



6209 Rivers Ave. North Charleston, SC 29406

## School Safety Plan

Prevent, Prepare, Respond, Recover

Board Approved \_\_\_/\_\_\_/\_\_\_

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# School Contact Information

Name of School, Center or Facility: Learn 4 Life Charleston

Building Street Address: 6209 Rivers Ave. North Charleston SC 29406

School Type: Charter School

Authorizer: South Carolina Department of Education

## Communications

Name	Title/Roles	Phone Number
Dr. Tamela Brown	<b>Principal</b> Lead Decision-Maker	(843) 990-6945
Avery Giannoulis	<b>Director of Operations</b> Secondary Decision-Maker	(661) 802-6842
Allyson White	<b>Operations Manager</b> Secondary Decision-Maker	(843) 666-6362
Christopher Dominguez	<b>Security Guard (on-site)</b>	786-886-7352
Soliman Villapando	Director of Safety & Security	(661) 418-1539
Steven Ochoa	Safety Coordinator	(661) 524-4504
Shawn Dunn	Security Coordinator	(661) 429-8331

## Responding Agencies Contact Information

Police Department (Non-Emergency): 2500 City Hall Ln, North Charleston, SC 29418

- Police (843) 743-7200, (843) 308-4718 (Cosgrove and Rivers Ave)

Fire Department:

- Fire : (843) 740-2616

Emergency Management and Preparedness: (843) 202-6700

4045 Bridge View Dr., Suite C-204, North Charleston, SC, United States, South Carolina

## Other Communications and Documents

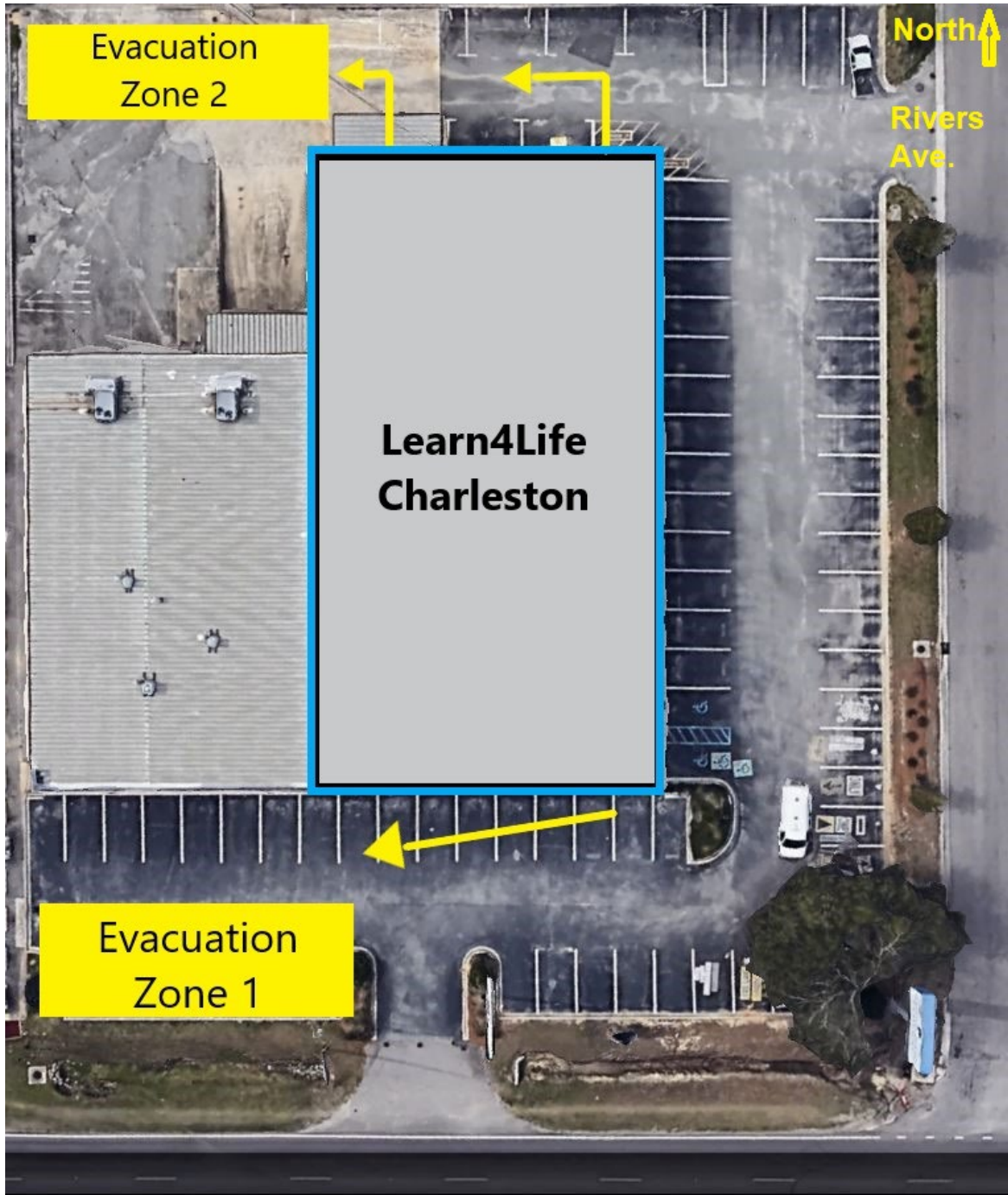
Description of Communication Platform Capabilities:

- Cellular
- One Call - Mass messaging - Phone and Text Email
- Titan Emergency Notification App
- Public Address System Capabilities
- 

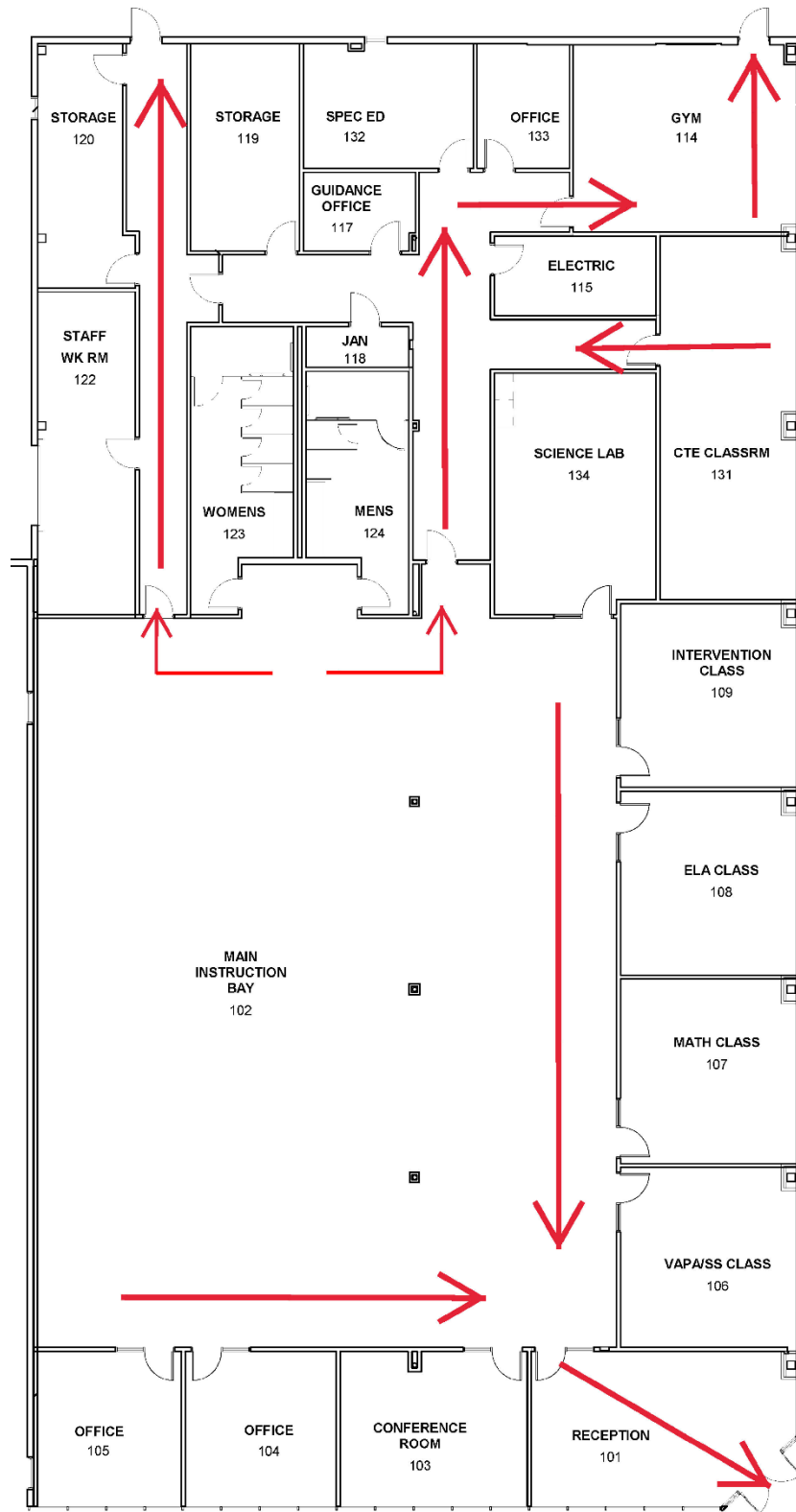
Location of School Emergency Management Plan Documents :

On-site and Copy at LLAC administration -177 Holston Drive Lancaster CA 93535

## EVACUATION ZONES AERIAL VIEW



## SCHOOL EMERGENCY EXITS FLOOR PLAN



-----6209 Rivers Ave.----- North →

# I. General Information

## A. Introduction

This School Safety Plan complies with the State of South Carolina Regulation R43-16647605(b) (5) (F) requires that each school “shall develop a school safety plan. School districts shall be advised by the Department of Education of the requirement to use a safe school checklist in compliance with Section 59-5-65, S.C. Code of Laws, 1976.” This plan also complies with the “Safe School Climate Act” signed by South Carolina Governor Sanford into law June 2006 Bill 3753 preventing school harassment, intimidation, or bullying.

The purpose of the School Emergency Operations Plan (School EOP) is to provide information on how to respond to emergency incidents by outlining the responsibilities and duties of school and its employees. Customization of this plan to meet schools needs and circumstances is important. Developing, maintaining, and exercising the plan empowers employees to act quickly and knowledgeably. The plan educates staff, faculty, students, and other key stakeholders on their roles and responsibilities before, during, and after an incident. This plan provides parents and other members of the community with assurances that school has established guidelines and procedures to respond to incidents/hazards in an effective way.

## Scope of the Plan

The School EOP provides guidelines and procedures for dealing with existing and potential school incidents. The basic plan and the functional and hazard-specific annexes outline an organized, systematic method to mitigate, prevent, prepare for, respond to, and recover from incidents. The plan discusses the expectations of staff; roles and responsibilities; direction and control systems; internal and external communications; training and sustainability; authority and references as defined by local, state, and federal government mandates; common and specialized procedures; and specific hazard vulnerabilities and responses/recovery.

## Coordination with Emergency First Responders

Various agencies and services are involved in responding to school incidents including emergency responders from Police Department, Fire Department, Emergency Management and Preparedness, Department of Public Health and other community organizations. An important component of the School EOP is advanced planning with various federal, state, and/or local agencies and community service providers to aid in timely communication and response to an incident. Advance planning may or may not include written agreements to help coordinate services between the agencies and school. If mutual aid agreements are created, a copy should be maintained with other important documents related to this emergency management plan. Advanced planning should specify the type of communication and services provided by one agency to another.

## Situation Overview/Hazard Analysis Summary

### School Population

- General Population
- Students
- Teachers and specialists
- Administrators/Support Staff
- Tutors/Instructional Assistants

A master schedule of where classes, grade levels, and staff are located during the day is provided to each classroom and is available hard copy and/or electronic in main office.

School is committed to the safe evacuation and transport of students and staff with functional needs. The functional needs population includes, but is not limited to, students/staff with:

- Limited English proficiency,
- Blindness or visual disabilities,
- Cognitive or emotional disabilities,
- Deafness or hearing loss,
- Mobility/physical disabilities (permanent and temporary),
- Medically fragile health (including asthma and severe allergies).

Students and/or staff may require additional assistance if they are temporarily on crutches, wearing casts, etc.

Classrooms containing students and staff that require additional assistance during an incident will be noted by an asterisk next to the room number during the applicable class period(s) on the master schedule. The list of students and staff names with functional needs along with their schedules is available hard copy and/or electronic and location: in main office. A list of staff members that have been trained and assigned to assist the functional needs population during drills, exercises, and incidents is also available hard copy and/or electronic and location: in main office.

### Building Information (Please see School Information Insert at the end of this plan)

School is located on and includes one building, independent study instructions. All classes take place in main building. Map and/or floor plans of the buildings annotated with evacuation routes, shelter locations, fire alarm pull stations, fire hydrants, fire extinguishers, first aid kits, hazardous materials storage, and utility shutoffs is included as an addendum. All staff members are required to know these locations as well as how to operate the utility shutoffs.

### Hazard Analysis Summary

School is exposed to many hazards which have the potential for disrupting the school community, causing casualties, and damaging or destroying public or private property. Understanding that the Office of Emergency Management maintains an Emergency Operations Plan (EOP) to address hazards and incidents, the School EOP has been developed to fit into the larger School EOP in the event of a large-scale incident.

Table 1 briefly discusses high-priority hazards that School has identified through a hazards assessment of each school building and its surrounding area, conducted either by school officials or in conjunction with officials of the School Office of Emergency Management and the County's Emergency Operations Plan, local law enforcement, fire, and other community safety partners.

<u>HIGH-PRIORITY HAZARDS</u>
Fire - Fire and Evacuation drills
Earth Quake - Drop Cover and Hold drills
Chemical Spill - Minimal Risk
Active Shooter - Drills
Bomb Threat - Minimal Risk
Intruder/Hostage - Minimal Risk
Explosion - Minimal Risk
Covid-19 - High Risk (Infection Control Plan in <i>Covid-19 Return to In-Person Instruction Plan</i> )
Hurricane and Tornado- High Risk

Table 1-High Priority Hazards

## Planning Assumptions and Limitations

### Planning Assumptions

Planning assumptions allow for deviation from the plan if certain assumptions prove not to be true during operations. The following are standard assumptions. Additional assumptions may be needed depending on your school's circumstances:

- The school community will continue to be exposed and subject to hazards and incidents described in the Hazard Analysis Summary, as well as lesser hazards and others that may develop in the future.
- A major disaster could occur at any time and at any place. In many cases, dissemination of warning to the public and implementation of increased readiness measures may be possible; however, some emergency situations occur with little or no warning. A single site incident (e.g., fire, gas main breakage, acute communicable diseases outbreak) could occur at any time without warning and
- The employees of the school affected cannot and should not, wait for direction from local emergency response agencies. Action is required immediately to save lives and protect school property. Acute communicable diseases' infection control procedures according to the latest public health guidance will be implemented immediately. (See COVID-19 Infection Control Procedures on Section V).

- Following a major or catastrophic incident, the school may have to rely on its own resources to be self-sustaining for up to 72 hours.
- There may be several injuries of varying degrees of seriousness to faculty, staff, and/or students. Rapid and appropriate response will reduce the number and severity of injuries.
- Outside assistance from local fire, law enforcement and emergency managers will be available in most serious incidents. Because it takes time to request and dispatch external assistance, it is essential for the school to be prepared to carry out the initial incident response until responders arrive at the incident scene.
- Proper prevention and mitigation actions, such as creating a positive school environment and conducting fire and safety inspections, will prevent or reduce incident-related losses. Maintaining the School EOP and providing frequent opportunities for stakeholders (staff, students, parents, emergency responders, etc.) to exercise the plan through live drills and table-top exercises can improve the school's readiness to respond to incidents. A spirit of volunteerism among school employees, students and families will result in their providing assistance and support to incident management efforts.

## Planning Limitations

It is the policy of School that no guarantee is implied by this plan of a perfect incident management system. As personnel and resources may be overwhelmed, School can only endeavor to make every reasonable effort to manage the situation with the resources and information available at the time.

## B. CONCEPT OF OPERATIONS

The overall strategy of a School EOP is to execute effective and timely decisions and actions that prevent harm, protect lives and property, mitigate damages, restore order and aid recovery.

This plan is based upon the concept that the incident management functions that must be performed by the school generally parallel some routine day-to-day functions. To the extent possible, the same personnel and material resources used for day-to-day activities will be employed in responding to an incident in the school. Because personnel and equipment resources are limited, some routine functions that do not contribute directly to the incident may be suspended. The personnel, equipment and supplies that would typically be required for those routine functions will be redirected to accomplish assigned incident management tasks.

In addition, the incident may require coordinated operations with others. The key to successful operations is an organized command structure. It is important to understand that the school's command of the incident and the school's incident management structure may change once official emergency responders arrive on the scene. Emergency responders are knowledgeable in the Incident Command System (ICS) and may be best equipped to command the response to a specific incident. If this is to occur, the school

may transition command of the incident to a more qualified Incident Commander (IC). These concepts are more fully discussed below.

It is critical for school administration officials and all segments of the community emergency response system to work together in advance of an incident to develop a working relationship and understanding of how the school's initial response would transition into the overall response to a critical incident at the school.

## National Incident Management System

The National Incident Management System (NIMS) is a set of principles that provides a systematic, proactive approach guiding government agencies, nongovernmental organizations and the private sector to work seamlessly to prevent, protect against, respond to, recover from and mitigate the effects of incidents, regardless of cause, size, location, or complexity, to reduce the loss of life or property and harm to the environment. This system ensures that those involved in incident response/recovery understand their roles and have the tools they need to be effective.

School recognizes that staff and students will be first responders during an incident. Adopting NIMS enables staff and students to respond more effectively to an incident and enhances cooperation, coordination, and communication among school officials, first responders, and emergency managers. As part of its NIMS implementation, School participates in the local government's NIMS preparedness program to remain NIMS compliant and believes it is essential to ensure that response/recovery services are delivered to schools in a timely and effective manner. NIMS compliance includes completing the following:

- Train and exercise the plan. All staff and students are expected to participate in training and exercising the plan's procedures and hazard-specific incident plans. The school is charged with ensuring that the training and equipment necessary for an appropriate response/recovery operation are in place.

Again, it is critical that school officials and all segments of the community emergency response system work together in advance of an incident to develop a working relationship and understanding of how the school's initial response would transition into the overall response to a critical incident at the school.

## The National Terrorism Advisory System (NTAS)

NTAS replaces the color-CDED Homeland Security Advisory System. These alerts include a clear statement that there is an imminent threat or elevated threat. Using available information, the alerts will provide a concise summary of the potential threat, information about the actions being taken to ensure public safety, and recommended steps that individuals, communities, businesses and government can take to prevent, mitigate, or respond to the threat.

### Imminent Threat

Warns of a credible, specific, and impending terrorist threat against the United States.

### Elevated Threat Alert

Warns of a credible terrorist threat against the United States. The managers, teachers or supervisors are the designated key personnel responsible for implementing the School Safety Plan.

## Organization and Assignment of Responsibilities

### Manager of School Operations

The manager of school operations may serve as the School Incident Commander or delegate that authority to a qualified individual. While the principal retains the overall responsibility for the safety of students and staff, delegating certain duties to manage the incident may allow the principal to focus on policy-level activities and interfacing with other agencies and parents. The principal shall coordinate between the Area Superintendent and the School Incident Commander.

### Principal or School Incident Commander

The School Incident Commander will establish an Incident Command Post (ICP) and provide an assessment of the situation to the principal/designee or other officials, identify resources required, and direct the on-scene incident management activities. The Incident Commander's responsibilities include:

- Assuming overall direction of all incident management activities based on procedures outlined in the School EOP.
- Taking steps deemed necessary to ensure the safety of students, staff and other individuals.
- Determining whether to implement incident management protocols established in the School EOP (e.g., Evacuation, Shelter inside as described more fully in emergency procedures).
- Arranging for transfer of students, staff and other individuals when safety is threatened by a disaster.
- Working with and ensuring communication with emergency services personnel
- Keeping the principal and other officials informed of the situation.

### Teachers

Teachers shall be responsible for the supervision of students and shall remain with students until directed otherwise.

Responsibilities include:

- Supervising students under their charge.

- Taking steps to ensure the safety of students, staff and other individuals in the implementation of incident management protocols established in the School EOP.
- Directing students in their charge to inside or outside assembly areas, in accordance with signals, warning, written notification or intercom orders according to incident management procedures established in the School EOP.
- Taking attendance when class relocates to an outside or inside assembly area or evacuates to another location.
- Reporting missing students to the Incident Commander.
- Executing assignments as directed by the Incident Commander.
- Obtaining first-aid services for injured students from the school nurse or person trained in first-aid. Arrange for first-aid for those unable to be moved. School staff will be trained and certified in first-aid and CPR.

### Tutors / Instructional Assistants

- Responsibilities include assisting teachers as directed.

### Counselors, Social Workers, and Psychologists

Counselors, social workers and psychologists provide assistance with the overall direction of the incident management procedures at the site. Responsibilities may include:

- Taking steps to ensure the safety of students, staff and other individuals in the implementation of incident management protocols established in the School EOP.
- Rendering first-aid if necessary.
- Assisting in the transfer of students, staff and other individuals when their safety is threatened by a disaster.
- Executing assignments as directed by the Incident Commander. Assisting with crisis intervention and recovery processes.

### Students

- Cooperating during emergency drills and exercises and during an incident.
- Learning to be responsible for themselves and others in an incident.
- Understanding the importance of not being a bystander by reporting situations of concern.
- Developing an awareness of natural, technological, and human-caused hazards and

associated prevention, preparedness and mitigation measures.

- Taking an active part in school incident response/recovery activities, as age appropriate.

