radios, tables, and chairs.

Guidelines for Implementing the Parent/Child Reunification Process. When possible:

1. Post signs on entrance doors and hallways to direct parents/guardians to the PCR area.
2. Use available staff members to assist with the implementation.
3. Assign available staff members and OSET members to locate and release students.
4. Use the three step approach:

Step 1: Use parent/child reunification process log to sign in parents/guardians and check identification. If necessary, refer to the child's Authorization for release form.

Step 2: Use the current student database/schedule cards to locate the student's current teacher room number. Give the assisting staff member the student's name, current teacher, and location. Staff member will retrieve the student and direct/escort him/her to the PCR area.

Step 3: Release student to the authorized guardian.

5. Special procedures for student with custody concerns should include a document that identifies the specifics of the custody concerns.

Location of Indoor, On-campus PCR Area _____.

Location of Outdoor, On-campus PCR Area _____.

Location of Off-campus PCR Area _____.

Step 1: Assignments/Tasks

Name	Assignments
1.	
2.	
3.	

Step 2: Assignments/Tasks

Name	Assignments
1.	
2.	
3.	

Step 3: Assignments/Tasks

Name	Assignments
1.	
2.	
3.	

Joint Occupancy Users
 (Facilities RCSS is allowed to use in an emergency.)
Richmond County School System
Augusta, Georgia

Please attach this page to the school's emergency plan.

School Name: _____.

Organization's Name	
Name of Person in Charge	
Phone Number	
Location of Building	
Days/Times on Site	
Organization's Name	
Name of Person in Charge	
Phone Number	
Location of Building	
Days/Times on Site	
Organization's Name	
Name of Person in Charge	
Phone Number	
Location of Building	
Days/Times on Site	

Joint Site Programs

Richmond County School System

Augusta, Georgia

Please attach this page to the school's emergency plan.

School Name: _____.

Organization's Name	
Name of Person in Charge	
Phone Number	
Locations to be used in Building	
Days/Times on Site	
Organization's Name	
Name of Person in Charge	
Phone Number	
Locations to be used in Building	
Days/Times on Site	
Organization's Name	
Name of Person in Charge	
Phone Number	
Locations to be used in Building	
Days/Times on Site	