## Parents/Guardians

- Encouraging and supporting school safety, violence prevention and incident preparedness programs within the school.
- Participating in volunteer service projects for promoting school incident preparedness.
- Providing the school with requested information concerning the incident, early and late dismissals, and other related release information.
- Practicing incident management preparedness in the home to reinforce school training and ensure family safety.
- Understanding their roles during a school emergency.
- Other Staff (e.g., Itinerant Staff, Substitute Teachers)

Responsibilities include reporting to the Incident Commander for assignments, if requested to do so.

## Incident Command System

A school's command system can be used to manage emergency incidents or non-emergency events such as graduations, athletic events, or celebrations. The system is flexible to meet the school's needs. See Figure 1 on next page. Staff are assigned to serve within the ICS based on their expertise and training and the needs of the incident. Roles should be pre-assigned based on training and qualification. The School ICS is organized into the following functional areas:

### School Incident Commander

Directs tactical on-scene operations until/unless a coordinated incident command system (ICS) is established with local authorities. In complex incidents, a Policy/Coordination Group may be convened at the school. The role of the Policy/Coordination Group is to:

- Support the on-scene Incident Commander.
- Provide policy and strategic guidance.
- Help ensure that adequate resources are available.
- Identify and resolve issues common to all organizations.
- Keep elected officials and other executives informed of the situation and decisions.

- Provide factual information, both internally and externally. See Part V of this plan on Communications for additional information related to role/responsibility of an information officer.
- **School** Principal/designee and/or School Incident Commander will keep the Policy/Coordination Group informed.

## Operations Section

When activated, the Operations Section coordinates all tactical operations including implementation of response/recovery activities according to procedures and protocols established by **school** in an incident action plan. Procedures and protocols will address care of students, first-aid, crisis intervention, search and rescue, site security, damage assessment, evacuations and the release of students to parents.

Specific responsibilities include:

- Analyzing school staffing to develop a Family Reunification Plan, and implementation. Monitoring site utilities (i.e., electric, gas, water, heat/ventilation/air conditioning) and shutting them off only if danger exists or if directed by the Incident Commander and assisting in securing facility.
- Establishing medical triage with staff trained in first-aid and CPR, providing and overseeing care given to injured persons, distributing supplies and requesting additional supplies.
- Providing and accessing psychological first-aid services for those in need and accessing local/regional providers for ongoing crisis counseling for students, staff and parents.
- Coordinating the rationed distribution of food and water, establishing secondary toilet facilities in the event of water or plumbing failure and requesting needed supplies.
- Documenting all activities.

## Planning Section

When activated, the Planning Section is responsible for collecting, evaluating and disseminating information needed to measure the size, scope and seriousness of an incident and planning appropriate incident management activities. Duties may include:

- Assisting the Incident Commander in the collection and evaluation of information about an incident as it develops, assisting with ongoing planning efforts and maintaining the incident time log.
- Documenting all activities.

## Logistics Section

When activated, the Logistics Section supports incident management operations by securing and providing needed personnel, equipment, facilities, resources and services required for incident resolution; coordinating personnel; assembling and deploying volunteer teams; and facilitating communication among incident responders. This function may involve a major role in an extended incident. Additional responsibilities include:

- Establishing and maintaining school and classroom first-aid kits, coordinating access to and distribution of supplies during an incident and monitoring inventory of supplies and equipment.
- Documenting all activities

### Finance/Administration Section

When activated, the Finance/Administration Section oversees all financial activities including purchasing necessary materials, tracking incident costs, arranging contracts for services, timekeeping for emergency responders, submitting documentation for reimbursement and recovering school records following an incident. Additional duties may include:

- Assuming responsibility for overall documentation and recordkeeping activities; when possible, photographing or videotaping damage to property.
- Developing a system to monitor and track expenses and financial losses and secure all records.
- School and school management offices may assume responsibility for these functions and perform these duties off-site.

### Source and Use of Resources

School will use its own resources and equipment to respond to incidents until emergency or other incident response personnel arrive. Parent volunteers and community members have been trained to assist, if called upon, and are available after an incident occurs. The following organizations or agencies have agreed to be responsible for providing additional resources or assistance:

- First-aid kit and sanitation supplies will be provided by: School
- Food/water supplies will be provided by: School
- Security will be provided by: School

## C. COMMUNICATION

Communication Between School, Law Enforcement and Emergency Responders is a critical part of incident management. This section outlines School communications plan and supports its mission to provide clear, effective internal and external communication between the school, staff, students, parents, emergency responders, the community and media. School utilizes the Communication Platform/Capabilities described in the beginning of the School EOP to contact and maintain communications with law enforcement and other emergency responders during an incident. The School Incident Commander will transfer command to the appropriate emergency responder who arrives on the scene to assume management of the incident, including coordination of internal and external

communications. The Incident Commander will use the communication platform and/or other means described in the School EOP to notify the principal/designee of the school's status/needs. [School](#) and emergency responders will coordinate the release of information to ensure that information is consistent, accurate and timely.

## Internal Communications

[School](#) has identified a school spokesperson or public information officer who will be responsible to:

- Help create the policies and plans for communicating emergency information internally and to the public.
- Follow the communications policies and procedures established by [School](#)
- Help establish alternative means to provide information in the event of a failure of power, phone or other lines of communication.
- Develop materials for use in media briefings.
- Act as the contact for emergency responders and assist in coordination of media communications.

## Communication Between School Officials and Staff Members

School personnel will be notified when an incident occurs and kept informed as additional information becomes available and as plans for management of the incident evolve. The following practices will be utilized to disseminate information internally when appropriate:

- Telephone List: A list of telephone numbers of all staff members and local emergency providers.
- Text-Messaging System/E-mail System: A text-messaging or e-mail system is available to provide those who are registered to receive messages with updates during an incident.
- End-of-Day Faculty Meeting: As appropriate, updated information and a review of the day's events will be presented at the end-of-day meeting. Staff will also have the opportunity to address any misinformation or rumors.

## External Communications

School officials must communicate with the larger school community on how incidents will be addressed on a regular basis. However, once an incident does occur, parents, media and the community at large will require clear and concise messages from [School](#) about the incident, what is being done and the safety of the children and staff.

## Communication with Parents

Before an incident occurs, School will:

- Develop a relationship with parents so that they trust and know how to access alerts and incident information.
- Inform parents about the School's EOP, its purpose, and its objectives, although detailed response tactics should not be shared if they will impede the safe response to an incident.
- Information will be included in School communications, i.e. school newsletter, presentation delivered at Back- to-School event, etc...
- Identify parents who are willing to volunteer in case of an incident and include them in preparation efforts and training.
- Be prepared with translation services for non-English-speaking families and students with limited English proficiency.

In the event of an incident, School will:

- Disseminate information through various means such as via text messages, e-mail, radio announcements, "One Call" etc., to inform parents about what is known to have happened.
- Implement a plan to manage phone calls and parents who arrive at school.
- Describe how the school is handling the situation.
- Provide information regarding possible reactions of their children and ways to talk with them.
- Provide a phone number, Web site address, or recorded hotline where parents can receive updated incident information.
- Inform parents and students when and where school will resume.

After an incident, School administrators will schedule and attend an open question-and answer meeting for parents as soon as possible. Counseling services will be provided by School.

## Communication with the Media

In the event of an incident, the School Incident Commander or the emergency responder Incident Commander (in the event command has been transferred), will coordinate with the school public information officer and/or participate in a joint information effort to:

- Establish a media site and reception area away from the school and any established Incident Command Post.
- Provide only information that has been approved to be released by the Incident Commander in charge of the scene.

- All School employees are to refer all requests for information and questions to the designated Public Information Officer.

## Communication Tools

Some common internal and external communication tools that School uses the following:

- Standard telephone: School has designated a school telephone number as a recorded “hotline” for parents to call for information during incidents. The goal is to keep other telephone lines free for communication with emergency responders and others.
- Cellular telephones: These phones may be the only tool working when electric service is out; they are useful to school personnel on the way to or from a site.
- Intercom systems: The intercom system includes teacher-initiated communication with the office using a handset rather than a wall-mounted speaker.
- Bullhorns and megaphones: A battery-powered bullhorn to address students and staff who are assembling outside the school. Procedures governing storage and use will help ensure readiness for use.
- Two-way radio: Two-way radios provide a reliable method of communication between rooms and buildings at a single site. All staff will be trained to understand how to operate the two-way radio.
- Computers: A wireless laptop computer may be used for communication both within the school and to other sites. Email may be a useful tool for updating information for staff, other schools in an affected area and administration. An assigned staff member(s) will post information such as school evacuation, closure or relocation on the home page of the school Web site.
- Fax machines: Possible uses include off-site access to receive and send critical information concerning students and staff members, their locations, and needed telephone numbers, including but not limited to, medical information, release forms and authorizations.
- Alarm systems: Bells or buzzers are in place to signal incidents - for example, fire, lockdown, or special alert (with instructions to follow). All school staff, students, and volunteers will be trained on what the sounds mean and how to respond to them.
- Whistles: Whistles should be provided to staff in order to signal a need for immediate attention or assistance.

## D. Recovery After an Incident

After the safety and status of staff and students have been assured and emergency conditions have abated, following an incident, staff, teachers and school officials will assemble to support the restoration of the school's educational programs. Defining mission-critical operations and staffing this effort is the starting point for the recovery process. Collecting and disseminating information will also facilitate the recovery process.

**School** designates appropriate personnel and collaborates with external resources to work in teams to accomplish the following:

- Conduct a comprehensive assessment of the physical and operational recovery needs. Assess physical security, data access and all other critical services (e.g., plumbing, electrical).
- Examine critical information technology assets and personnel resources and determine the impact on the school operations for each asset and resource that is unavailable or damaged.
- Document damaged facilities, lost equipment and resources and special personnel expenses that will be required for insurance claims and requests for state and federal assistance.
- Identify recordkeeping requirements and sources of financial aid for state and federal disaster assistance.
- Provide detailed facilities data to the school office so that it can estimate temporary space reallocation needs and strategies.

Arrange for ongoing status reports during the recovery activities to:

- Estimate when the educational program can be fully operational; and
- Identify special facility, equipment and personnel issues or resources that will facilitate the resumption of classes.
- Educate school personnel, students and parents on available crisis counseling services.
- Establish absentee policies for teachers/students after an incident.
- Establish an agreement with mental health organizations to provide counseling to students and their families after an incident.
- Develop alternative teaching methods for students unable to return immediately to classes: correspondence classes, videoconferencing, tutoring, etc.
- Create a plan for conducting classes when facilities are damaged (e.g., alternative sites, half-day sessions, portable classrooms).

- Get stakeholder input on prevention and mitigation measures that can be incorporated into short-term and long-term recovery plans.

## E. Administration, Finance and Logistics

### Agreements and Contracts

If school resources prove to be inadequate during an incident, [School](#) will request assistance from local emergency services, other agencies and the school community in accordance with existing mutual aid agreements and contracts. Such assistance includes equipment, supplies and/or personnel. All agreements entered into by authorized school officials should be in writing. All pre-negotiated agreements and contracts are hard copy and/or electronic and location: in main office.

### Recordkeeping

### Administrative Controls

[School](#) is responsible for establishing the administrative controls necessary to manage the expenditure of funds and to provide reasonable accountability and justification for expenditures made to support incident management operations. These administrative controls will be done in accordance with established local fiscal policies and standard cost accounting procedures.

### Activity Logs

Staff assigned within the School will maintain accurate logs recording key incident management activities, including:

- Activation or deactivation of incident policies, procedures and resources.
- Significant changes in the incident situation.
- Major commitments of resources or requests for additional resources from external sources.
- Issuance of protective action recommendations to the staff and students.
- Evacuations.
- Casualties.
- Containment or termination of the incident.

### Incident Costs

School Finance and Administration staff are responsible for maintaining records summarizing the use of personnel, equipment and supplies to obtain an estimate of annual incident response costs that can be used in preparing future school budgets. The detailed records of costs for incident management and operations include:

- Equipment operations costs.
- Costs for leased or rented equipment.
- Costs for contract services to support incident management operations.

- Costs of specialized supplies expended for incident management operations.
- Personnel costs, especially overtime costs

These records may be used to recover costs from the responsible party or insurers, or as a basis for requesting financial assistance for certain allowable response and recovery costs from the state and/or federal government.

## Preservation of Records

In order to continue normal school operations following an incident, vital records must be protected. These include legal documents and student files as well as property and tax records. The principal causes of damage to records are fire and water. Essential records should be protected and are maintained hard copy and/or electronic and location: in main office.

## Plan Development Maintenance and Distribution

### Approval and Dissemination of the Plan

In developing the emergency management plan for each school, the administrator must involve community law enforcement, fire, and safety officials, parents of students who are assigned to the building and teachers and nonteaching employees who are assigned to the building. The emergency management plan should clearly identify the latest revision date and the signature of individuals involved in its creation and/or revision.

### Record of Distribution

Copies of the school safety and floor plans will be distributed to emergency organizations with a role in responding to an incident. A record of distribution will be kept as proof that organizations have acknowledged their receipt, review and/or acceptance of the plan. School administrators will record the title and name of the person receiving the plan, the agency to which the receiver belongs, the date of delivery and the number of copies delivered. This record is kept in hard copy and/or electronic in the main office and/or by the administration.

School Safety Planning documents should not be shared with those who do not have a need to know the details of the plan unless all sensitive, security-related information has been properly redacted. Copies of the plan may be made available to the public and media without the sensitive information at the discretion of the School Board.

### Review and Updates to the Plan

In order to remain in compliance, the administrator shall update the comprehensive emergency management plan at least once every year by March 1, and the floor plans whenever a major modification to the building requires changes in the procedures outlined in the plan. Each update or change to the plan will be tracked. The record of changes will include: the change number, the date of the change and the name of the person who made the change.

To ensure timely updates to the School EOP, the administrator has established a schedule for an annual review of planning documents. The basic plan and its annexes will be reviewed at least once per year by school officials and others deemed appropriate by school administration.

The School EOP will be updated based upon changes in information; deficiencies identified during incident management activities and exercises; and when changes in threat hazards, resources and capabilities or school structure occur. Whenever the School EOP is updated, an updated copy shall be made available to first responders, as well as distributed in accordance with the guidelines stated above.

## Training and Exercising the Plan

School understands the importance of training, drills, and tabletop exercises in maintaining and planning for an incident. To ensure that school personnel and community emergency responders are aware of their duties and responsibilities under the school plan and the most current procedures, the following training, drill and exercise actions will occur. School officials will coordinate training efforts with guidance from the city.

Basic training and refresher training sessions will be conducted annually for School in coordination with local fire, law enforcement and emergency managers.

School EOP training includes:

- Hazard and incident awareness training for all staff members during their on-site monthly Professional Development Training.
- Orientation to the School EOP provided for all staff members during their on-site monthly Professional Development Training.
- First-aid and CPR for all staff every 2 years from Red Cross.
- Team training to address specific incident response or recovery activities such as Family Reunification.
- Two online FEMA courses: ICS 100 and IS-700. Both courses are available for free at FEMA's Emergency Management Institute:

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?cCDE=is-100.b>

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?cCDE=is-700.a>

Additional training will include drills and tabletop exercises. Drills will be conducted in compliance with state and local laws based upon the appropriate age group of students.

Records of the training provided including date(s), type of training, and participant roster will be maintained in hard copy and/or electronic in main office and/or by the administration. Approved parent volunteers and community members will also be incorporated into larger training efforts.

All School staff members are encouraged to develop personal and family emergency plans. Each family should anticipate that a staff member maybe required to remain at school following a catastrophic event.

## F. Parent-Pupil Reunification Procedures

### Step 1

#### Establish onsite incident command

The first step in staging for transport is establishing School Incident Command at the affected school. Integrating with Unified Command should be a priority.

#### Priorities

Student and staff safety and wellbeing, Student and staff locations and condition, Assemble affected school command staff, Integrate with Unified Command, establish Joint Information Center.

**Objectives:** Safe transport of students and staff to reunification site.

**Strategy:** The Standard Reunification Method

**Tactics:** Will be determined by the environment

### Step 2

#### Classroom evacuation

Classrooms are individually evacuated to the Secure Assembly Area. During a Police Led Evacuation, students and staff will be asked to keep their hands visible.

If it is a Police Led Evacuation after a Lockdown, each room will be cleared by Law Enforcement personnel. This process may take up to several hours. Teacher should take attendance in the classroom, prior to evacuation.

#### Students with disabilities

The Individuals with Disabilities Act mandates additional support for students with special education needs in a school setting. These supports would provide supervision and assistance to students with disabilities during emergency situations.

### Step 3

#### Secure assembly area

At the Secured Assembly Area, teachers should stay with their students. If some teachers are unable to be at the Secured Assembly Area, doubling up classes with "Partner" teachers is appropriate.

### Step 4

#### STUDENT AND STAFF TRANSPORT (if applicable)

Students and staff board the bus and are transported to the Reunification Site. Buses having audio video systems can be utilized for further accountability by having students face the camera and state their name.

## ASSEMBLY AREA

### STUDENTS ENTER OUT OF PARENTAL VIEW

Students are transported to the Reunification Site and are then directed to the Student Assembly Area. Often this is a cafeteria or gymnasium. Upon arrival, students are verified against a master roster.

It is important that Students are not in view of their parents when entering the reunification site. Law Enforcement or Security are posted where students are located.

## GREETING AREA

### PARENTS ARE MET HERE

As parents arrive, signage directs them to Parent Check-in Table. Greeters begin the process by asking parents to complete the Reunification Card.

Law Enforcement or Security Guards **are** posted where parents wait for reunification.

### Helpful Tip

As parents wait for reunification with their student, try to have them clustered rather than in a line. Students may not always be recovered in the order parents line up.

## II. Emergency Procedures-Functional Annexes

### A. Schedule of Drills

School	
<b>Fire Drill (<i>Monthly</i>)</b>  <i>South Carolina Fire Code (SCFC 405.2); Group E (Educational) Occupancies (School Buildings) – Monthly, involving all occupants of the building</i>	<b>Active Shooter / Intruder (<i>2 per year</i>)</b>  Section 59 63 910 of S. C. Code of Laws
<b>January to December</b>	<b>July and December</b>
Thursday, January 4, 2024 Thursday, February 1, 2024 Thursday, March 7, 2024 Thursday, April 4, 2024 Thursday, May 2, 2024	Thursday, September 7, 2023 (Rescheduled from August 31 due to Tropical Storm) Thursday, October 5, 2023 Thursday, November 2, 2023 Thursday, December 7, 2023

Severe Weather Drill(2 per year) Section 59 63 910 of S.C. Code of Laws	
<b>January to December</b>	<b>July and December</b>
Wednesday, March 6, 2024 (Tornado Drill statewide)	Thursday, October 19, 2023 (Earthquake – National ShakeOut Drill)

## **Evacuation / Drill Attendance Sheet**

Date:	Time:
School Name:	Incident Leader:
Reunification Leader:	Rescue Team Leader:

Please Circle the type of drill:

**Earthquake / Fire / Active Shooter-Intruder / Lockdown / Severe Weather**

	Employee /Student /Visitor	Evacuated Zone( 1-2)	Injured? (Y/N)	Missing? (Y/N)	Date/Time Released/ to whom?
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
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26					
27					
28					
29					
30					
39					
40					

**Once completed please turn in to the Safety & Security Team**

## B. Earthquake “Drop Cover and Hold”

### Inside the building

- Sound off the Warning or Alarm to begin the Drill
- Give the command “Drop - Cover and Hold”

Students and staff immediately drop under a desk or table and protect your head and neck. Hold onto the desk or table and be prepared to move with it. Hold this position until the ground stops shaking and it is safe to move. Evacuate the building in an orderly fashion.

### Outside building

- Move away from buildings trees, fences, and power lines.
- Drop to your knees.
- Clasp both hands behind your neck, bury your face in your arms, and make your body as small as possible.

Follow instructions and stay away from buildings, trees and fences. Should a power line fall on a fence, it will be electrified and very dangerous.

Earthquakes strike without warning. The following actions, as time permits, will be accomplished:

### Inside the building

- If inside a building at the time of an earthquake execute “Drop, Cover and Hold”. Utilize desk, table or other shelter or against an inside wall. If the shelter moves, hold on and stay under it.
  - Avoid windows or other potential hazards.
  - Remain silent so directions can be heard above the noise of the earthquake.
  - Stay in position until the earthquake is over or until further instructions are given.
- Implement the “Building Evacuation” plan when the earthquake is over and tremors have subsided. During the building evacuation, special consideration should be given to the evacuation routes. Some might be blocked from debris. When leaving the building remember to take the roll books and any first aid supplies. Announce that NO ONE is to return to the building unless authorized.
- Staff and students shall assemble in the sites prearranged evacuation area. Remain there until re-entry to the buildings have been approved, or directed to move to another location, or released to go home.
  - The “Incident Command System” and Command Post should be activated.
  - If there are any injuries, a triage will be set up and first aid will be rendered as needed.
  - Take roll and report any missing and/ or injured students or staff to the Site Administrator.
  - Do not return to the buildings for any reason until authorized officials have declared the buildings safe.

## Outside the building

If outside the building when an earthquake occurs:

- Stay away from all buildings, trees, electrical wires, or other hazards that may fall.
- Assume the “Drop and Cover” position until the quake is over.
- Evacuate campus with those leaving the buildings and wait for further instructions.

## C. Fire and Fire Drill Procedures

### Fire Drill (Evacuations):

- All Faculty and Staff will supervise the movement of the students in their labs to the Evacuation Site along the routes that are posted in the rooms.
- Students and Staff are not allowed to move between buildings or use any interior doorways during a fire drill.
- The Site Administrator will call **911** and the Principal. The Site Administrator will assess the situation and use appropriate emergency procedures as he or she sees fit (fire extinguishers, triage center etc.).
- The Site Administrator or Principal will obtain a list of the students on campus.
- Students will be assembled at the evacuation site and each lab teacher will produce a list of the names of the students they are supervising. The site administrator will use these lists to take roll. The site administrator will immediately contact the homes of any students that are not accounted for.
- When the All Clear is announced, teachers will escort their students directly back to the classroom.

### Fire on Campus

In the event a fire is detected on a school campus “Fire Alarm” should be activated immediately. The Alarm will automatically implement the sites “Fire Drill” procedure and the following will be accomplished:

- The Site Administrator or Principal will call 911. Activate the Fire Alarm Pull to sound the alarm.
- Evacuate all rooms and offices to a pre-determined area a safe distance from the fire. Assist persons who has disabilities or needing evacuation assistance to evacuate the building. Proceed to the designated evacuation sites indicated in the evacuation map.
- If there have been any injuries set up a triage and render first aid if necessary.
- Use fire extinguishers if appropriate. (Note: All staff should be familiar with the use and locations of fire extinguishers.)
- Keep access roads open for emergency vehicles.
- The Site Administrator will determine if an “Early Closure” should be implemented.
- Students and staff should NOT return to the school buildings until fire officials declare the area safe.

## Fire near a Campus

- If there was a fire near a school Campus, the Site Administrator should:
- Determine whether the students and staff should leave the premises.
- Determine if the students need to be transported if an “Early Closure” is initiated. (This may also be directed by the Fire Department)

## Burning Clothes

- If a student or Staff member’s clothing was to catch on fire, the following procedures should be taken:
- Don’t allow them to run. (Stop, Drop and Roll)
- Smother the fire with a heavy fabric item such as a blanket, coat etc.
- Call 911 for medical assistance.

## D. Hurricane Procedures

### South Carolina Hurricane Plan - KNOW and PREPARE

<https://hurricane.sc/>

#### KNOW

- Watches and Warnings.

The National Hurricane Center issues watches and warnings for specific areas of danger. Additional watches and warnings maybe issued by local National Weather Service offices to provide detailed information on specific offices to provide threats such as flash floods, floods and tornadoes.

- Hurricane Hazards

Hurricane and tropical storms often produce wide spread torrential rains in excess of 6 inches, which may result in deadly and destructive floods. In fact, flooding is the major threat from tropical cyclones for people living inland.

- Winds

Winds from a hurricane can destroy buildings and manufactured homes. Outdoor items and debris can become projectile in high winds.

- Tornadoes

Tornadoes can accompany hurricanes and tropical storms. The most tornadoes spawned by a single tropical cyclone were associated with Hurricane Ivan which spawned 120 tornadoes in 2004

- SCETV WEATHER

Residents in South Carolina can now use a new emergency information service launched by S.C. Educational Television and S.C. Public Radio.

In partnership with WUFT, this new, story-telling based service provides heightened hurricane, tropical storm, and other weather-related emergency content to S.C. residents and visitors across the state.

This collaboration builds on SCETV's existing relationships with state emergency agencies and adds to the unique meteorological services of WUFT

- TRACK UPDATES

online: [SCETV.org/weather](http://SCETV.org/weather)

social media: @SCETV

Twitter & Facebook @SCPublicRadio

#SCETVwx

- IMPORTANT CONTACT INFORMATION

S.C. Emergency Management Division (SCEMD)

[scemd.org](http://scemd.org)

Public Information Phone System (PIPS)

1-866-246-0133

Only activated as needed / Spanish interpreters available

S.C. Department of Public Safety Emergency Traffic Network

[sctraffic.org](http://sctraffic.org)

National Hurricane Center (NHC)

[hurricanes.gov](http://hurricanes.gov)

The Official Website of the State of S.C.

[sc.gov](http://sc.gov)

S.C. Department of Insurance

[doi.sc.gov](http://doi.sc.gov)

803-737-6160

803-768-3467

[redcross.org](http://redcross.org)

American Red Cross

1-866-438-4636

Federal Emergency Management Agency (FEMA)

[fema.gov](http://fema.gov) • [ready.gov](http://ready.gov)

SCDHEC CareLine

1-855-472-3432

S.C. Salvation Army

[doingthemoostgood.org](http://doingthemoostgood.org)

704-522-4970

S.C. Department of Transportation

[scdot.org](http://scdot.org)

855-GO-SCDOT

855-467-2368

## PREPARE

- HIDE FROM THE WIND

The Saffir-Simpson Hurricane Wind Scale estimates potential property damage based on a hurricane's sustained wind speed. Hurricanes reaching Category 3 and higher are considered major because of their potential for significant loss of life and property damage. Category 1 and 2 storms are still dangerous, and require preventative measures.

- RUN FROM THE WATER.

Storm surge inundation is the total water level that occurs on normally dry ground as a result of the storm tide, and is expressed in terms of water, in feet, above ground level. Storm surge flooding causes more deaths than high winds during a hurricane.

- POWER POINTERS

If you see a downed power line, do not touch it.

Do not touch tree limbs or other objects touching a power line.

Do not attempt to tie generators into the house circuit. This can be dangerous to you, your neighbors, and to linemen. Plug appliances directly into the generator.

Should the power go out while you are cooking, remember to turn the stove off and remove any cookware from the cooking surfaces and oven.

Do not open refrigerators or freezers during an outage unless absolutely necessary. Repeated openings cause the cold air to escape and food to thaw more quickly.

## KNOW YOUR ZONES – PLAN PREPARE AND EVACUATE

These maps of the South Carolina coast show areas that are most vulnerable to tropical storm conditions. State and local authorities will announce evacuations by these designated zones. Use these maps to identify your correct hurricane evacuation zone. Include your zone information in your plan to evacuate prior to landfall of a hurricane.



## EVACUATION ACTIONS

- **BEFORE YOU LEAVE HOME**  
Know where you will go.  
Make arrangements for pets. They are not allowed in most shelters.  
  
Fuel up and service family vehicles.  
Turn off gas, electricity, and water.  
Stay tuned to your local television and radio stations for emergency information.
- **ON THE ROAD**  
  
Leave Early, Take your Time

The SC Emergency Response Team has been working in partnership with the petroleum industry in an attempt to make extra fuel available at certain filling stations along major evacuation routes.

Rest areas along I-26 will be enhanced with additional facilities in order to accommodate motorists efficiently. Department of Public Safety weigh stations will also be available as comfort stations.

A GPS may misdirect you to closed roads. Stay on official evacuation routes. Charge your cell phone and mobile devices, and have extra chargers.

- DURING

- Protect Yourself

- Stay tuned to local television and radio stations for emergency information. Be sure to keep a battery- operated, solar-powered, or hand-crank-operated radio or television for use during power outages.

- Stay inside a well-constructed building away from the windows and the doors, even if they are covered. Go to an interior first-floor room, closet, or under the stairs.

- Be alert. Tornadoes are very often spawned during hurricanes. If the “eye” of the storm passes over your area, be aware that severe conditions will return with winds from the other direction in a very short time.

- Limit non-emergency calls. Be sure to keep calls brief to minimize any network congestion. Wait at least 10 seconds before redialing a call. For non-emergencies, try sending text messages.

- Once the storm passes, be patient. You will most likely not be able to return home right away.

- SEEKING SAFETY

- Have a plan in place for where you will go if an evacuation is issued for where you live. First consider staying with family and friends or a hotel far inland.

- If those options are unavailable, the S.C. Department of Social Services and the American Red Cross

- will provide a safe place to stay as the hurricane makes landfall. These emergency shelters may not have cots, blankets and other amenities for every

- person until well after hurricane conditions subside. Although some food may be provided, specialty foods for infants and for people on restricted diets may not be available. If you plan to go to a shelter for safety, bring all the items in your disaster supplies kit plus sleeping bags, pillows, and cots.

- RETURN HOME ONLY AFTER LOCAL AUTHORITIES ADVISE IT IS SAFE TO DO SO.

- If you have evacuated, some areas may be inaccessible even after the official evacuation order is rescinded.

- Keep tuned to your local radio and TV stations and monitor social media for recovery information.

- Avoid downed and sagging power lines.

- Report them immediately to the power company, police, or fire department.

- Be alert for driving restrictions.

- Avoid flooded roads and washed-out bridges and roadways.

- Follow directions provided by public safety officials.

- Enter your home with caution.

Open windows and doors to ventilate and dry your home.

Use the telephone only for emergency calls.

Check refrigerated foods for spoilage.

Beware of snakes, insects, and other animals driven to higher ground by floodwater.

Do not use candles or open flames indoors.

Use a flashlight to inspect for damage.

Take pictures.

Photos of the damage will help in filing insurance claims.

Contact your insurance claims agent as soon as possible.

Let a relative know you are home.

Tell them how to get in touch with you, especially if phone service is out.

Inspect the utilities in your home.

- **CHECK FOR GAS LEAKS.**

If you smell gas or hear a blowing or hissing noise, open a window and quickly leave the building. Turn off the gas at the outside main valve if you can. From a safe place, call to report a gas leak to your utility provider. If you turn off the gas for any reason, it must be turned back on by a professional.

- **LOOK FOR ELECTRICAL SYSTEM DAMAGE.**

If you see sparks, broken or frayed wires, or if you smell something burning, turn off the electricity at the main fuse box or circuit breaker. If you have to step in water to get to the fuse box or circuit breaker, call an electrician first for advice.

- **CHECK FOR SEWAGE AND WATER LINE DAMAGE.**

If you suspect sewage lines are damaged, avoid using the toilets and call a plumber. If water pipes are damaged, contact the water company and avoid water from the tap.

Monitor radio, TV, and social media.

Learn how to apply for possible assistance and how to receive further official information.

## 2020 S.C. HURRICANE GUIDE

*This Hurricane Guide was compiled and produced by the S.C. Emergency Management Division as a public service in coordination with state, federal, local and volunteer agencies, including the S.C. Department of Public Safety, S.C. Commission for Minority Affairs, Clemson University Extension Service, the S.C. Department of Insurance, National Weather Service, S.C. Broadcasters Association, S.C. Department of Natural Resources, Federal Emergency Management Agency, American Red Cross, S.C. Department of Transportation, and others.*

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**Dominion  
Energy**



Real Possibilities in

**South Carolina**



Have a plan. Make it personal.

**SCEMD**  
scemd.org @SCEMD

**VISIT SCEMD.ORG**  
to stay connected during an emergency.

- Our website is designed to make it easy to get information before, during and after a major disaster, such as a hurricane.
- It's also mobile-friendly so you can access important information no matter where you are.

Additionally, download the South Carolina Emergency Manager mobile app to develop your personal emergency plan and follow the official @SCEMD accounts on Facebook, Twitter, and Instagram to stay connected during an emergency.

During emergencies it's important to know the sources of the information you are consuming. Only trust information provided by verified and reputable sources to avoid misinformation, rumors, or malicious disinformation.

## E. Tornado Procedures

Emergency evacuations of learning centers during tornadoes can be traumatic for children. Advanced planning becomes especially critical to children's well-being. Rules for tornado drills require detailed plans that are practiced before a funnel cloud is ever spotted. Mock tornado evacuations help keep children and staff calm and focused in the event of a true emergency.

- **When a tornado warning is issued for your area, the following procedures should be followed:**

Move away from windows and glass doorways

Go to the innermost part of the building on the lowest possible floor

Assist children with special needs

Move away from materials and furniture that could fall on you

Account for all of the children and staff members by taking attendance

Use the head tuck position to protect from flying objects

If an evacuation crib is used, cover children with a blanket to protect from flying objects

Talk with children and offer reassurance

Send a note home to all parents describing the incident

Follow the evacuation and reunification procedures in this plan.

### Head Tuck Position



- **Preparing for a Tornado**

Immediately go to a safe location that you have identified.

Pay attention to EAS, NOAA Weather Radio, or local alerting systems for current emergency information and instructions.

Protect yourself by covering your head or neck with your arms and putting materials such as furniture and blankets around or on top of you.

Do not try to outrun a tornado in a vehicle if you are in a car. If you are in a car or outdoors and cannot get to a building, cover your head and neck with your arms and cover your body with a coat or blanket, if possible.

### III. Threat-Specific Emergency Procedures

#### A. Suicide Ideation

(Refer to Student Risk Identification Protocol for Details)

#### B. Active Shooter

Remain calm. Dial 911, if possible, to alert police to the active shooter's location. If you cannot speak, leave the line open and allow the dispatcher to listen. Quickly determine the most reasonable way to protect your own life.

RUN - HIDE - FIGHT ([Homeland Security Program](#))

RUN - If there is an accessible escape path and attempt to evacuate the premises.

- Have an escape route and plan in mind.
- Evacuate regardless of whether others agree to follow.
- Leave your belongings behind. Help others escape, if possible.
- Prevent individuals from entering an area where the active shooter may be.
- Keep your hands visible.
- Follow the instructions of any police officers.
- Do not attempt to move wounded people. Call 911 when you are safe.

HIDE - If evacuation is not possible find a place to hide where the active shooter is less likely to find you.

- Silence your cell phone. Turn off any source of noise (i.e., radios, televisions) Hide behind large items (i.e., cabinets, desks)
- Remain quiet.
- Your hiding place should be out of the active shooter's view.
- Provide protection if shots are fired in your direction (i.e., an office with a closed and locked door)
- Lock the door. Blockade the door with heavy furniture

FIGHT! - As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter.

- Act as aggressively as possible against him/her.
- Throw items or improvise weapons.
- Commit to your actions!

#### HOW TO RESPOND WHEN LAW ENFORCEMENT ARRIVES

- Remain calm and follow officers' instructions.
- Put down any items in your hands.
- Immediately raise hands and spread fingers. Keep hands visible at all times.
- Avoid making quick movements toward officers.

- Avoid pointing, screaming and/or yelling.
- Do not stop to ask officers for help or direction when evacuating, just proceed in the direction from which officers are entering the premises.

### **Information to provide to law enforcement or 911 operators:**

- The location of the active shooter.
- Number of shooters, if more than one.
- Physical description of shooter/s.
- Number and type of weapons held by the shooter/s.
- Number of potential victims at the location

Once you have reached a safe location or an assembly point, you will likely be held in that area by law enforcement until the situation is under control, and all witnesses have been identified and questioned. Do not leave until law enforcement authorities have instructed you to do so.

### **A.L.I.C.E.** ([A.L.I.C.E.\) Institute](#))

The A.L.I.C.E. program is designed to give a person, or group of people, who may find themselves in a violent, life threatening situation, some mental and physical tools that could play a vital role in their survival. The program is designed so that anybody can employ the strategies. Young, old, male, female, it does not matter. One does not have to be police, or military trained in order to survive a violent encounter. They do need to have a frame of reference from which to draw, when making life saving decisions under extreme pressure, much like preparing for a fire, tornado or earthquake.

**Alert** - notify authorities and those in harm's way of the danger at hand. It is important to be as clear and accurate with the information as possible. Remember to identify yourself, your location, the suspect information, type of weapon, direction of travel and a call back number. Don't hang up unless your safety is compromised, or you are directed to by the dispatcher.

**Lockdown** - or shelter in place. By locking down and barricading entry points, you are making yourself a hard target and creating a stronghold that nobody should be able to enter. Only police personnel may enter a locked down room.

**Inform** - give real-time updates. This can be accomplished with things such as video surveillance equipment or public address systems. Updates during a violent intruder incident allow you to make sound decisions about how to react and what steps, if any, to take next. They can also act as good distracters for the intruder.

**Counter** - the attacker as a last resort. There have been instances where victims did not have the ability to lockdown or get out because the violent incident occurred right next to them or they were in an area that was not securable. There is also the possibility of the intruder breaching a secured area. If this is the situation, then total commitment to countering the attacker is essential. Many objects can be used as

distraction devices, spread out, turn out the lights and be ready to cause confusion for the intruder and make yourself a hard target.

**Evacuate** - or get out!! Your goal here is to put as much time and distance as possible between you and the attacker. Don't use the same rally point as with a fire or earthquake drill, you will want to move much further away from this danger zone.

Remember, there are no guarantees in an active shooter/violent intruder situation, but just as in most other emergency situations the more you prepare, the better your chances of survival.

## C. Threatening Person Inside / Outside

### Inside Building:

- Report threatening person to the security and the senior staff member.
- Call 911 if necessary, based on the actions of the threatening person.
- Keep classroom/students secure, move all students away from threatening person. Move them into a safe classroom, if able to do so, or move threatening person into another room. If person becomes violent, staff and security must use sufficient force to stop the person until police arrive.
- Senior staff member will meet police and direct them to location.
- File incident report as soon as possible with safety and security through the MYLO report page.

### Outside Building:

- Immediately Lock front doors and move all staff and students to another area of the learning center out of view of the front doors. Report threatening person to the Site Administrator or senior staff.
- Call 911
- Assess measures for student safety. Follow Lockdown procedures as instructed.
- Leaders take control and give direction.
- Site Administrator will meet with police and give description and last location of threatening person. Do not lift lockdown unless safe to do so either at the direction of the police, Security Coordinator, or the senior staff member present.
- File incident report as soon as possible with safety and security through

## D. Lockdown / Shelter Inside

**Warning:** Verbal announcement of a “Lock Down / Shelter Inside by the Site Administrator or designee.

Action:

- All classroom doors are to be locked by a staff member.
- All students inside of the rooms will lay flat on the floor and take cover under or behind any furniture in the rooms.
- Everyone is to stay away from all windows.
- NO ONE is to open the door for any reason.
- The lights in the classroom are to remain ON during the lockdown unless otherwise instructed.
- Students will remain in the “lock down” action and all bells (including the Fire Alarm) will be ignored until the Site Administrator announces an “All Clear”.
- Students that are outside will be addressed in the “Active Shooter” section of this procedure guide.

## E. Person with A Weapon

Should a student or other person have a gun or other weapon in a backpack or on their person, but it is **not** visible and they are **not** exhibiting it in a threatening manner proceed with the instructions that follow. If the student or person is acting in a threatening manner with the weapon, refer to the Active Shooter section below.

Outside: Remain Calm. Notify the senior staff member in the learning center as quietly as you can about what you know. Do not panic and cause others to panic also. A cool head will get you through this.

- The senior staff member should call the security coordinator if possible, so that they can watch the person through the camera system, while working with them over the phone. Contact 911 in an area out of hearing of others. Be sure to give them the best description that you can of the person and the weapon if possible.
- Have the senior staff shadow the person to help keep an eye on them if possible. If the weapon is in a backpack and a staff member can separate the person from it without them becoming suspicious, have security take possession of the backpack, take it to a secure location, and wait for the police to arrive. If the weapon is in the person's waistband, then simply continue to act normally so as not to alert the person with the weapon that the police are on the way.
- When the police arrive, be sure that you immediately lock the doors to keep the person from coming inside to evade the police. Keep staff and students back until the police give you the all clear.
- File a report with safety and security through the MYLO page. Do not talk about this with anyone from the media, students, or other staff. A statement will be forthcoming from the media relations personnel.

Inside: Notify the senior staff member in the learning center as quietly as you can about what you know.

Do not panic and cause others to panic also. A cool head will get you through this.

- The senior staff member should call the security coordinator if possible, so that they can watch the person through the camera system. Contact 911 in an area out of hearing of others. Be sure to give them the best description that you can of the person and the weapon if possible.
- Have the senior staff shadow the person to help keep an eye on them if possible. If the weapon is in a backpack and a staff member can separate the person from it without them becoming suspicious, have security take possession of the backpack, take it to a secure location, and wait for the police to arrive. If the weapon is in the person's waistband, then simply continue to act normally so as not to alert the person with the weapon that the police are on the way.
- When the police arrive, lead them to the student as calmly as possible. Do not shout and point. That will alarm everyone including the person with the weapon and could make matters worse. If possible, have security standing by beforehand near the person to assist if needed. When the police are apprehending the person, move students quickly and quietly away from them. There should be a sufficient number of staff available to do this rapidly.

## F. Hostage Situation / Barricaded Subject

A hostage situation is any situation in which a person or persons are forced to stay in one location by one or more individuals. Weapons are usually in the possession of the hostage takers and hostages are threatened with some degree of bodily harm should they not comply with the directives of the hostage taker. Certain demands are usually made of outside officials in return for the release of the hostages. All hostage situations are dangerous events. A hostage taker might be a terrorist, fleeing felon, disgruntled employee (past or present), emotionally disturbed person, parent, student or any citizen angry about some situation. The dynamics of a hostage situation vary greatly and no two incidents will be the same.

### Plan of action:

Upon notification of a hostage situation at a school site the following procedure should be implemented:

- Call 911 immediately and notify the Principal or Site Administrator. The caller is to remain on the line with the 911 operator until the arrival of law enforcement personnel.
- The Site Administrator or Principal will assume command of the situation until Law Enforcement personnel arrive. All staff will work closely with the Site Administrator to ensure that this plan of action is safely achieved.
- Appropriate actions should be taken to isolate the hostage taker and the victims under his

- control. It is important that no additional individuals be exposed to the hostage taker.
- No school employee shall negotiate with or initiate any communications with the hostage taker. Let the experts do it.
- Evacuate the building to a prearranged location that is out of sight of the building. Ensure that the egress of students and staff is done in a manner that they do not go near the area controlled by the hostage taker to reduce the possibility of injury from gunfire. All persons should proceed to a pre-arranged location.
- Students are to remain under the supervision of school officials at all times.
- Upon the arrival of law enforcement, control of the scene will be relinquished to the responding agency. A site staff member, familiar with all aspects of the facility, should maintain contact with law enforcement and report to the command center when it is operational. It is important that items such as keys and detailed building plans be made available to the police upon their request
- The Site Administrator or Principal will, at the direction of the Area Superintendent, coordinate the evacuate students to another location or to their homes.
- The Public Information Officer and Law Enforcement will handle all press matters as well as the dissemination of information to students and parents at the scene.
- Upon the closure of the incident, the control of the school or building will be returned to the Center.

## G. Fights / Riots

### Instructor / Staff Procedures

- Assess seriousness of situation; determine need and secure nearest available assistance.
- STAY ON SCENE, take control and give specific directions to stop.
- Contact the Security guard, Principal and Administration and send responsible parties to main office.
- Document incident ASAP and get report to Administration.

### School Administrative Procedures

- Assess seriousness of the incident and determine the level of assistance needed (i.e. police, counselor).
- Identify parties involved.
- Determine medical assistance needed and involve counselor and nurse assistance if necessary.
- If blood is involved, utilize Blood borne Pathogens procedures notify School Nurse and Administration.
- Determine disciplinary consequences.
- Notify parents or legal guardian.
- Determine intervention and follow-up as necessary.
- Document incident and file report (i.e. for police, student file, etc).

## H. Bomb Threat

Bomb threat calls are sometimes made in order to disrupt the operations of daily business. We must treat each call as though it is real and in accordance with policy. When a Bomb Threat call is received, the person taking the call should:

- Remain calm.
- Immediately refer to the “Bomb threat Check List” and attempt to ask as many questions on the list as possible.
- Keep the caller on the line as long as possible. **Even if the caller hangs up on you; do not hang up the phone.**
- Notify Site Administrator immediately.
- Contact Administration who will contact the Sheriff’s Department.

If it is determined by the Site Administrator or Principal that the threat is “Real”; they will:

- Notify the Area Superintendent and make the appropriate “Lock Down” announcement.
- All communication devices are to be turned OFF at once.

When directed, staff will search their work areas with the following guidelines:

- Listen for any unusual sounds. Conduct a visual search in a methodical manner (floor to hips, hips to head, and head to ceiling).
- If anything unusual is located, **DO NOT TOUCH OR HANDLE IT.** Immediately notify the Site Administrator.
- The Site Administrator, in conference with the Area Superintendent and Fire/Sheriff’s Department, will determine if evacuation is necessary.
- Upon evacuation, leave all doors and windows open (If possible, and not time consuming).
- 

For a Bomb Threat - DO NOT:

- Do not use two-way radios, cell phones, or pagers.
- Do not turn on or off the electricity (Lights, etc.).
- Do not sound any bells or alarms.

(SEE BOMB THREAT CHECKLIST ON NEXT PAGE)

# Bomb Threat / Checklist

REMEMBER - KEEP CALM - DON'T HANG UP

Exact time of call \_\_\_\_\_

Exact words of caller  
\_\_\_\_\_

Questions to Ask:

When is the bomb going to explode \_\_\_\_\_

Where is the bomb? \_\_\_\_\_

What does it look like? \_\_\_\_\_

What kind of bomb is it? \_\_\_\_\_

What will cause it to explode?  
\_\_\_\_\_

Did you place the bomb?  
\_\_\_\_\_

Why?  
\_\_\_\_\_

Where are you calling from? \_\_\_\_\_

What is your address? \_\_\_\_\_

What is your name? \_\_\_\_\_

**Gender:** Male Female Age: Adult Teen Child

**Callers Voice (circle)**

Calm Disguised Nasal Angry Broken Stutter Slow Sincere Lisp Rapid Giggling

**Accent (Type):** Local Forgiveness Coherent Deep Crying Squeaky Excited Stressed Loud  
Slurred Normal

**Language Used (circle):**

Foul Irrational Incoherent Taped Well-Spoken Message read by caller

**Background Noise(circle):**

Voices Street Traffic Trains Animals Children Babies People Office Machines Music/Television  
Restaurant Sounds Quiet Factory Machinery Other

Is the voice familiar? \_\_\_\_\_ Who did it sound like? \_\_\_\_\_

**Upon completion of contact DO NOT inform any co-workers of the threat.**

**Contact the Principal, Area Superintendent or the Safety & Security Managers Immediately!**

Person filling out this form: Name \_\_\_\_\_ Date \_\_\_\_\_

Position \_\_\_\_\_ Extension or Phone # \_\_\_\_\_

## IV. Environmental Emergency Procedures

### A. Power Outage Procedures

Step One: Find out the estimated time that the power will be back by calling the local power company or checking their website.

Step Two: Site Admin or Principal will notify Area Superintendent of the situation.

Step Three: Assess the environment.

- Is there enough natural light to be able to see?
- Is temperature comfortable. (not too hot or cold)

If the Principal determines the environment is acceptable for students and staff can stay to work, then manual documentations of students 'work will be done and submitted to the teachers. If the environment is too dark and/or the temperature is too hot or too cold and with the ETA longer than 1 hour, the Principal will send staff members to a sister site to work on their folders etc., with a skeleton crew to stay at the school to notify scheduled students. School stays open with skeleton crew unless directed otherwise by Area Superintendent.

### B. Explosion

#### Threat of Explosion

In the event of a threat of explosion due to such things as leaking gas, the following actions should be taken:

- The Site Administrator or Principal will assess the situation, call 911.
- Prior to sounding the school "Fire Alarm" bell, notify the staff as to the proper evacuation route to take if different from the normal one. After the notification is made, sound the "Fire Alarm." This will automatically activate the "Building Evacuation Plan." And Reunification procedures in this plan
- The Site Administrator or Principal will direct further action as necessary.

#### Actual Explosion

In the event of an explosion the following will be accomplished:

- The Site Administrator or Principal will call 911.
- If the explosion occurred within a building, or threatens the building, the staff should immediately evacuate the building according to the "Building Evacuation Plan."
- If the explosion occurs while leaving the building, direct everyone to "Drop and Take Cover."
- The Fire Alarm will be activated.
- Move to an area of safety as far from the hazard as possible and maintain control of the students.
- Render First Aid as needed
- Use the fire extinguishers if appropriate. (All staff members should be aware of the

- locations and use of fire extinguishers).
- The Site Administrator will direct further action as required.
- Students and staff should NOT return to the buildings until fire department officials declare the area safe. Follow Reunification procedures in this plan.

## C. Gas Leak

### Instructor/Staff Procedures

- Evacuate area.
- Use fire drill evacuation procedures; do not pull fire alarm.
- Notify site administrator.
- Do not operate any electrical switches.

### School Administrative Procedures

- Call 911 for emergency personnel.
- Notify Gas Company.
- Notify staff of evacuation via the PA system, or door-to-door procedure
- Reoccupy building only when cleared by authorities.
- File incident report.

### Custodial Procedures

- Do not operate any electrical switches.
- Ventilate area via opening windows/doors.
- Shut off main gas lines.
- Assist Gas Company with locating the leak.
- Keep administration advised of situation.

## D. Chemical Spill / Hazardous Material Release

Chemical accidents / Hazardous materials spills could endanger the students and staff. When they occur the Site Administrator or Principal should be notified, and the magnitude of the accident will determine the need to:

- Notify Site Administrator, Principal and Fire/ Law Enforcement.
- Implement "Building Evacuation."
- Evacuate the site if necessary.
- Move upwind from the accident and maintain control of the students at a safe distance from the accident.
- The Site Administrator or principal will direct other actions as required.
- Refer to the MSDS safety sheets (if available) for additional action.
- Render first aid as necessary.
- Students and staff should NOT return to the site until the Fire Department officials declare the area safe. Follow reunification procedures in this plan.

If the chemical accident occurs in the community and a site could be affected, the Site Administrator and the Area Superintendent will be notified as to the course of action to be taken by emergency personnel and will execute the appropriate procedures.

## V. Health & Safety Programs

### A. COVID-19 Infection Control Plan

Please refer to a separate document containing the school's COVID-19 Infection Control (Plan for Resuming In-Person Instruction)

### B. EMERGENCY HEALTH PLAN

#### DIABETES

Diabetes is a chronic condition in which the body does not make or properly use insulin that is required to convert carbohydrates, like sugars and grains, into energy.

**Always notify the parent/guardian immediately!**

#### Health Goals:

- Student will recognize and communicate signs of illness to adults and will receive appropriate intervention to promote return to health.
- Student will participate in school activities, with accommodations as needed, to the fullest extent possible.

Signs of illness	Interventions
<p>Signs of low blood sugar</p> <ul style="list-style-type: none"><li>• Shakiness, dizziness</li><li>• Weakness, fatigue and sleepiness</li><li>• Sweating and pale</li><li>• Change in behavior, personality or concentration signifying a change in the level of alertness</li><li>• Poor coordination<ul style="list-style-type: none"><li>• Slurred speech</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Remain calm and assist to drink juice, soda or take glucose tablets</li><li>• <u>Do not</u> wait to test blood glucose levels; go ahead with assisting the victim to drink a <u>sugared fluid</u> or to eat glucose tablets</li><li>• <u>Do not</u> stop the Insulin Pump (if student is wearing one);</li><li>• <u>Do not</u> disconnect the tube or needle into the abdomen and<ul style="list-style-type: none"><li>• <u>Do not</u> turn it off.</li></ul></li></ul>

<p>Signs of severely <u>LOW</u> blood sugar</p> <ul style="list-style-type: none"> <li>• Unable to swallow saliva or food</li> <li>• Excessive drooling</li> <li>• Combative behavior</li> <li>• Unable to accept assistance <ul style="list-style-type: none"> <li>• Unconscious or unresponsive</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• If unable to swallow, do not offer fluids</li> <li>• Call 911</li> <li>• Give emergency glucagon injection if available and if you have been trained</li> <li>• Keep student on side as they may vomit after the injection.</li> <li>• Watch for victim to regain consciousness within 10 - 15 minutes, watching breathing; victim may vomit <ul style="list-style-type: none"> <li>• Contact parents and provide information to paramedics</li> </ul> </li> </ul>
<p>Signs of extremely <u>HIGH</u> blood sugar</p> <ul style="list-style-type: none"> <li>• Frequent thirst and urination</li> <li>• Blurred vision</li> <li>• Fatigue</li> <li>• Abdominal pain</li> </ul> <p>Numbness in arms and legs</p>	<ul style="list-style-type: none"> <li>• Give water up to 16 ounces if student will tolerate</li> <li>• Contact parents and send the student home</li> <li>• If victim has vomited, is very weak, or has a change in alertness, call 911</li> </ul>

- Do NOT put fluids or food in the mouth, cheeks or gums if unable to swallow, drooling excessively or unconscious, UNLESS it is the tube of glucose gel into the cheek pocket
- Student may have glucose gel with them. Otherwise, honey may be squeezed between cheek & gums and massaged into cheek tissue.

### Call 9-1-1 when

- Unable or unwilling to accept assistance (irritable or combative)
- Decreased alertness, increased confusion, or is unresponsive
- Unable to swallow saliva or fluids, or is drooling
- Seizure activity
- Glucagon injection administered, (or a tube of glucose gel (or honey) if a glucagon injection was not available), even if he / she is alert now because the effects of glucagon or glucose gel lasts ONLY about 15 minutes; Person will need to be monitored for at least 24 hours due to the dramatic fluctuation of glucose levels, especially after a glucagon injection

# RESPIRATORY CONDITIONS

Chronic respiratory conditions cause difficulty in breathing and are generally unrelated to viral or bacterial infection or an allergic reaction. During an episode of breathing problems, the lungs and airways temporarily lose their elastic quality, spasm to irritations, and become clogged with mucus. Asthma episodes, commonly referred to as attacks, are the most common breathing problem. Other conditions may include cystic fibrosis, lung disease, heart disease, smoking, bronchitis, etc.

**Always notify the parent/guardian immediately!**

## Health Goals

- Student will recognize and communicate signs of illness to adults and will receive appropriate intervention to promote return to health.
- Student will participate in school activities, with accommodations as needed, to the fullest extent possible.

Signs of illness	Interventions
<ul style="list-style-type: none"><li>• Unexplained or persistent cough</li><li>• Wheezing or whistling sound in chest</li><li>• Complaints of chest tightness</li><li>• Shortness of breath / breathing harder and faster</li><li>• Able to do some but not all usual activities - walking, talking, eating</li><li>• Speaks in short phrases</li></ul>	<ul style="list-style-type: none"><li>• Stop the student's activity and stay calm</li><li>• Remove any trigger if possible (dust, mold, odors, pets, pollen, smoke, exercise, changes in weather, etc.)</li><li>• Use a quick-relief inhaler (albuterol, levalbuterol, pirbuterol), as ordered &amp; if the student has it</li><li>• Encourage sitting upright to expand lungs</li></ul>
<ul style="list-style-type: none"><li>• Restless and irritable</li><li>• Difficult or painful breathing</li><li>• Lips or fingernails are gray or blue</li><li>• Nostrils open wide to get in more air</li><li>• Skin is sucked in around the neck and ribs during breaths</li><li>• Student does not respond normally, is less alert or drowsy / sleepy</li></ul>	<ul style="list-style-type: none"><li>• Assist the student to remain calm, slowing down and controlling breathing efforts</li><li>• Give sips of warm water to help relax spasms in lung airways</li><li>• Do not leave the student alone</li><li>• Contact the parent or guardian</li><li>• If no inhaler available, or no improvement in breathing in 15 minutes after first inhaler dose, contact 911</li><li>• SEE below for further information on calling 911</li></ul>

Call 911 when:

- Difficulty breathing with skin sucked in around the neck and ribs during breaths
- Stooped body posture with struggling or gasping for breath
- Difficulty talking due to shortness of breath, unrelieved with medication
- Lips or fingernails are gray or blue
- Does not respond normally, is less alert, confused, or drowsy / sleepy
- If no inhaler available, or no improvement in breathing in 15 minutes after first inhaler dose.
- Breathing stops, student is unresponsive or unconscious

## SEIZURES

In order to understand seizures, it is necessary to recognize that all seizures are caused by a sudden change in the way the brain sends signals. Seizures cause a momentary disruption of senses (staring spells) to short periods of unconsciousness (convulsions). Epilepsy is the term frequently used to describe a chronic seizure condition.

### ALWAYS CALL 911 FOR SEIZURE WITH LOSS OF CONSCIOUSNESS

Signs of Seizures	Interventions
<ul style="list-style-type: none"> <li>• Abrupt onset</li> <li>• Momentary lapse of awareness</li> </ul>	<ul style="list-style-type: none"> <li>• Protect student away from dangerous areas or objects</li> </ul>
<ul style="list-style-type: none"> <li>• Abrupt loss of consciousness for some types of seizures</li> <li>• Blank staring spells</li> <li>• Random activity (chewing / picking)</li> <li>• Stiffness, jerking, and / or falling</li> <li>• Non-convulsive seizures usually last a few seconds to one minute and are followed by rapid return to normal function and awareness without a need to rest</li> <li>• Convulsive seizures typically last 1-5 minutes</li> <li>• Remain calm and clear the area</li> <li>• Allow the seizure to run its course</li> <li>• Provide for privacy</li> </ul>	<ul style="list-style-type: none"> <li>• If student is buckled in wheelchair, do not remove them until the seizure is over</li> <li>• If student is in walker, pacer, gait trainer, carefully remove straps and buckles, and move to a safe place (because this is not a secure device like a wheelchair and cannot fully support an unconscious person)</li> <li>• Keep the airway clear (turn student to the side as vomiting may occur)</li> <li>• Protect the head (place jacket, pillow or blanket under head)</li> <li>• Time the length of the seizure</li> <li>• Stay with the student until seizure stops <ul style="list-style-type: none"> <li>- assess for breathing/circulation</li> <li>- start rescue breathing/full CPR if indicated &amp; while waiting for paramedics</li> </ul> </li> <li>• Document on the Seizure Record</li> </ul>

Severe allergic reaction, also known as anaphylaxis or an anaphylactic reaction usually occurs within 5-10 minutes but delayed reactions can occur for up to 4 hours after exposure to the allergen. Epinephrine is used to temporarily stop the body's reaction to the offending or allergic substance. Therefore, we DO NOT WAIT TO PROVIDE TREATMENT. **Always notify the parent/guardian immediately!**

### Severe Allergic Reaction (Allergens)

<u>Foods</u>	wheat, nuts, eggs, milk, fish, tropical fruits (avocado, bananas, kiwi, papayas), seeds
<u>Stinging or biting insects</u>	bees, wasps, ants
<u>Medications</u>	antibiotics, nonsteroidal anti-inflammatory drugs (aspirin, ibuprofen)
<u>Chemicals</u>	fertilizer, hazardous materials
<u>Latex</u>	rubber gloves, balloons, tape, band aids, erasers

There are several different types and brands of emergency epinephrine auto-injectors available. Staff trained to administer emergency epinephrine should be familiar with the different devices, and receive device-specific training, as well as individualized training, for those persons with physician orders.

Signs and Symptoms	Interventions
<ul style="list-style-type: none"> <li>Person reports the <u>bite</u> or <u>sting</u> or exposure to <u>allergic substance</u> (ate or breathed something)</li> <li>Mouth - swelling of the lips (feeling tight or heavy), tongue and/or mouth, unusual taste, complaints of mouth or tongue itching, having bumps, or feeling "funny"</li> <li>Skin - itching or burning, hives, rash, flushed, pale, swelling of face or local area</li> <li>Stomach - nausea, vomiting, stomach cramps, diarrhea</li> <li>Throat (life threatening) - itching or tightening of throat, difficulty swallowing, hoarse voice, hacking or repetitive cough</li> <li>Lung (life threatening) - short of breath, wheezing, chest tightness, flared nostrils, not being able to "catch a breath"</li> <li>Heart (life threatening) - weak, rapid pulse (near or over 100), low blood pressure, blue lips or nail beds, dizziness, fainting, general weakness</li> <li>Other - apprehension/ anxiety, red/itchy/watery eyes, nasal congestion, excessive sneezing, feeling like there is something in the ear or eyes</li> </ul>	<ul style="list-style-type: none"> <li>Remain calm and reassure student</li> <li>Stay with the student and do not move them because increased circulation of venom or chemical may intensify symptoms</li> <li>Monitor airway and breathing</li> <li>Get the epinephrine injection. (Student may be carrying this in their backpack, although most are not)</li> <li>Prepare to administer *List of trained staff is posted next to the EpiPen container near the First Aid area at your site*</li> <li>Give epinephrine injection immediately according to device specific training)</li> <li>Under 66 lbs., use 0.15 mg dose</li> <li>66 lbs. or more, use 0.30 mg dose</li> <li>Massage injection area for 10 seconds</li> <li>CALL 911, if not already contacted</li> <li>Notify parent or guardian and administrator</li> <li>Continue to monitor breathing and maintain an open airway.</li> <li>Perform rescue breathing, if needed</li> <li>If symptoms continue or re-occur and the paramedics have not arrived after 15 minutes, use a new epinephrine auto-injector to inject the victim a second time since the effect may be wearing off after this short time</li> </ul>

	<ul style="list-style-type: none"> <li>Student may feel their heart pounding after the epinephrine and deeper breathing; this is a normal reaction</li> </ul>
<p><b>Always call 911 when student has received an epinephrine injection</b></p>	<ul style="list-style-type: none"> <li>If student was stung, remove the stinger AFTER giving the injection &amp; do not push, pinch, or squeeze the area since it may cause more venom to be released; apply ice pack to site if available.</li> </ul>

## C. Injury and Illness Prevention Program

### Management Policy Statement

It is the [School](#) policy that every employee and student are entitled to a safe and healthful place in which to work. To this end, every reasonable effort will be made in the interest of Accident Prevention, Fire Protection, Health Preservation and Employee/Student Security.

We at [School](#) have a basic responsibility to make the safety of our employees and students our primary concern. We will be counting on you to do your part in making our program an effective one.

The successful operation of [School](#) will not only depend on education and service, but also how safely each job is performed. There is no job so important - or any service so urgent - that we cannot take time to work safely. We consider the safety of our personnel and students to be of prime importance, and I expect your full cooperation in making our program effective.

### Identification of Plan Administrators

The following persons are responsible for implementing the accident prevention plan for [School](#) \*

<u>NAME</u>	<u>TITLE</u>
<u>Tres Simi</u>	<u>Senior V.P Strategic Communications and Facilities</u>
<u>Chad Gray</u>	<u>Chief Human Resources Officer</u>
<u>Nicole Perkins</u>	<u>V.P. RISK and Benefits Department</u>
<u>Grace Sanchez</u>	<u>Senior Director People's Services</u>
<u>Soliman Villapando Jr.</u>	<u>Director Safety and Security</u>

The above officers, managers, or supervisors are the designated key personnel responsible for implementing the School's Injury and Illness Prevention Program.

### SUPERVISORS

Our supervisors are the foundation of the safety program. Their responsibilities are to:

- Provide complete safety training to employees before assignment of duties.
- Consistently and fairly enforce all School safety rules.
- Investigate injuries to determine cause, and then take action to prevent repetition.
- See that all injuries, no matter how minor, are treated immediately and referred to the HR department to ensure prompt reporting to the insurance carrier.
- Inspect work areas often to detect unsafe conditions and work practices. Utilize School Safety Inspection checklists as required.

## Employees

Employee responsibilities for safety require that they:

- Adhere to all safety rules and regulations.
- Wear appropriate safety equipment as required.
- Maintain equipment in good condition, with all safety guards in place when in operation.
- Report all injuries, no matter how minor, immediately to a supervisor.
- Encourage co-workers to work safely.
- Report unsafe acts and conditions to the supervisor.

## Code of Safe Practices

For the protection and safety of all employees, School has established the following rules designed to prevent accidents and injuries. It is imperative that all employees become thoroughly familiar with these safety rules. Failure to comply with safety rules or procedures, or failure to wear the appropriate safety equipment, will result in disciplinary action up to and including termination.

1. Report all unsafe conditions and equipment to your supervisor or safety coordinator.
2. Report all incidents, injuries and illnesses to your supervisor or safety coordinator immediately.
3. Means of egress shall be kept unblocked, well-lighted and unlocked during work hours.
4. In the event of fire, sound alarm and evacuate.
5. Upon hearing fire alarm, stop work and proceed to the nearest clear exit. Gather at the designated location.
6. Only trained workers may attempt to respond to a fire or other emergency.
7. Exit doors must comply with fire safety regulations during business hours.
8. Stairways should be kept clear of items that can be tripped over and all areas under stairways that are egress routes should not be used to store combustibles.
9. Materials and equipment will not be stored against doors or exits, fire ladders or fire extinguisher stations.
10. Aisles must be kept clear at all times.
11. Work areas should be maintained in a neat, orderly manner. Trash and refuse are to be thrown in proper waste containers.
12. All spills shall be wiped up promptly.

13. Files and supplies should be stored in such a manner as to preclude damage to the supplies or injury to personnel when they are moved. Heaviest items should be stored closest to the floor and lightweight items stored above.
14. All cords running into walk areas must be taped down or inserted through rubber protectors to preclude them from becoming tripping hazards.
15. Never stack material precariously on top of lockers, file cabinets or other high places.
16. Never leave desk or cabinet drawers open that present a tripping hazard. Use care when opening and closing drawers to avoid pinching fingers.
17. Do not open more than one upper drawer at a time, particularly the top two drawers on tall file cabinets.
18. Always use the proper lifting technique. Never attempt to lift or push an object which is too heavy. You must contact your supervisor when help is needed to move a heavy object.
19. When carrying material, caution should be exercised in watching for and avoiding obstructions, loose material, etc.
20. All electrical equipment should be plugged into appropriate wall receptacles or into an extension of only one cord of similar size and capacity. Three-pronged plugs should be used to ensure continuity of ground.
21. Individual heaters at work areas should be kept clear of combustible materials such as drapes or waste from waste baskets. Newer heaters which are equipped with tip-over switches should be used.
22. Appliances such as coffee pots and microwaves should be kept in working order and inspected for signs of wear, heat or fraying of cords.
23. Fans used in work areas should be guarded. Guards must not allow fingers to be inserted through the mesh. Newer fans are equipped with proper guards.
24. Equipment such as scissors, staplers, etc., should be used for their intended purposes only and should not be misused as hammers, pry bars, screwdrivers, etc. Misuse can cause damage to the equipment and possible injury to the user.
25. Cleaning supplies should be stored away from edible items on kitchen shelves.
26. Cleaning solvents and flammable liquids should be stored in appropriate containers.
27. Solutions that may be poisonous or not intended for consumption should be kept in well-labeled containers.
28. Anyone known to be under the influence of intoxicating liquor or drugs, shall not be allowed on the job while in that condition.
29. Horseplay, scuffling, and other acts which tend to have an adverse influence on the safety or well-being of the employees are prohibited.
30. Do not stack material in an unstable manner.
31. Report exposed wiring and cords that are frayed or have deteriorated insulation so that they can be repaired promptly.
32. Never use a metal ladder where it could come in contact with energized parts of equipment, fixtures or circuit conductors.
33. Maintain sufficient access and working space around all electrical equipment to permit ready and safe operations and maintenance.

34. Do not use any portable electrical tools and equipment that are not grounded or double insulated.
35. All electrical equipment should be plugged into appropriate wall receptacles or into an extension of only one cord of similar size and capacity. Three-pronged plugs should be used to ensure continuity of ground.
36. Inspect motorized vehicles and other mechanized equipment daily or prior to use.
37. Shut off engine, set brakes and block wheels prior to loading or unloading vehicles.
38. Inspect pallets and their loads for integrity and stability before loading or moving.
39. Do not use compressed air for cleaning off clothing.
40. Do not store compressed gas cylinders in areas which are exposed to heat sources, electric arcs or high temperature lines.
41. Wear hearing protection in all areas identified as having high noise exposure.
42. Goggles or face shields must be worn when grinding.
43. Do not use any faulty or worn hand tools.
44. Guard floor openings by a cover, guardrail, or equivalent.
45. Do not enter into a confined space unless tests for toxic substances, explosive concentrations, and oxygen deficiency have been taken.
46. Always keep flammable or toxic chemicals in closed containers when not in use.
47. Do not eat in areas where hazardous chemicals are present.
48. When working with a computer monitor, have all pieces of furniture adjusted, positioned and arranged to minimize strain on all parts of the body.
49. Wear proper footwear and clothing at all times.
50. When operating machinery, do not wear loose clothing, jewelry or a hairstyle that poses a danger of catching such items in moving machinery.
51. Wear eye protection when performing any task that may produce flying particles.
52. Operate machinery with all guards in place. Tampering with safety devices is cause for immediate disciplinary action.
53. Do not operate any machine for which you have not been trained.
54. Before cleaning, adjusting or servicing any machinery, turn off machinery, break the electric circuit at the power source (including lockout), and place warning tags at the power source and all intermediate controls in the electric circuit. All maintenance personnel must have their own individual padlocks to ensure that power remains off until all work has been completed.
55. Immediately report any defects in materials, machinery, tools, and equipment to a supervisor.
56. Do not leave tools, materials or other objects on the floor that might cause others to trip and fall.
57. Do not block exits, fire doors, aisles, fire extinguishers, gas meters, electrical panels or traffic lanes.
58. Always use proper lifting techniques. Stand with your feet slightly apart, assume a squatting position with knees bent and tuck your chin. Tilt head forward, grasp the load with both hands and gradually push up with your legs, keeping your back straight and avoiding any abrupt movement.
59. Do not distract others while working. When approaching a machine operator for any purpose, do so from the front or the side in a way that the operator will see you coming and will not be surprised. If conversation is necessary, first ask the operator to turn off the machinery.

60. Do not leave oil, wax, water, or any other material on the floor where you or others may slip. Clean up spills immediately or cordon off the area and report the spill to your supervisor.
61. When handling hazardous materials, follow prescribed safety procedures precisely and use required safety equipment. When using secondary containers filled by others, make sure that they are conspicuously and correctly labeled with their contents and hazards.
62. Use cut resistant gloves when handling materials with sharp or jagged edges that may result in lacerations.
63. Unnecessary and excessive haste is the cause of many accidents. Exercise caution at all times. WALK, DO NOT RUN!
64. Do not use hot production equipment or materials to cook or heat food.
65. Immediately report all work-related injuries and accidents to your supervisor, no matter how minor the injury.
66. Avoid risk of rupture, internal injury or back injury in attempting to lift or push excessive loads. If an object is too heavy to move without strain - ASK FOR HELP.
67. Follow all COVID-19 infection control procedures in this safety plan.

**Compliance with these Codes of Safe Practices is Mandatory.**

## DISCIPLINARY PROCEDURES

Employees who fail to comply with safety rules will be subject to disciplinary action up to and including termination. Supervisors will apply the following established disciplinary procedures:

- **Verbal counseling**, as result of the first safety violation must be documented in the employee's personnel file.
- **Written warning** describing in appropriate detail, both the nature of the employee's safety offense and necessary corrective action will be personally delivered to the employee by his/her immediate supervisor. A copy of the written warning will be maintained in the employee's personnel file.
- **Suspension** without pay will be imposed for an employee's third safety violation or, as a separate disciplinary action for a serious violation.
- **Termination** of employment will occur upon any documented safety violation committed by an employee following a suspension without pay in the circumstances described in section 3) above.

Supervisors will be demoted or terminated after three (3) documented instances of disciplinary actions. Supervisors are subject to disciplinary action for the following reasons:

- Repeated safety rule violation by their department employees.

- Failure to provide adequate training before job assignment.
- Failure to report accidents and provide medical attention to employees injured at work.
- Failure to control unsafe conditions or work practices.
- Failure to maintain good housekeeping standards and cleanliness in their departments.

## SAFETY TRAINING

All workers, including managers and supervisors, will receive training and instruction on general and job-specific safety and health practices. Training and instruction for the Injury and Illness Prevention Program (IIPP) will be provided:

- When the IIPP is first established.
- To all new workers, except for construction workers who are provided training through a construction industry occupational safety and health training program approved by Federal or State OSHA. Acknowledgement and Receipt form will be used to document this training. (See page 72)
- To all workers given new job assignments for which training has not previously provided.
- Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard.
- Whenever the employer is made aware of a new or previously unrecognized hazard.
- To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed.
- To all workers with respect to hazards specific to each employee's job assignment.
- During new-hire orientation for new employees

General workplace safety and health practices include, but are not limited to, the following:

- Implementation and maintenance of the IIP Program.
- Emergency action and fire prevention plan.
- Provisions for medical services and first aid including emergency procedures.
- Providing guidance to employees regarding protection of the muscular-skeletal system, including proper lifting techniques.
- Proper housekeeping, such as keeping stairways and aisles clear, work areas neat and orderly, and promptly cleaning up spills.
- Prohibiting horseplay, scuffling, or other acts that tend to adversely affect workplace safety.

- Proper storage to prevent stacking goods in an unstable manner and storing goods against doors, exits, fire extinguishing equipment and electrical panels.

We train our workers about the following training subjects (when applicable):

1. The School's Code of Safe Practices.
2. Safe practices for operating work equipment.
3. Good housekeeping, fire prevention, safe practices for operating any office and construction equipment.
4. Safe procedures for cleaning and adjusting of equipment, and machinery.
5. Safe access to working areas.
6. Protection from falls.
7. Electrical hazards
8. Proper use of powered tools.
9. Guarding of belts and pulleys, gears and sprockets, and conveyor nip points.
10. Machine, machine parts, and prime mover guarding.
11. Lock-out/tag-out procedures.
12. Material, stock, or merchandise handling.
13. Chainsaw and other power tool operation.
14. Fall protection from elevated locations.
15. Use of elevated platforms, including condors (boom lifts), and scissor lifts.
16. Driver safety.
17. Slips, falls, and back injuries.
18. Ergonomic hazards, including proper lifting techniques and working on ladders or in a stooped posture for prolonged periods at one time.
19. Use of personal protective equipment.
20. Respiratory equipment.
21. Hazardous chemical exposures.
22. Hazard communication.
23. Physical hazards, such as heat/cold stress, noise.
24. Blood borne pathogens and other biological hazards.
25. Proper reporting of hazards and accidents to supervisors.
26. Hazard communication, including worker awareness of potential chemical hazards, and proper labeling of containers.
27. Laboratory safety.
28. Proper storage and handling of toxic and hazardous substances including prohibiting eating or storing food and beverages in areas where they can become contaminated
29. COVID-19 prevention procedures detailed in the Covid-19 Infection Control Plan in this safety plan.

## Employee Suggestions/ Communications

It is School policy to maintain open communication between management and employees on matters pertaining to safety.

Employee participation is important and essential to the safety program. Employees should feel free to:

- Express safety concerns or suggestions during safety meetings
- Individually speak with their supervisor
- The safety suggestion form will allow employees to remain anonymous if they desire; however, this will make it difficult to provide special recognition if the suggestion is put to action.
- All safety suggestions will be given serious consideration, and each will receive a response.
- All COVID-19 required communications and notifications by the state and local public health and OSHA are stated in the COVID-19 Infection Control Plan on section V.

In turn, the School will provide current safety news and activities, safety reading materials, signs, posters, and a bulletin board for easy access by all. Also, regular safety meetings will be held so that all employees have an opportunity to receive safety training and voice personal opinions regarding safety.

A Digital [Employee Safety Suggestion form](#) is also available on [MYLO](#)

# Employee Safety Suggestion Form

We are currently working on an anonymous web-based Safety Suggestion Drop Box; until that project is completed, we are providing all employees with this "Safety Suggestion Form" which can be scanned and e-mailed directly to our Learn4Life Safety Coordinator.

Please write as much detail as possible to help us pinpoint the safety issue/s in your specific location.

**Scan and e-mail this form using one of the networked copiers in any of the Learn4Life locations to: [SVillapando@learn4life.org](mailto:SVillapando@learn4life.org)**

**This form is to be used by employees who wish to report a safety suggestion or report unsafe work conditions or practices.**

Description of unsafe condition or practice: \_\_\_\_\_  
\_\_\_\_\_

Address of the location where the safety issue was observed: \_\_\_\_\_

Cause or contributing factor: \_\_\_\_\_

Employee's suggestion for improving safety: \_\_\_\_\_  
\_\_\_\_\_

Has this been reported to the Principal, Site Administrator or Safety Designee of the location?  
YES \_\_\_ NO \_\_\_

Employee Name (Optional): \_\_\_\_\_ Date: \_\_\_\_\_

**Including your name in this form will enable the Safety Coordinator to give you the added benefit of a status report and update about your safety suggestion.**

*No employee will be retaliated against for reporting conditions or making suggestions. None of our employees are required to work at a job that is unsafe or unhealthful. Your cooperation in detecting hazards would be greatly appreciated.*

Any questions, please ask your principal or call  
Soliman Villapando Jr, Safety Coordinator ph: **661-418-1539** e: [SVillapando@learn4life.org](mailto:SVillapando@learn4life.org)

## INSPECTIONS

The purpose of workplace inspections is to locate potential hazards that can adversely affect safety and health. They are an essential and effective part of hazard control when used for fact-finding, not faultfinding.

### Daily Inspections

All personnel are responsible for continuous, day to day inspections of their immediate workspace for actual and potential hazards observed during the course of performing their assigned duties.

Unsafe or unhealthy work conditions and practices will be corrected in a timely manner, according to the following procedures:

- Imminent hazards will be corrected immediately when observed or discovered.
- If an imminent hazard cannot be immediately corrected without endangering employee(s) and/or property, we will remove all exposed workers from the area except those necessary to correct the existing condition. Workers who are required to correct the hazardous condition will be provided with the necessary protection or an outside vendor will be brought in to mitigate the issue.
- Periodic Inspections

Periodic planned inspections are performed according to the following schedule:

- When we initially established our IIP Program;
- When new substances, processes, procedures or equipment which present potential new hazards are introduced into our workplace;
- When new, previously unidentified hazards are recognized;
- When occupational injuries and illnesses occur; and
- Whenever workplace conditions warrant an inspection.

Periodic planned inspections will be made by members of the safety committee, or other designated individuals, utilizing the Safety Inspection Checklist report form (See Pages 62-64). A written report will be prepared following each inspection and reviewed by the safety committee (or designated management representative). Any potential hazards detected will be eliminated on a timely basis, as determined by severity. Assignments, target dates for completion, and actual completion dates will be documented in the minutes of the safety committee.

### Safety Designees and Safety Meetings

Our School safety designees will be comprised of members (supervisors and/or employees) of the various departments, and management. They will meet on a monthly basis, and review the following:

- Minutes of the previous meeting.
- Unfinished business of the previous meeting including corrective actions authorized during the previous meeting.
- Safety Inspection Checklist.
- Discussion of accidents and corrective action taken.
- Accident trends.
- New and outstanding recommendations submitted by outside agencies (insurance carrier, fire department, Cal/OSHA, etc.)
- New business.

All meetings will be documented. Group safety meetings - supervisors will be responsible for holding department safety meetings on a regular basis. Employee attendance and discussion topics will be documented.

## Accident Investigations and Reports

Supervisory personnel will be primarily responsible for investigating all accidents in their areas of responsibility. Accidents involving serious injury, fire or extensive property damage will be investigated jointly by the responsible supervisor, the direct manager, and the human resources manager.

The primary goal of the accident investigation process is the prevention of future similar accidents using knowledge derived from the investigation. Additionally, the investigation will be used to prepare reports required by Federal and State laws as well as the workers' compensation insurance carrier. These reports are critical in assessing the School's liability and the supervisor's accountability under the law.

Procedures for investigating workplace accidents and hazardous substance exposures include:

- Interviewing injured workers and witnesses
- Examining the workplace for factors associated with the accident/exposure
- Determining the cause of the accident/exposure
- Taking corrective action to prevent the accident/exposure from reoccurring
- Recording the findings and actions taken

A [Digital Accident and Incident report form](#) is also available on [MYLO](#).

## ACCIDENT INVESTIGATION REPORT

Name of Injured \_\_\_\_\_

Address/Location of Accident:

\_\_\_\_\_

Witnesses:

Name of Witness \_\_\_\_\_

Describe activity at time of accident. (Attached any relevant pictures):

\_\_\_\_\_

Describe any unsafe behavior:

\_\_\_\_\_

Describe any unsafe conditions:

\_\_\_\_\_

Were other employees injured/involved in the accident?

\_\_\_\_\_

If employee was injured doing normal work activities, why did injury occur in this case?

\_\_\_\_\_

What corrective action is needed to prevent similar injuries?

\_\_\_\_\_

Has this corrective action been taken?

\_\_\_\_\_

If not, when will it be taken?

\_\_\_\_\_

Supervisor/Investigator signature: \_\_\_\_\_

Date: \_\_\_\_\_

## INSTRUCTIONS FOR COMPLETING ACCIDENT INVESTIGATIONS

Conducting a thorough accident investigation promptly after an injury occurs can be the first step toward preventing future worker injuries. The benefits that can be derived from this process are frequently overlooked by employers. Investigations can lead to safer working conditions, restore the sense of security of employees, increase productivity, and save money for the School.

The primary goal of an accident investigation is to identify the underlying cause of the injury. This underlying cause, often referred to the “root cause of injury,” is not always easily identified. An investigator may need to look at a series of causes and effects reaching back to the first event on the chain of events leading up to the injury.

The following guidelines are provided for conducting an accident investigation.

- The immediate supervisor of the injured employee should perform the investigation.
- The investigation should begin immediately after the injured employee has received on-site medical assistance or has been transported to medical facilities.
- Evidence (including tools and equipment) should be preserved so their condition can be determined.
- Witnesses should be identified and detailed documented interviews conducted.
- Photographs of equipment and conditions around the accident area should be taken.
- Training records of the injured and anyone else involved in the accident should be reviewed
- A written report should be prepared when all of the facts have been reviewed.

The investigation should ask the questions: Who, What, Where, and When, but the most important question is Why the injury occurred. Oftentimes the injured employee may have performed the same task repeatedly without getting injured. It is important to know why the injury occurred this time. The answer to the Why question may indicate something was done differently, and this can often be the “root cause” of the injury.

### **Additional Resources**

To assist employers and workers in conducting effective incident investigations, and to develop corrective action plans, the following resources can help:

- OSHA Fact Sheet. [Root Cause: The Importance of Root Cause Analysis During Incident Investigation](#). (2016). This fact sheet provides guidance for identifying root causes of incidents and/or near misses in order to prevent their recurrence.

## Recordkeeping

The School will maintain the following records for the Injury and Illness Prevention Program (IIPP):

### RECORDS OF INJURIES AND ILLNESSES REPORTED TO OSHA\* (only if there are fatalities for Partially Exempted SIC Codes 82-Educational Services)

- Each fatality, injury or illness that is work-related will be recorded on OSHA Form 300 according to its instructions.
- An Injury and Illness Incident Report will be prepared (OSHA Form 301 or its equivalent).
- Annually review and certify the OSHA Form 300.
- Annually post the Summary of Work-Related Injuries and Illnesses (Form 300A) in a conspicuous place where employees can see it, no later than February 1 and keep it posted until April 30.
- OSHA records will be maintained in by employer for five (5) years.
- All COVID-19 reported cases are digitally stored on a secured internal database on [MYLO](#)

Copies of OSHA forms may be obtained at <http://www.osha.gov> or from the OSHA publications office. Direct access to the

South Carolina Standard and South Carolina forms may be obtained at <http://www.south Carolinaosha.info/>.

### Records of Workplace Hazards

Records of all imminent or potential hazards observed in the workplace, whether detected by an employee or by the safety committee during planned periodic inspections, will be recorded on hazard assessment and correction forms. The records will include the name(s) and job titles of the person(s) that detected an actual or potential hazard or the safety committee members conducting the inspection, full descriptions of the unsafe conditions and/or work practices that have been identified, and the action(s) taken to correct the identified unsafe conditions and work practices.

### Safety and Health Training Records

1. Documentation of safety and health training, including the worker's names, the training date, type(s) of training, and training providers are recorded on the training record.
2. Inspection records and training documentation will be maintained for five years except for training records of employees who have worked for less than one year which are provided to the employee upon termination of employment.

A Digital [Anonymous Safety Report](#) form is also available on [MYLO](#)

LOCATION \_\_\_\_\_ DEPT. \_\_\_\_\_ DATE \_\_\_\_\_

LOCATION OF UNSAFE CONDITION (Describe in Detail):

--

Recommendations to Correct this Condition: \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

Recommended Corrective Action:

Estimated Completion Date: \_\_\_\_\_

# FIRE AND SAFETY INSPECTION CHECK LIST

Inspection Conducted by: \_\_\_\_\_ Position: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ School: \_\_\_\_\_ Address: \_\_\_\_\_ Charter: \_\_\_\_\_

YES	NO	Parking Lot
		Any Ice or Black Ice Present? (during seasons with freezing temperatures)
		Do you notice any broken sprinkler heads?
		Are the parking lot lights working properly? (timers are set to turn on and off correctly?)
		Do you notice any homeless people loitering around the site? (if yes, please call local law enforcement to report)
		Other Observations - suspicious activities? (Please indicate below):
YES	NO	Entrance Area
		Is the site free of evidence of continuing pest infestation? (if no, has pest control or property management been contacted?)
		Are Rugs flat and dry at all times?
		Do you observe any tripping hazards?
		Are electrical outlets in good condition? (no cracks, missing pieces or burn marks)
		Are lights and switches in good working condition?
		Do you notice any Graffiti?
		Do you detect any unusual odors (LPG, burning smell, cigarette / vaping smoke)
		IdentiMetrics System working? Are the students using it?
		Do you observe the security guard/s performing their duties according to their post orders? (if guards are assigned) are they screening people for COVID-19 Symptoms before entry according to the Infection Control Plan?
		Are all required COVID-19 postings, signs, sanitizers and PPE present?
YES	NO	Instructional Areas
		Any broken furniture? (Desks, Chairs, Tables)
		Do you observe any tripping hazards? (Extension cords, phone chargers, laptop cables, etc.)
		Are exit doors accessible and properly marked?
		Are bookshelves and filing cabinets earthquake braced?
		Do you observe filing cabinets being left open/or two or more file drawers open at the same time?
		Do you detect any unusual odors? (smoke, LPG, burnt smell)

		Are lights, switches and outlet covers in good condition?
		Are Fire exit doors and hallways free of obstructions? (there should be at least 36-48 inches clearance)
		Are all required COVID-19 postings, signs, sanitizers and PPE present?
YES	NO	Storage and Break Rooms
		Do you see observe any tripping hazards (do the walkways have at least 36-48 inches clearance?)
		Are the shelves stocked safely and neatly?
		Are lights, switches, electrical outlets are in good working condition?
		Is the refrigerator clean and free of outdated and spoiled food?
		Are the floors always kept free of wet spills and debris?
		Is there a non-slip floor matt?
		Are trash cans clean and always emptied out when full?
		Are toasters and microwaves clean and in good working order?
		Are storage racks in good condition and earthquake braced?
Are all required COVID-19 postings, signs, sanitizers and PPE present?		
Yes	NO	Bathrooms
		Are all restrooms available for use?
		Are all restrooms adequately stocked (toilet paper, soap, and paper towels); and maintained in sanitary condition?
		Are there any broken fixtures or leaks?
		Are there any Graffiti?
		Are floors kept dry and free of debris?
		Do you observe any tripping and slipping hazards?
Are all required COVID-19 postings, signs, sanitizers and PPE present?		
YES	NO	General Condition
		Are employees practicing safety & security rules and procedures? (refer to Code of Safe Practices)
		Are Emergency Procedures and School Safety Plans current and readily available?
		Are non-smoking / non-vaping / no alcohol / no drugs / no weapons policies being enforced?

	Are the dress codes for both employees and students being enforced?
	Are all "employees and students" wearing Identification badges in a visible manner?
	Are the workplace's clean and in order?
	Are staff trained on and using safe lifting techniques? (If no, contact Safety for training materials & videos)
	Do all heaters have a working tip over switch?
	Are space heaters kept at least three feet away from any combustible items, such as paper, furniture, draperies, etc.?
	Are all electric space heaters plugged directly into the wall?
	Is the AED in good standby mode (green light flashing)
	Are the Electro pads and/or the AED battery expired?
	Is the AED cabinet alarm working? (Initial the tag for the month)
	Are required evacuation maps properly displayed? (If no, please request from Safety)
	Are EpiPens clear and colorless and not expired?
	Is first aid cabinet properly stocked? (order empty items from staples using the item # on the empty box)
	Is emergency lighting available and in good working order?
	<b>FIRE SAFETY CHECKLIST</b>
	Are all fire extinguishers in good standby order? (check if pressure gauge at green zone and initial the tag for the month)
	Is the Fire Extinguisher recertified annually? ( Enter the last date of certification)
	Is the Fire Alarm system working properly? Checked daily and Monthly
	Is the system certified annually? ( Enter the last date of certification)
	Is the Emergency Lighting working properly? Test monthly?
	Is the Emergency Lighting tested and certified annually? ( Enter the last date of certification)
	Is the Fire Sprinkler System in good condition and tested and certified annually ( Enter last date of test)
	Are aisles towards the emergency exits doors free of obstructions? (36-48" clearance)
	Has maintenance request been placed for necessary repairs? (broken windows, carpet condition, graffiti, etc.)
YES	Threat Assessment Meeting of Counselors, Psychologists, Principal/s, AP/s and LCC/s
	Threat assessment meetings about dangerous students are held periodically

	Are there any cases that need to be forwarded to Safety & Security and Law Enforcements? (Fill comments below for more details)
	Are all required COVID-19 postings, signs, sanitizers and PPE present?

General Comments & Recommendations:

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## EMPLOYEE SAFETY ORIENTATION CHECKLIST

EMPLOYEE \_\_\_\_\_

SUPERVISOR/TRAINER \_\_\_\_\_

The following is an outline only. If you observe other conditions that should be covered in the new employee safety orientation, add them to this form and report them to the Safety Committee Member in your area. Return this checklist to the Personnel Office upon completion.

### CLOTHING AND DRESS

#### Footwear

- Discuss safety rules in detail. Show employee some examples of acceptable shoes.

#### Personal Clothing

- Discuss danger of being poorly clothed for position.
- Discuss jewelry, loose fitting clothes, shorts or other clothing that is inappropriate for the job.
- Discuss hazard of hair length around equipment.

Safety Articles Issue Glasses, ear protectors, respirators and protective clothing where applicable.

- Give instructions for use and cleaning. Discuss enforcement of rule.

### MATERIAL HANDLING

Lifting in general - discuss some common sense tips for lifting safety such as;

- Take a realistic look at an object you have never lifted before...can you safely lift it? How?
- See if there is a label to tell you how heavy it is or how to lift it (give some examples where available).
- See how others are handling the object.
- Give it a test tug or lift before trying to fully lift and/or carry it.

- Don't be a hero!!! Use material handling equipment or ask for help where necessary.
- Lifting techniques - physically demonstrate to the employee the correct way to lift, push, pull, or move every item that the employee will handle that is different enough to be covered separately. Use the "watch-me, now-you-do-it" approach and reinforce the importance of:

#### Foot position

- place feet as far apart as shoulders for balance and get as close as possible to the object rather than stretching.

#### Back position

- keep your back straight...bend the knees and squat to pick up the object...do not bend over to reach it.

#### Chin position

- concentrate on keeping your chin tucked in close to your chest. It helps to keep your spine straight and stops you from reaching out away from your body.

#### Palm position

- whenever possible, use the entire hand and palm to grip the object rather than merely the fingers.

#### Body position

- stay squarely above your feet when lifting. Do not lean left, right, or to the front or rear.

#### Arm position

- keep your arms tucked in as close as possible to your body and to the object being lifted.

### Storage handling

- Go over items that are sharp, fragile, caustic, slippery, etc., or that may provide other special lifting, moving or handling problems.
- Identify which items must be handled with gloves or other protective devices.

### Material storage

- Show where materials, pallets, etc., may not be placed or stored...respect yellow lines...do not encroach into aisles, workstations, doorways, area in front of electrical panels, etc.

### Physical survey

#### Equipment

- Take a walk showing new employees where the fire extinguishers, alarms, hoses, and any other firefighting equipment are stored. Explain how and when to use the fire equipment. Stress that employees must not block, cover or tamper with any of the equipment.

#### Emergency exit

- show the employee where all emergency exits are for each area and when they are to be used and what to do once outside.

#### Smoking

- physically show the employee where the smoking and no-smoking areas are and how cigarette butts are to be handled.

#### Flammables

- Physically identify and show employee all flammable materials he/she could possibly be handling, how to handle them, where they are stored and how they are disposed of.  
Include handling of rags.

#### Site cleanliness

- Show how scrap and trash are handled, and where trash and scrap containers are kept.
- Go over each employee's housekeeping responsibilities in detail.

## HAZARDOUS SUBSTANCES/MATERIALS

Introduce the employee to all hazardous materials and/or substances and demonstrate how to and how not to handle, use, and store each. Test each employee.

## EQUIPMENT

- Go through, in detail, the proper handling and complete operation of every piece of equipment the employee might reasonably be expected to use. After you have demonstrated its use, make sure the employee can perform all operations safely and properly. Document each piece of equipment below. Include things like knives, ladders, forklifts, hand tools, power tools, mounted equipment, etc.

LIST ALL EQUIPMENT COVERED

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## ACCIDENTS AND UNSAFE CONDITIONS

- Discuss the importance of accident prevention and reporting. Describe in detail the steps to be taken and by whom, in case of an accident. Show all employees the form(s) used by supervisors and by the employees. Discuss reporting of suspected unsafe workplace conditions or practices.

## REVIEW SAFETY RULES

- While walking around the work area to show and demonstrate each of the items outlined, go over each of the individual safety rules that the above outline does not cover. Stress that we enforce the safety rules diligently and strictly. Refer to the Rules and Regulations of Personal Conduct that provide for discipline up to and including discharge for violations of safety rules or safe practices.

All of the Training/Orientation represented in this outline was completed on:

---

Signature of Trainer

---

Signature of Trainee

---

Date

# Safety Meeting Record

Safety Training must be provided for employees in the performance of their duties.  
Use this form to document any employee meetings and training.

TOPIC:

DATE:

NAMES OF ATTENDEES:

[illegible]

An Employee Safety Suggestion form is also available on [MYLO](#).

### Employee Safety Suggestion / Hazard Report

This form is to be used by employees who wish to report a safety suggestion or report an unsafe work condition or practice.

Description of Unsafe Condition or Practice:

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Cause or Contributing Factor:

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---

Employee's Suggestion for Improving Safety:

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Has this been reported to the Area Supervisor? YES \_\_\_\_\_ NO \_\_\_\_\_

Employee Name (Optional): \_\_\_\_\_ Date: \_\_\_\_\_

No employee will be retaliated against for reporting conditions or making suggestions. None of our employees are required to work at a job that is unsafe or unhealthful. Your cooperation in detecting hazards would be greatly appreciated.

A Digital Incident Submission form is also available on [MYLO](#).

## INCIDENT REPORT FORM

LOCATION \_\_\_\_\_ DATE \_\_\_\_\_

SUBMITTED

BY \_\_\_\_\_

Describe in detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ADDITIONAL NOTES:

\_\_\_\_\_

\_\_\_\_\_

Reporter's Name and Contact information: \_\_\_\_\_

Witness' name and contact information: \_\_\_\_\_

Reporter's Signature \_\_\_\_\_ Witness' Signature \_\_\_\_\_

\_\_\_\_\_

(OFFICIAL USE ONLY)

Recommended Corrective Action:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name

# Acknowledgement and receipt of Injury and Illness Prevention Program and Code of Safety Practices

---

- A copy and explanation of the Injury and Illness Prevention Program (IIPP) and Code of Safe Practices contained within.
- An explanation of our IIPP and how to obtain a copy.
- An explanation of methods to recognize Safety Hazards and other activities that may involve exposure to accidents and injuries.
- An explanation of the School's Codes of Safe Practices and its purpose of promoting and enforcing the rules for safe working environment.
- The option to ask my direct supervisor for help and ask any questions about the Injury and Illness Prevention Program.

I acknowledge and understand all the above:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The Injury and Illness Prevention Program (IIPP) is a basic written workplace safety program. [Title 8 of the South Carolina Code of Regulations \(T8CCR\) section 3203](#), requires every employer to develop and implement an effective IIPP. An effective IIPP improves the safety and health in your workplace and reduces costs by good management and employee involvement.

## D. Heat Illness Prevention Program

Heat-related illness is generally explained as a feeling of being overheated when the temperature rises. It usually begins slowly and lasts for a long time, but it may also occur quickly and be a serious illness. It can be prevented or managed by maintaining the balance of body fluids during warm weather which means drinking plenty of water and fluids to prevent the dehydration and loss of body fluid through sweating and breathing, which is more pronounced in warm weather. The Heat Illness Prevention Program is documented in its own document. The information listed here is a summary version.

**Always notify the parent/guardian immediately!**

### Health Goals

- Student will recognize and communicate signs of illness to adults, and will receive appropriate intervention to promote return to health.
- Student will participate in school activities, with accommodations as needed, to the fullest extent possible.

### Heat Exhaustion

- Typically occurs during hot and humid days in people who have not adjusted to the heat.
- When environmental temperature is high, the body will cool itself by sweating and evaporation. This process is likely to be ineffective when there is intense physical activity and dehydration.
- If he/she is not sweating, there is a risk of shock, heat stroke, and possibly death.

Signs of illness	Interventions
<ul style="list-style-type: none"><li>• Heavy sweating</li><li>• Fatigue, weakness, muscle cramping</li><li>• Cold, pale, and clammy skin</li><li>• Fast and weak pulse (near or over 100 beats per minute)</li><li>• Nausea and vomiting</li><li>• Fainting</li><li>• Increased breathing (near or over 30 breaths per minute)</li></ul>	<ul style="list-style-type: none"><li>• Stop all activity, get to a shady area, and start cooling measures immediately</li><li>• Lie down and loosen or remove heavy or restrictive clothing, especially around the neck, chest, and groin</li><li>• Apply cool, wet cloths, fan or spray with cool mist</li><li>• Transport to a cool (but not cold) office</li><li>• Sip room temperature water (about ½ cup every 15 minutes), but ONLY if fully awake and alert (cold fluids will cause stomach cramping)</li></ul>

## Call 911 when

- Body temperature is high
- Decreased alertness, increased confusion, or loss of consciousness
- Unable to drink fluids or vomiting occurs
- Had or is having a seizure, even if there is a history of seizure activity
- Ever been diagnosed with heart or blood pressure problems, or other known medical conditions

## Tips for Preventing Heat-Related Illness

### Stay Cool

- **Wear Appropriate Clothing:** Choose lightweight, light-colored, loose-fitting clothing.

### Stay Hydrated

- **Drink Plenty of Fluids:** Drink more fluids, regardless of how active you are. Don't wait until you're thirsty to drink.
- **Warning:** If your doctor limits the amount you drink or has you on water pills, ask how much you should drink while the weather is hot.
- **Stay away from very sugary or alcoholic drinks**—these actually cause you to lose more body fluid. Also avoid very cold drinks, because they can cause stomach cramps.
- **Replace Salt and Minerals:** Heavy sweating removes salt and minerals from the body that need to be replaced. A sports drink can replace the salt and minerals you lose in sweat.
- If you are on a low-salt diet, have diabetes, high blood pressure, or other chronic conditions, talk with your doctor before drinking a sports beverage or taking salt tablets

## Appendix 2: Information and External References

Heat Illness Related Illness SCDHEC

<https://scdhec.gov/heat-related-illnesses#:~:text=Take%20frequent%20cool%20showers%20or,pets%20in%20a%20parked%20car.>

CDC Sun Safety

[https://www.cdc.gov/cancer/skin/basic\\_info/sun-safety.htm](https://www.cdc.gov/cancer/skin/basic_info/sun-safety.htm)

To check weather forecasts, use - The National Weather Service (NOAA)

<http://www.weather.gov/>

For Heat Safety Resources & Heat Index Chart

[http://www.nws.noaa.gov/om/heat/heat\\_index.shtml](http://www.nws.noaa.gov/om/heat/heat_index.shtml)

Tips for Preventing Heat Illnesses

<https://www.cdc.gov/disasters/extremeheat/heattips.html>

## E. Administration of Epinephrine Auto-Injectors

### INTRODUCTION

This document provides model training standards for the administration of epinephrine auto-injectors in accordance with South Carolina "SAVE Act - Epinephrine" effective July 2013. Based on a number of incidents of anaphylaxis in South Carolina schools, legislation was enacted in 2001 authorizing the State Superintendent of Public Instruction to develop minimum standards of training for school personnel in the administration of epinephrine auto-injectors. These standards are intended to provide guidelines for training school personnel who have volunteered for training. They are not mandates or requirements for local agencies. These standards were obtained from the agencies and organizations listed in SC Tittle 44 Chapter 99 and represent the standard of care determined by those health and medical experts in this field. It is estimated that severe allergies affect nearly 40 million Americans in all age groups and put those individuals at risk of death from anaphylaxis. Anaphylaxis is a potentially life-threatening severe allergic reaction to a substance. Epinephrine is a drug that can be successfully utilized to counteract anaphylaxis.

### Training Standards

It is recommended that all school personnel responsible for the storage and emergency use of an epinephrine auto injector be trained annually, that the training be conducted by a physician or school nurse, and that the training include the following information.

### Techniques for recognizing symptoms of anaphylaxis.

The signs and symptoms of anaphylaxis usually appear rapidly, within seconds or minutes, after an exposure to an allergen, although in some cases the reaction can be delayed for up to one to three hours depending on the substance causing the reaction. The South Carolina Emergency Medical Services Authority (EMSA) definition of ANAPHYLAXIS IS "ANY RESPIRATORY SYSTEM INVOLVEMENT, DIFFICULTY BREATHING, AUDIBLE WHEEZING, OR DIFFICULTY SWALLOWING."

Common symptoms, according to the American Academy of Allergy, Asthma and Immunology's (AAAAI) Position Statement 34, may include:

- Hives
- Itching (of any part of the body)
- Swelling (of any body parts)
- Red, watery eyes
- Runny nose
- Vomiting
- Diarrhea

- Stomach cramps
- Change of voice
- Coughing
- Wheezing
- Throat tightness or closing
- Difficulty swallowing
- Difficulty breathing
- Sense of doom
- Dizziness
- Fainting or loss of consciousness
- Change of color

Some individuals have an anaphylactic reaction, and the symptoms go away only to return a few hours later. This is called a bi-phasic reaction. Often the symptoms of the bi-phasic reaction occur in the respiratory system and take the individual by surprise. Therefore, according to the AAAAI, after a serious reaction "observation in a hospital setting is necessary for at least four hours after initial symptoms subside because delayed and prolonged reactions may occur even after proper initial treatment." Once anaphylaxis has begun, the treatment of choice is an immediate intramuscular injection of epinephrine, which is effective for 10 to 15 minutes (according to the manufacturer of epinephrine auto-injectors, Dey Labs), followed by emergency medical attention.

Common causes of anaphylaxis include:

- Food
- Insect stings
- Medication (e.g. antibiotics, aspirin, and non-steroidal anti-inflammatory drugs)
- Latex

Less common causes of anaphylaxis include:

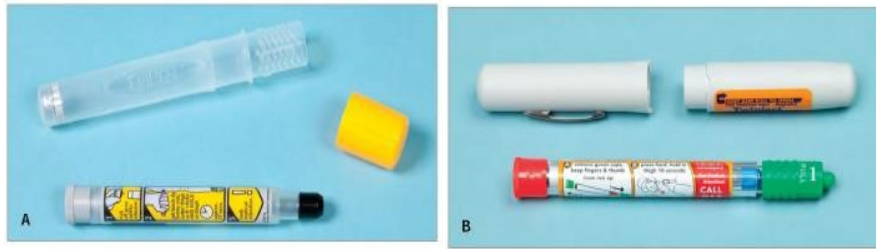
- Food-dependent exercise induced anaphylaxis (rare – occurs when an individual eats a specific food and exercises within three to four hours after eating)
- Idiopathic anaphylaxis (Unknown cause)

Severe allergic reactions may be at times unavoidable because foods may contain unknown or unreported allergy producing ingredients, insects range widely, latex can be found almost anywhere, and some individuals do not know that they are severely allergic to one or more allergens.

## Standards and procedures for the storage and emergency use of epinephrine auto-injectors.

An epinephrine auto-injector is a disposable drug delivery system that contains the proper dose of epinephrine and is used to treat anaphylaxis. It is supplied as a spring-loaded syringe that can be easily transported. The disposable system is designed to treat a single anaphylactic episode and must be properly discarded (in compliance with applicable state and federal laws) after its use. It is generally recommended

that two epinephrine auto-injectors be kept on-hand as back-up. The following information on the emergency use of an epinephrine auto-injector is based on the manufacturer's instructions and represents the consensus of the consulting agencies and organizations as listed in Title 44 chapter 99.



**FIGURE 11-2, A-B** A, An Epi-Pen® is preloaded with a single dose of the drug epinephrine. B, A Twinject® is preloaded with a double dose of epinephrine.

### Steps in the Emergency Use of an Epinephrine Auto-Injector (EpiPen):

- Determine if anaphylaxis is suspected. Anaphylaxis usually, but not always, occurs right after exposure to an allergen. Frequently anaphylaxis occurs in individuals who have a history of a previous reaction. If there is uncertainty about the diagnosis, but there is a reasonable probability that it is anaphylaxis, then treat as anaphylaxis.
- If anaphylaxis symptoms occur, call 911 or activate the emergency medical system (EMS). Stay with the victim.
- Have others notify the paramedics, school nurse, parents and school administrator immediately.
- Have the victim sit down. Reassure the victim and avoid moving him or her. Calming reduces the distribution of the allergen in the body.

Prepare to administer EpiPen.

- For students in second grade or below, or if less than 66 lbs., use White label EpiPen Jr (0.15 mg)
- For adults and students in third grade or above, or if more than 66 lbs., use Yellow label EpiPen (0.3 mg) The EpiPen acts immediately; however, the effects last only 10–15 minutes. Make sure someone has called 911.

EpiPen Administration Procedure:

- Grasp the EpiPen and form a fist around the unit. With the other hand, pull off the GRAY Safety Cap.

## EpiPen® and EpiPen® Jr. Directions

- Pull off gray activation cap.



- For Twinject, pull of Green end cap then Red end cap.

### Twinject™ 0.3 mg and Twinject™ 0.15 mg Directions



- Hold the black tip near the outer thigh. Never put thumb, fingers, or hand over the black tip. (If an accidental injection occurs, go immediately to the nearest hospital emergency room.)
- Swing and jab the black tip firmly into the OUTER BARE THIGH so that the auto-injector is perpendicular (at a 90° angle) to the thigh. You will hear a click. (The EpiPen can be injected through the victim's clothing, if necessary.)



- Hold the EpiPen firmly in place for 10 seconds, and then remove it from the thigh. (After the injection, the victim may feel his or her heart pounding. This is a normal reaction.)
- Remove the EpiPen and massage the injection area for several seconds.



Check the black tip:

- If the needle is exposed, the dose has been delivered
- If the needle is not exposed, repeat steps b through e

Dispose of the EpiPen in a "sharps" container or give the expended EpiPen to the paramedics.



- Call 911, if not previously called.
- If the anaphylactic reaction is due to an insect sting, remove the stinger as soon as possible after administering the EpiPen. Remove stinger quickly by scraping with a fingernail, plastic card or piece of cardboard. Apply an ice pack to sting area. Do NOT push, pinch, or squeeze, or further imbed the stinger into the skin because such action may cause more venom to be injected into the victim.
- Observe the victim for signs of shock. Cover the victim with a blanket, as necessary, to maintain body temperature and help to prevent shock.
- Monitor the victim's airway and breathing. Begin CPR immediately if the victim stops breathing.
- Take the victim's vital signs (if trained to do so) and record them. Duplicate the emergency card for the paramedics. When paramedics arrive tell them the time EpiPen

was administered and the dose administered. If EpiPen has not been disposed of in a sharp's container, give the expended EpiPen to the paramedics.

- If symptoms continue and paramedics do not arrive, use a new EpiPen and re-inject 15 to 20 minutes after initial injection. Continue to monitor the victim's airway and breathing.
- Follow-up medical care should be obtained at the emergency room or from the victim's physician. A second delayed reaction may occur up to 6 hours after the initial anaphylaxis.
- Document the incident and complete the accident/incident report. Include in the documentation the date and time EpiPen was administered, the victim's response, and additional pertinent information. Send a copy of the report to the school nurse.

## Storage:

According to the manufacturer, epinephrine auto-injectors should be stored at room temperature until the marked expiration date, at which time the unit must be replaced. Auto-injectors should not be refrigerated as this could cause the device to malfunction. Auto-injectors should not be exposed to extreme heat, such as in the glove compartment or trunk of a car during the summer and they should not be exposed to direct sunlight. Heat and light shorten the life of the product and can cause the epinephrine to degrade. To be effective, the solution in the autoinjector should be clear and colorless. If the solution is brown, replace the unit immediately.

## Emergency follow-up procedures, including calling the emergency 911 phone number and contacting, if possible, the pupil's parent and physician.

When it is determined, based on the symptoms that an anaphylactic reaction is occurring, it is important to act quickly. Administer epinephrine via an epinephrine auto-injector and have an assistant call 911 and request emergency response. Then contact the school nurse, school administrator, pupil's parent and physician and inform them of the actions taken. Stay with the pupil until the paramedics arrive.

Even after epinephrine has been administered, emergency medical care should be obtained immediately because severely allergic individuals who have experienced anaphylaxis may need emergency respiratory or cardiac care, or even to be resuscitated if they stop breathing altogether. At the very least, these individuals will need professional care to determine whether additional epinephrine, steroids, antihistamines, or other treatment is required. Follow-up diagnosis and care by medical professionals after the administration of epinephrine is important for recovery. A delayed or secondary reaction may

occur. Therefore, the individual needs to remain under medical supervision for at least four hours after an episode of anaphylaxis.

## Instruction and certification in cardiopulmonary resuscitation (CPR).

Any school personnel volunteering to be trained to administer epinephrine auto-injectors are required by SC Title 44 Chapter 99 to receive instruction and maintain current certification in cardiopulmonary resuscitation from a recognized provider such as the American Red Cross or the American Heart Association.

## Written materials.

SC Title 44 Chapter 99 requires schools retain the following written materials for reference:

- Training Standards for the Administration of Epinephrine Auto-Injectors
- Training logs or documentation of training in the administration of epinephrine auto-injectors and cardiopulmonary resuscitation

It is the school's responsibility to prepare or obtain these materials and provide them as part of the training.

## Title 44 Chapter 99 South Carolina Code of Laws

SECTION 44-99-20. Prescription of epinephrine auto-injectors to authorized entity.

Notwithstanding any other provision of law, a health care practitioner may prescribe epinephrine auto-injectors in the name of an authorized entity for use in accordance with this chapter. Notwithstanding any other provision of law, pharmacists and health care practitioners may dispense epinephrine auto-injectors pursuant to a prescription issued in the name of an authorized entity. A prescription issued pursuant to this chapter is valid for two years. For the purposes of administering and storing epinephrine auto-injectors, authorized entities are not subject to Chapter 43, Title 40 or Chapter 99 of the South Carolina Code of State Regulations.

HISTORY: 1990 Act No. 529, Section 2; 2016 Act No. 156 (H.3706), Section 2, eff April 21, 2016.

SECTION 44-99-30. Acquisition and stock of epinephrine auto-injectors by authorized entity.

Notwithstanding any other provision of law, an authorized entity may acquire and stock a supply of epinephrine auto-injectors pursuant to a prescription issued in accordance with this chapter. Epinephrine auto-injectors acquired pursuant to this chapter must be stored in a location readily accessible in an emergency and in accordance with the epinephrine auto-injector's instructions for use, requirements that may be established by the South Carolina Department of Health and Environmental Control, and recommendations included as part of an approved training. An authorized entity shall designate employees or agents who have completed the training required by Section 44-99-50, to be responsible for the storage, maintenance, control, and general oversight of epinephrine auto-injectors acquired by the authorized entity.

HISTORY: 1990 Act No. 529, Section 2; 2016 Act No. 156 (H.3706), Section 2, eff April 21, 2016.

SECTION 44-99-40. Use of epinephrine auto-injectors.

Notwithstanding any other provision of law, an employee, agent, or other individual associated with an authorized entity, who has completed the training required by Section 44-99-50, may use epinephrine auto-injectors prescribed pursuant to Section 44-99-20 to:

(1) provide an epinephrine auto-injector to any individual who the employee, agent, or other individual believes in good faith is experiencing anaphylaxis, or the parent, guardian, or caregiver of that individual, for immediate administration, regardless of whether the individual has a prescription for an epinephrine auto-injector or has previously been diagnosed with an allergy; and

(2) administer an epinephrine auto-injector to any individual who the employee, agent, or other individual believes in good faith is experiencing anaphylaxis, regardless of whether the individual has a prescription for an epinephrine auto-injector or has previously been diagnosed with an allergy.

HISTORY: 1990 Act No. 529, Section 2; 2016 Act No. 156 (H.3706), Section 2, eff April 21, 2016.

SECTION 44-99-50. Anaphylaxis training program.

(A) An employee, agent, or other individual described in Section 44-99-30 or 44-99-40, before undertaking an act authorized by this chapter, shall complete an anaphylaxis training program and must complete an anaphylaxis training program at least every two years following completion of the initial anaphylaxis training program. The training must be conducted by the South Carolina Department of Health and Environmental Control, a licensed medical provider, a nationally recognized organization experienced in training laypersons in emergency health treatment, the manufacturer of an epinephrine auto-injector, an organization with a training program that has been approved in at least three states, or an entity or individual approved by the department. The department also may approve specific entities or individuals or may approve classes of entities or individuals to conduct training.

(B) Training may be conducted online or in person and, at a minimum, must address:

(1) how to recognize signs and symptoms of severe allergic reactions, including anaphylaxis;

(2) standards and procedures for the storage and administration of an epinephrine auto-injector; and

(3) emergency follow-up procedures.

(C) The entity that conducts the training shall issue a certificate to each person who successfully completes the anaphylaxis training program. The certificate, at a minimum, must include:

(1) the name of the organization or individual conducting the training;

(2) the name of the individual being trained; and

(3) the date the training occurred.

HISTORY: 1990 Act No. 529, Section 2; 2016 Act No. 156 (H.3706), Section 2, eff April 21, 2016.

#### SECTION 44-99-60. Immunity.

(A) An authorized entity that possesses and makes available epinephrine auto-injectors, and its employees, agents, and other individuals, a health care practitioner that prescribes or dispenses epinephrine auto-injectors to an authorized entity, a pharmacist or health care practitioner that dispenses epinephrine auto-injectors to an authorized entity, a third party that facilitates the availability of epinephrine auto-injectors to an authorized entity, the department or other state agency engaged in approving training or in providing guidance to implement this chapter, and an individual or entity that conducts the training described in Section 44-99-50, are not liable for any injuries or related damages that result from any act or omission taken pursuant to this chapter; however, this immunity does not apply to acts or omissions constituting negligence, gross negligence, or willful, wanton, or reckless disregard for the safety of others or for an act or omission that is performed while the individual is impaired by alcohol or drugs.

(B) The administration of an epinephrine auto-injector in accordance with this chapter is not the practice of medicine or any other profession that otherwise requires licensure.

(C) This chapter does not eliminate, limit, or reduce any other immunities or defenses that may be available pursuant to state law, including those available pursuant to Section 15-1-310 and Chapter 78, Title 15.

## Resources and Bibliography

- American Academy of Allergy, Asthma and Immunology (AAAAI)
- American Academy of Pediatrics (AAP)
- California Department of Education (CDE)
- California Department of Public Health (CDPH)
- South Carolina Department of Education
- <https://ed.sc.gov/districts-schools/nutrition/wellness-and-food-safety/wellness-and-food-safety/school-nurse-program/webinars-videos-and-handouts/>
- Emergency Medical Systems Authority (EMSA)
- Food Allergy and Anaphylaxis Network (FAAN)
- <https://www.scstatehouse.gov/code/t44c099.php>
- Red Cross Training Manual 2012

## Acknowledgements

In compliance with the authorizing statute, the following individuals and agencies contributed to the development and review of the training standards: Rob Bachmann, RN, Orange County Department of Education Ronald P. Bangasser, MD, Medical Association Cathy Bray, RN, Riverside County Office of Education Linda Davis Alldritt, RN, Department of Education Molly Gaylord, RN, Santa Clara County Office of Education Ruby Hennessey, RN, School Nurses Organization George Monteverdi, MD, FAAP,

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## APPENDIX. FOOD ALLERGY ACTION PLAN

Student's Name: \_\_\_\_\_ D.O. B: \_\_\_\_\_ Teacher: \_\_\_\_\_

ALLERGY TO: \_\_\_\_\_

Asthmatic Yes\_\_\_\_ No\_\_\_\_ \*Higher risk for severe reaction

To be  
determined  
by  
physician  
authorizing  
treatment

### STEP 1: TREATMENT

Place  
Child's  
Picture  
Here

Symptoms:

Give Checked  
Medication\*\*:

If a food allergen has been ingested, but no symptoms:	EpiPen	Antihistamine
Mouth Itching, tingling, or swelling of lips, tongue, mouth	EpiPen	Antihistamine
Skin Hives, itchy rash, swelling of the face or extremities	EpiPen	Antihistamine
Gut Nausea, abdominal cramps, vomiting, diarrhea	EpiPen	Antihistamine
Throat Tightening of throat, hoarseness, hacking cough	EpiPen	Antihistamine
Lung Shortness of breath, repetitive coughing, wheezing	EpiPen	Antihistamine
Heart Thready pulse, low blood pressure, fainting, pale,	EpiPen	Antihistamine
Other	EpiPen	Antihistamine
If reaction is progressing (several of the above areas affected)	EpiPen	Antihistamine

The severity of symptoms can quickly change. Potentially life-threatening.

### DOSAGE

Epinephrine: inject intramuscularly (circle one) EpiPen EpiPen Jr.

(see labels for instructions)

Antihistamine: give \_\_\_\_\_

Medication/dose/route \_\_\_\_\_

Other: \_\_\_\_\_

## STEP 2: EMERGENCY CALLS

Call 911 (or Rescue Squad: \_\_\_\_\_). State that an allergic reaction has been treated, and additional epinephrine may be needed.

Dr. \_\_\_\_\_ at \_\_\_\_\_

Emergency contacts:

Name/Relationship

Phone Number(s)

1.) \_\_\_\_\_ 2.) \_\_\_\_\_

EVEN IF PARENT/GUARDIAN CANNOT BE REACHED, DO NOT HESITATE TO MEDICATE OR TAKE CHILD TO MEDICAL FACILITY!

Parent/Guardian Signature

\_\_\_\_\_ Date \_\_\_\_\_

Doctors Signature (Required)

\_\_\_\_\_ Date \_\_\_\_\_

### TRAINED STAFF MEMBERS

1. \_\_\_\_\_ Room \_\_\_\_\_

2. \_\_\_\_\_ Room \_\_\_\_\_

3. \_\_\_\_\_ Room \_\_\_\_\_

## RECEIPT OF EPINEPHRINE AUTO-INJECTORS AND ACKNOWLEDGEMENT OF THE RESPONSIBILITIES OF THE SITE'S ADMINISTRATOR.

- Overseeing the placement and maintenance of Epinephrine auto-injectors;
- Identifying and selection of volunteer employees as well as coordination of initial and refresher training in Epinephrine auto-injectors training;
- Providing volunteer employees review materials for recognizing symptoms of Anaphylaxis, emergency use of Epinephrine auto-injectors and emergency follow-up procedures, including calling 911 and contacting if possible, the pupil's parent and physician.
- Verifying expiration dates, inspecting the clarity/quality of the Epinephrine solution and documenting incident reports properly;
- Replacing expired Epinephrine auto-injectors and replacing them after an incident;
- Overseeing of Epinephrine auto-injectors trained personnel associated with the program;
- Receipt of "Administration of Epinephrine Auto-Injectors" program and the Red Cross' guide to "Anaphylaxis and Epinephrine Auto-Injectors" and "Assisting with an Epinephrine Auto-Injector" materials;
- Receipt of Epinephrine Auto Injectors; \_\_\_\_ (regular 2-packs) \_\_\_\_ (Junior 2-packs) for \_\_\_\_\_.
- Notifying all personnel of the location of the "Administration of Epinephrine auto-injectors Program.

I acknowledge and understand all of the above:

---

Print Site's Administrator's

---

Site's Administrator's Signature

---

Date

### Work Cited

South Carolina Title 44 Chapter 99

[https://www.scstatehouse.gov/sess121\\_2015-2016/bills/3706.htm](https://www.scstatehouse.gov/sess121_2015-2016/bills/3706.htm)

## F. AUTOMATED EXTERNAL DEFIBRILLATOR (AED) PLAN

### Policy

The following plan has been developed to establish appropriate procedures for the placement and use of Automated External Defibrillators (AED). An Automated External Defibrillator is a medical device that is used to recognize the presence or absence of ventricular fibrillation (when electrical activity becomes disordered) and rapid ventricular tachycardia (extremely rapid heartbeat), and is able to determine, without intervention by an operator, whether defibrillation (an electrical shock to the heart) should be performed. The AED must only be used on victims who are unconscious and not breathing normally. The AED shall be used in combination with Cardiopulmonary Resuscitation (CPR) in instances of sudden cardiac arrest. AED equipped with Pediatric AED pads can deliver lower levels of energy considered appropriate for children and infants up to 8 years of age or weighing less than 55 pounds (American Red Cross p. 47).

### Authority and Responsibility

School will be responsible for:

- Designating an AED Coordinator;
- Purchasing, installing and maintaining AED's;
- Coordinating training for employees;
- Coordinating with local resource hospital;
- Maintaining records of maintenance and testing
- Developing a site-specific medical emergency plan; and
- Retaining copies of all AED training records as well as equipment maintenance and testing logs which shall be available for review during annual inspections.

AED Coordinator shall be responsible for:

- Overseeing the placement and maintenance of AED equipment;
- Identifying trained or authorized users, selecting employees and selection of volunteer employees as well as coordination of initial and refresher training in CPR, AED usage and Blood borne Pathogens training;
- Supplying all AED information to local resource hospital;
- Verifying maintenance records and testing are being conducted and documented regularly;
- Developing a site-specific medical emergency plan;
- Replacing deteriorating, missing or used support equipment;
- Managing day-to-day operations;
- Overseeing training of personnel associated with the program;
- Placing AED back in service after use; and
- Training personnel on the location of AEDs and site's Emergency Action Plan.

## Maintenance and Testing Policy

Maintenance and testing of all AED units shall be conducted in accordance with the manufacturer's specifications. Records of maintenance and testing shall be maintained for each AED unit and shall be reviewed annually by Facilities and Safety personnel during the building inspection. Each trained user shall be given a copy of the manufacturer's maintenance and testing requirements. A copy of the requirements shall also be kept with the AED and in a central location of the facility.

After using an AED, follow the manufacturer's instructions prior to placing the AED back into service.

Check that the Active Status Indicator is flashing green.

The Active Status Indicator ("ASI") is located in the upper corner of the AED and indicates the operational readiness state of the unit. It will periodically flash green to indicate a fully functional condition. If it is flashing red or not flashing at all, the AED needs attention. If the ASI is not flashing at all, the most likely cause is that the ASI 9V battery needs to be replaced. Once the battery has been replaced with a fresh battery, the ASI should once again flash green. If it does not, the battery pack may be defective. In that event, the battery pack should be replaced. If the ASI is flashing red, turn the unit on, the voice prompt will indicate the nature of the problem.

Check the condition of the AED and accessories.

Inspect the device for dirt and contamination, especially in the connector socket and around the battery pack opening. Inspect the device visually for damage. Look for cracks or other signs of damage on the case, especially near the connector socket and joints. If any cracks or other signs of damage are visible, remove the AED from service and contact an authorized service center.

Check expiration date on battery pack.

The expiration date can be found on the white label near the right side of the battery pack. It is important to replace your battery pack if the date has expired. The 9V lithium battery inside the battery pack should be replaced once a year or when the unit indicates "low battery" or "replace battery" and flashes the Active Status Indicator red. The 9V can be accessed by removing the 9V battery compartment cover on the battery pack.

# AED MONTHLY TEST CHECKLIST

## AED Weekly Operation and Status Check *Environmental Health and Safety*

Instructions: Weekly check the battery status indicator, verify all support equipment (2 pairs of disposable gloves, towels, safety razor, 2 barrier devices, extra electrode pads, a pair of scissors, biohazard disposal bag, AED incident report form and a pen) is present and in good condition sign and date to verify all items have been checked. Indicate any missing or damaged equipment in the Comments section. If the battery is no longer working, please replace IMMEDIATELY with the backup battery and purchase a replacement battery within 30 days.

Date	Battery Status Indicator Flashing?		Supplies in good condition	List of Missing or Damaged Supplies	Comments or Corrective Actions	Inspected by
	Yes	No				

Taken out of Service? Date: \_\_\_\_\_ Returned to Service: Date: \_\_\_\_\_

Month: \_\_\_\_\_

## AED MEDICAL EMERGENCY PLAN

### Purpose

To establish an action plan for responding to a medical emergency and to ensure the proper procedures are followed in the event of a medical emergency within School.

### Safety Coordinator:

Soliman Villapando Jr. (Director, Safety and Security) is responsible for making sure this emergency action plan is kept up to date, practices, and reviewed periodically.

The Safety Director can be reach at: (661) 418-1539; 177 Holston Dr. Lancaster CA 93535.

### Emergency Phone Numbers:

Paramedics- 911

Police-911

### Facility Contacts:

#### Designated Emergency Medical Responders

The following employees will be trained in the use of CPR/AED. It is the goal to have at a minimum one (1) trained responder available during business hours.

School Principal,  
Site Administrator,  
Teacher,  
Coach,  
Staff member

#### Examples of a Medical Emergency

- Unconsciousness
- Seizure
- Chest Pain and/or Heart Attack
- Stroke
- Choking
- Trouble Breathing
- Major Injury - Slip or Fall
- Drowning

## Notification of an Emergency

For all Medical Emergencies; CALL 911. Contact personnel in charge of dealing with Emergencies to inform them of the situation. The following information shall be given to the Emergency Services personnel:

- Location of medical emergency;
- Nature of emergency;
- Gender and approximate age of victim;
- Victim's responsiveness;
- CPR status; and
- AED status.

## Emergency Procedures

An AED is used to treat victims who experience sudden cardiac arrest. The AED shall only be applied to victims who are unconscious and not breathing normally. The AED will analyze the heart rhythm and advise the operator if a shockable rhythm is detected the AED will charge to the appropriate energy level and advise the operator to deliver a shock. An AED shall be used in conjunction with CPR in cases of sudden cardiac arrest, in accordance with accepted protocols, including those developed by the American Red Cross and American Heart Association.

Use of the AED and CPR shall continue as appropriate during the course of emergency care, until the patient resumes pulse and respiration, and/or local emergency medical services (EMS) arrive at the scene, and assume responsibility for emergency care of the patient

AED equipped with Pediatric AED pads can deliver lower levels of energy considered appropriate for children and infants up to 8 years of age or weighing less than 55 pounds (American Red Cross p. 47).

Personnel not qualified or assigned to provide first aid assistance are expressly instructed not to provide any medical treatment. General assistance to the victim, when conscious, is permissible and advised. The medical emergency shall be assessed by responding personnel, who will evaluate the situation, and the course of action to be taken.

Remain with the individual until emergency services arrive to care for the individual. Before applying the AED, responders will assess for unresponsiveness, check for breathing, pulse and signs of circulation. Additionally, responders must assess the area for additional hazards (e.g. electrical, physical, etc.) to determine if the victim needs to be moved to a safer location prior to using the AED. If the victim is not breathing or no pulse is detected, they shall begin CPR. Upon arrival of AED, responders will stop CPR and utilize the AED. Only trained responders shall, administer first aid, CPR or utilize the AED. Allow the emergency services personnel to administer all care to the individual upon arrival.

## Rescue Breathing

- Start by rolling the victim onto his/her back, if necessary.
- Make sure the airway is open and check for and remove any obvious obstructions in the mouth (gum, dentures, vomitus, or other fluids).
- Position your ear over the person's nose and mouth, to check for breathing for 3-5 seconds.
- Using a barrier device, form a tight seal around the victim's mouth and nose and exhale for 1-1.5 seconds, which should be enough to make the victim's chest rise.
- Pause between rescue breaths to inhale.
- Then look, listen, and feel for chest movements or the sound of escaping air. If you don't detect breathing, re-check the carotid pulse for 5-10 seconds. If the victim still isn't breathing, but does have a pulse, resume rescue breathing.
- If there is no pulse, begin CPR.

## CPR Procedure

- Assess airway, perform a head tilt chin lift to open airway
- Assess breathing, look, listen and feel for breathing for 5-10 seconds, if breathing is absent, use barrier device in AED kit and deliver two slow breaths, watching for the chest to rise
- Check for pulse and/or signs of circulation, if no signs of circulation are present, begin chest compressions at the rate of 100 per minute

## AED Procedures

- When AED arrives, place near the head of the victim on the same side as rescuer, if possible.
- Open case and turn unit on.
- Apply gloves.
- Bare and prepare chest (dry wet skin with towel or clothing and shave if necessary).
- Make sure the victim is not in contact with water or any metal objects.
- If necklaces or other body jewelry is in the way or within 1 inch of pad placement, remove the jewelry before AED use.
- If the person has any type of drug skin patch on the chest, remove the patch with a gloved hand and clean the area.
- If implantable defibrillator or pacemaker is present on the victim, place pad at least one inch away from device.
- Follow visual and verbal prompts given by the AED.
- Apply electrode pads, always working on the upper right chest just below the collar bone and left side of the victim's chest two to three inches below the armpit.
- Clear the area and plug in connector.
- Allow unit to analyze the heart rhythm.
- If shock is indicated call "CLEAR" make sure no one is touching the victim and press the "Shock indicator" button.

## Reporting Procedures

When an AED is used, the user shall report to the resource hospital the following information:

- Date and time of incident;
- Name of the care provider;
- Time that paramedics were called;
- Initial heart rhythm;
- Number of times patient was defibrillated;
- Name of AED user;
- Final heart rhythm when emergency services arrived; and
- Whether the patient has a pulse and if they are breathing when emergency services arrived.
- Once the victim is in the care of Emergency Medical Services, the AED unit shall be immediately secured and taken out of service, by the AED Coordinator, in the event the AED Coordinator is not on the scene, the following shall be completed before placing the AED back into service:
  - Data card shall be removed and a new one installed. (optional feature)
  - Remove and disinfect AED, restock with two sets of pads, two batteries, towel, razor, and gloves, biohazard waste bag, and two barrier devices before placing back in service.
  - Immediately inform HR department of the incident.

## Training Provider:

- American Red Cross

# Incident Report Form

Date of accident \_\_\_\_\_ Time of accident \_\_\_\_\_

Member's name \_\_\_\_\_ Member number \_\_\_\_\_

Address \_\_\_\_\_

Home phone \_\_\_\_\_ Business phone \_\_\_\_\_

Location of accident \_\_\_\_\_

Staff attending \_\_\_\_\_

\_\_\_\_\_

Witnesses (nonstaff) \_\_\_\_\_

\_\_\_\_\_

Details of accident \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Action taken by staff \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Staff reporting \_\_\_\_\_ Date \_\_\_\_\_

Department head's signature \_\_\_\_\_ Date \_\_\_\_\_

## G. BLOODBORNE PATHOGEN PROGRAM

### POLICY

School is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to blood borne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Blood borne Pathogens." The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees. This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control
- Universal precautions
- Engineering and work practice controls
- Personal protective equipment
- Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding exposure incidents

### PROGRAM ADMINISTRATION

School is responsible for implementation of the ECP. Human Resources will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

School will provide and maintain all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. School will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

School will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.

School will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives

## EMPLOYEE EXPOSURE DETERMINATION

The following is a list of all job classifications at our establishment in which all employees have occupational exposure:

Job Title	Department/Location
Teachers	
Staff	
Athletic Coaches	
School Nurses	

The following is a list of job classifications in which some employees at our establishment have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

NOTE: Part-time, temporary, contract and per diem employees are covered by the blood borne pathogens standard. The ECP should describe how the standard will be met for these employees.

## METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions: All employees will utilize universal precautions.

**Exposure Control Plan:** Employees covered by the blood borne pathogens standard receive an explanation of this ECP. All employees can review this plan at any time during their work shifts by contacting HR department (If requested, will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

**Engineering Controls and Work Practices** Engineering controls and work practice controls will be used to prevent or minimize exposure to blood borne pathogens. The specific engineering controls and work practice controls used are listed below:

- Sharps disposal containers are inspected and maintained or replaced by (a bio-hazard waste disposal vendor) whenever necessary to prevent overfilling.

- This facility identifies the need for changes in engineering controls and work practices through Review of OSHA records, employee interviews, committee activities, etc.
- We evaluate new procedures and new products regularly by reviewing the process and considering new products and procedures.

## Personal Protective Equipment (PPE)

PPE is provided to our employees at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided by School. The types of PPE available to employees are as follows:

- Gloves
- Splash goggle
- Face shields
- Masks

PPE is located in the FIRST AID location and may be obtained through the Athletic Supervisor.

All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in (Biohazard Containers for storage, laundering, decontamination, or disposal.)
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

## Housekeeping:

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see the following section "Labels"), and closed prior to removal to prevent spillage or protrusion of contents during handling.

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded. Sharps disposal containers are available if needed. Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination. Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

### Laundry:

The following contaminated articles will be laundered by this School: (optional for Athletic Center)

Laundering will be performed by Janitorial Services

The following laundering requirements must be met:

- Handle contaminated laundry as little as possible, with minimal agitation
- Place wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use (red bags marked with the biohazard symbol)
- Wear the following PPE when handling and/or sorting contaminated laundry: (gloves, goggles, mask).

### Labels:

The following labeling methods are used in this facility:

Equipment to be Labeled Label Type

- Specimens, contaminated laundry, (red bag, biohazard label)
- Waste (red container, biohazard label)

Site Supervisor is responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify (Name of responsible person or department) if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

### HEPATITIS B VACCINATION

School will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability.

The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this plan.

Vaccination is encouraged unless: 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune; or 3) medical evaluation shows that vaccination is contraindicated.

However, if an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept at School's Human Resources.

Vaccination will be provided by School occupational medical provider.

Following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. It will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

## POST-EXPOSURE EVALUATION AND FOLLOW-UP

**Should an exposure incident occur, contact School Human Resources at the following number (661) 272-1225. An immediate confidential medical evaluation and follow-up will be conducted by School medical provider.** Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status
- If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

## ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

School Human Resources ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's blood borne pathogens standard.

School Human Resources ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- a description of the employee's job duties relevant to the exposure incident
- route(s) of exposure

- circumstances of exposure
- if possible, results of the source individual's blood test
- relevant employee medical records, including vaccination status

School Human Resources provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

## PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The Site Administrator or senior staff member will review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident (O.R., E.R., patient room, etc.)
- Procedure being performed when the incident occurred
- Employee's training

The Site Administrator will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log. If revisions to this ECP are necessary, the Site administrator will ensure that appropriate changes are made. (Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.)

## EMPLOYEE TRAINING

All employees who have occupational exposure to blood borne pathogens receive initial and annual training conducted by Site administrator.

All employees who have occupational exposure to blood borne pathogens receive training on the epidemiology, symptoms, and transmission of blood borne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA blood borne pathogen standard
- An explanation of our ECP and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitations of engineering controls, work practices, & PPE
- An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- An explanation of the basis for PPE selection
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge

- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person conducting the training session.

## RECORDKEEPING

- Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least three years at 177 Holston Dr. Lancaster Ca 93535 The training records include:

- The dates of the training sessions
- The contents or a summary of the training sessions
- The names and qualifications of persons conducting the training
- The names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to School Human Resources Department.

## Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020,

"Access to Employee Exposure and Medical Records." Human Resource Department is responsible for maintaining required medical records. These confidential records are kept in Human resources (Admin Lancaster, Ca.) for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to HR department.

## OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904).

## Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidences must include at least:

- Date of the injury
- Type and brand of the device involved (syringe, suture needle)
- Department or work area where the incident occurred
- Explanation of how the incident occurred.

This log is reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

### HEPATITIS B VACCINE DECLINATION (MANDATORY)

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Employee Name

Print Name: \_\_\_\_\_

## Cited Sources

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Taylor, Michael. "Gymnastics consulting and risk management". www.Gym.net. 20 January 2014. Web.

Tharrett, Stephen. ACSM's Health/Fitness Facility Standards and Guidelines 4<sup>th</sup> Edition. 2012. American College of Sports

Medicine. Dallas, TX. Print.

University of Chicago. "AED Emergency Plan". 21. January 2014.Web.

University of Connecticut. "Sample Athletic Emergency Plan". Korey Stringer Institute.21. January 2014.

[Bloodborne Pathogens](#). OSHA, (December 17, 2001). Assists trainers conducting OSHA 10-hour general industry outreach training for workers. Since workers are the target audience, the material emphasizes hazard identification, avoidance, and control - not standards.

[Training Resources](#). OSHA. Contains training and reference materials related to bloodborne pathogens. [Bloodborne Pathogens](#)

[CDC Learning Connection](#). Centers for Disease Control and Prevention (CDC). Browse for distance learning courses and resources.

[Record Summary of the Request for Information on Occupational Exposure to Bloodborne Pathogens due to Percutaneous Injury](#). (May 1999). Summarizes nearly 400 comments from health care facilities, workers and others who responded to OSHA's request for information on engineering and work practice controls used to eliminate or minimize the risk of occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps.

[OSHA Offices by State](#). Each Regional Office has a Bloodborne Pathogens Coordinator available to

[Compliance Assistance Specialists \(CASs\)](#). Provides general information about OSHA standards and compliance assistance resources.

[Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards](#). Publication 3186, (2003). Includes a model exposure control plan to meet the requirements of the OSHA bloodborne pathogens standard and a model hazard communication plan to meet the requirements of the hazard communication standard.

Acknowledgement and receipt of responsibilities and AED  
unit by the Site's AED Coordinator:

- ☐ Overseeing the placement and maintenance of AED equipment;
- ☐ Identifying trained or authorized users, selecting employees and selection of volunteer employees as well as coordination of initial and refresher training in CPR, AED usage and Blood borne Pathogens training;
- ☐ Supplying all AED information to local resource hospital;
- ☐ Verifying Weekly maintenance records and testing are being conducted and documented regularly;
- ☐ Developing a site-specific AED emergency plan;
- ☐ Replacing deteriorating, missing or used support equipment;
- ☐ Managing day-to-day operations;
- ☐ Overseeing of CPR/AED trained personnel associated with the program;
- ☐ Placing AED back in service after use; and
- ☐ Training personnel on the location of AEDs and site's Emergency Action Plan.

I acknowledge and understand all of the above:

---

Print Site's AED Coordinator's Name

---

Site's AED Coordinator's Signature

---

Date

## Acknowledgement and receipt of Blood borne Pathogen Program, First Aid Kit (Smart Compliance) and procedures.

- ☐ A copy and explanation of the OSHA blood borne pathogen standard
- ☐ An explanation of our ECP and how to obtain a copy
- ☐ An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- ☐ An explanation of the use and limitations of engineering controls, work practices, and PPE
- ☐ An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- ☐ An explanation of the basis for PPE selection
- ☐ Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- ☐ Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- ☐ An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- ☐ Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- ☐ An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- ☐ Receipt of a Biohazard waste receptacle and replaceable bags.
- ☐ Receipt of Smart Compliance First Aid Kit bags.
- ☐ An understanding that depleted supplies in the First Aid Kit can be ordered through Staples.
- ☐ An understanding of contacting the Safety Coordinator for any questions about the Program.

I acknowledge and understand all of the above:

\_\_\_\_\_  
Print Name

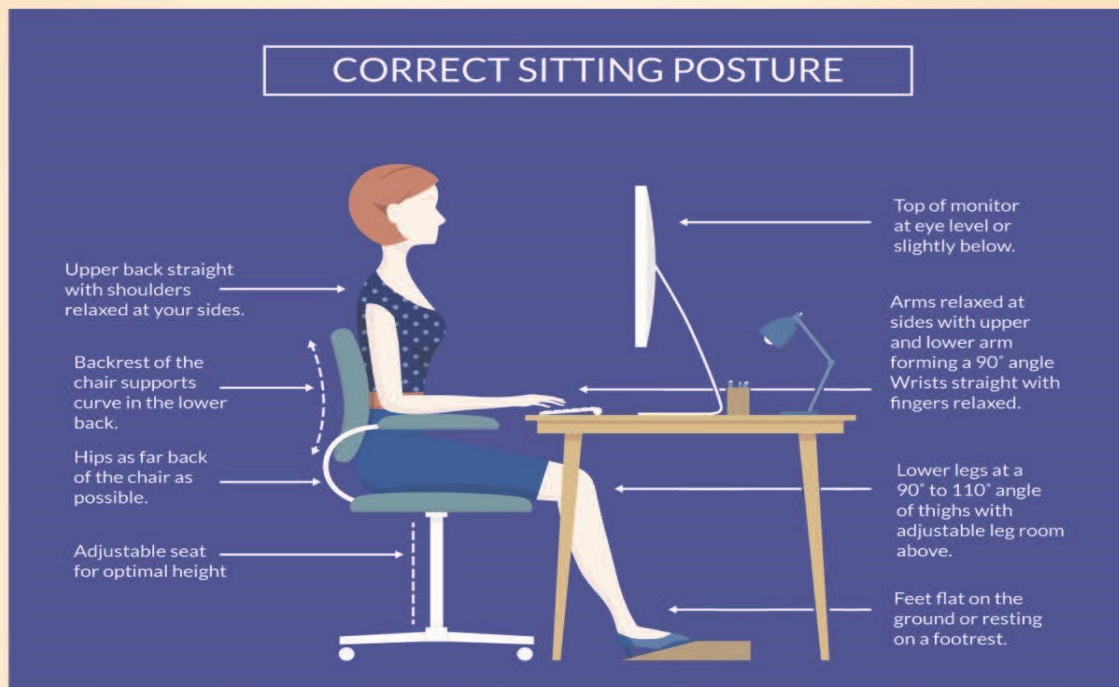
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## H. Workplace Ergonomics Program

The School is subject to Cal/OSHA ergonomics standards for minimizing workplace repetitive motion

### WHAT IS ERGONOMICS?



You may already understand the concept of ergonomics. In simple terms, it means improving the fit between your body and an activity. Adjusting a workstation so a small person can better reach materials or machinery is one example of using ergonomic principles. The result is increased comfort and efficiency. But ergonomics isn't just job-related. By applying ergonomic principles, you can make any task—done anywhere—less taxing on your body.

If you share a workstation, you may need to adjust equipment and materials to meet your needs before you can start work. Mark individual settings, such as chair heights, to make this daily process quicker and easier.

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injuries. The Organization will make necessary adjustments to reduce exposure to ergonomic hazards through modifications to equipment and processes and employee training. The Organization encourages safe and proper work procedures and requires all employees to follow safety instructions and guidelines. The Organization believes that reduction of ergonomic risk is instrumental to maintaining an environment of personal safety and well-being and is essential to our business. We intend to provide appropriate resources to create a risk-free environment. If you have any questions about ergonomics, please contact the Safety Director or People Services Department.

# I. Preventing Violence in the Workplace

## Travelling to and from work

### Arrival at your parking spot

- Park in well-lit areas. Avoid alleys, wooded areas, and tunnels. Use caution in underground lots – stay in open, lit areas near exits. As you enter the parking lot, keep the vehicle locked and the windows rolled up.
- Ensure the vehicle is locked and the windows are up while it is unattended.

### Walking to your place of business

- Proceed directly and quickly to your building. Walk with your head erect, look alert, and scan your route.
- Use the main entrance as much as possible – avoid rear or secluded entrances.

### Leaving Work

- Prepare yourself to leave the store or office with everything you need, such as keys to lock doors, the key to open your vehicle, and a whistle or other personal alarm.
- Use the main entrance as much as possible – avoid rear or secluded exits.
- Proceed directly and quickly to your vehicle. Walk with your head erect, look alert, and scan your route.
- If you must walk to your vehicle alone, have a co-worker watch you from a window, if possible, and wave to him or her on the way to your vehicle

### “Check Person” procedure.

Avoid working alone or afterhours whenever possible. If such situations are unavoidable, the “check person” procedure should be implemented.

- Inform another staff member or the dispatch person of your security provider of the time, location and duration of your stay. Provide a phone number (2 if possible) which they can call to find out that you are all right.
- A periodic phone call (e.g. every 5, 10 or 15 minutes) will be placed to you (the employee) to check if he or she is all right.
- If the location is equipped with video monitoring system, the security vendor will be able to verify visual presence of the employee in that location.
- Procedure will repeat until the employee has confirmed his or her departure from the location.

## Dealing with upset parents/guardians and students.

It is almost inevitable that you will have to deal with an irate parent, guardian and student at some point.

- Focus on the emotions first. Remain calm and try to calm the other person.
- Avoid escalating the situation. Find ways to help the irate person save face.
- Listen carefully and try to put yourself in their shoes, so you can better understand how to solve the problem.
- If you cannot calm the person, ask for help from your supervisor or principal.
- Remember to be always in the clear view of the security cameras, witnesses or fellow staff members.

## Policy Statement – Prevention of Violence in the Workplace

The School management recognizes the potential for violent acts or threats directed against staff by persons other than School employees. Every effort has been made to identify the sources of such action, and procedures have been developed to eliminate or minimize the risks to staff.

The School management will ensure that all staff members are aware of the hazards and are trained in the appropriate actions to take for protection from acts or threats of violence. Workers must follow the procedures implemented for their protection, and immediately report all incidents of violence.

## Enforcement

There are currently no specific OSHA standards for workplace violence.

However, under the General Duty Clause, Section 5(a)(1) of the Occupational Safety and Health Act of 1970, employers are required to provide their employees with a place of employment that is “free from recognized hazards that are causing or are likely to cause death or serious physical harm.” The courts have interpreted OSHA's general duty clause to mean that an employer has a legal obligation to provide a workplace free of conditions or activities that either the employer or industry recognizes as hazardous and that cause, or are likely to cause, death or serious physical harm to employees when there is a feasible method to abate the hazard. OSHA has developed Enforcement Procedures and Scheduling for Occupational Exposure to Workplace Violence, which provides guidance and procedures to be followed when conducting inspections and issuing citations related to the occupational exposure to workplace violence.

An employee that has experienced acts of workplace violence, or becomes aware of threats, intimidation, or other indicators showing that the potential for violence in the workplace exists, would be on notice of the risk of workplace violence and should implement a workplace violence prevention program combined with engineering controls, administrative controls, and training.

# Violent Incident Report Form

Employee who has been victims of violence at work should complete this report as soon as possible.

## Identifying information

Name		Job title	
Shift		Department or section	
Location	<input type="checkbox"/> Parking lot <input type="checkbox"/> Lobby <input type="checkbox"/> Locker room <input type="checkbox"/> Counter or reception area  <input type="checkbox"/> Other (please specify)		
Type of assault  <input type="checkbox"/> Verbal <input type="checkbox"/> Threatened <input type="checkbox"/> Struck <input type="checkbox"/> Bitten <input type="checkbox"/> Pushed <input type="checkbox"/> Kicked <input type="checkbox"/> Scratched <input type="checkbox"/> Other (please specify)			
Medical attention or first aid obtained?  <input type="checkbox"/> Yes <input type="checkbox"/> No		Advised of right to consult doctor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Investigation conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No		Security and Safety contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reported to supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		Police called? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Action taken:			

## Assailant

<input type="checkbox"/> Customer	<input type="checkbox"/> Patient	<input type="checkbox"/> Delivery person	<input type="checkbox"/> Ex-employee	<input type="checkbox"/> Resident	<input type="checkbox"/> Student
<input type="checkbox"/> Visitor <input type="checkbox"/> Other (please specify)					
Description: <input type="checkbox"/> Male <input type="checkbox"/> Female					
Age	Complexion	Height	Weight		
Name (if known)					

## Incident and injury information

Date of incident	Time	a.m. / p.m.
------------------	------	-------------

## Other information

Was the assailant involved in any previous violent incidents with staff?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any measures in place to prevent a similar incident?	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Additional information.		

SEX	Age	Height	Weight	Family Assets Consumption Expenditure
<input type="checkbox"/> Male				

<input type="checkbox"/> Female							
HAIR (color and style)							
<h3>Facial Appearance</h3>						Write below specific facial details that you definitely remember.	
Skin or hair color	Hair style					What did the suspect say?	
Wrinkles	Hair texture						
Shape of eyebrow	Ear size and shape						
Size and shape of eye	Cheeks (full or sunken)						
Mouth and lips	Shape of nose	Describe any tool or weapon seen.					
Mustache or beard	Neck and Adams apple						
<h3>Vehicle</h3>							
Color	Make	Model	License number				
Body style		Damage or rust					
Antenna	Bumper sticker	Wheel covers					
<h3>General Appearance</h3>							
EYES (glasses)		COAT / HAT (color and type)					

Complexion	SHIRT/Blouse
JEWELERY	PANTS/SKIRT
SCARS/MARKS	SHOES
TATTOOS	TIE
Direction of Travel	

## Definition of Incidents

### Assault

The intentional use of physical injury, (impairment of physical condition or substantial pain) to another person, with or without a weapon or dangerous instrument.

### Criminal Mischief

Intentional or reckless damaging of the property of another person without permission.

### Disorderly Conduct

Intentionally causing public inconvenience, annoyance or alarm or recklessly creating a risk thereof by fighting (without injury) or violent, numinous (mysterious) or threatening behavior or making unreasonable noise, shouting abuse, misbehaving, disturbing an assembly or meeting or persons or creating hazardous conditions by an act which serves no legitimate purpose.

### Harassment

Intentionally striking, shoving or kicking another or subjecting another person to physical contact or threatening to do the same (without physical injury). ALSO, using abusive or obscene language or following

a person in/about a public place, or engaging in a course of conduct which alarms or seriously annoys another person.

## Larceny

Wrongful taking, depriving or withholding property from another (no force involved). Victim may or may not be present.

## Menacing

Intentionally places or attempts to place another person in fear of imminent serious physical injury.

## Reckless Endangerment

Subjecting individuals to danger by recklessly engaging in conduct which creates substantial risk of serious physical

injury.

## Robbery

Forcible stealing of another person's property by use of threat or immediate physical force. Victim is present and aware of theft.

## Sex Offense

Public Lewdness:	Exposure of sexual organs to others.
Sexual Abuse:	Subjecting another to sexual contact without consent.
Sodomy:	A deviant sexual act committed as in rape.
Rape:	Sexual intercourse without consent.

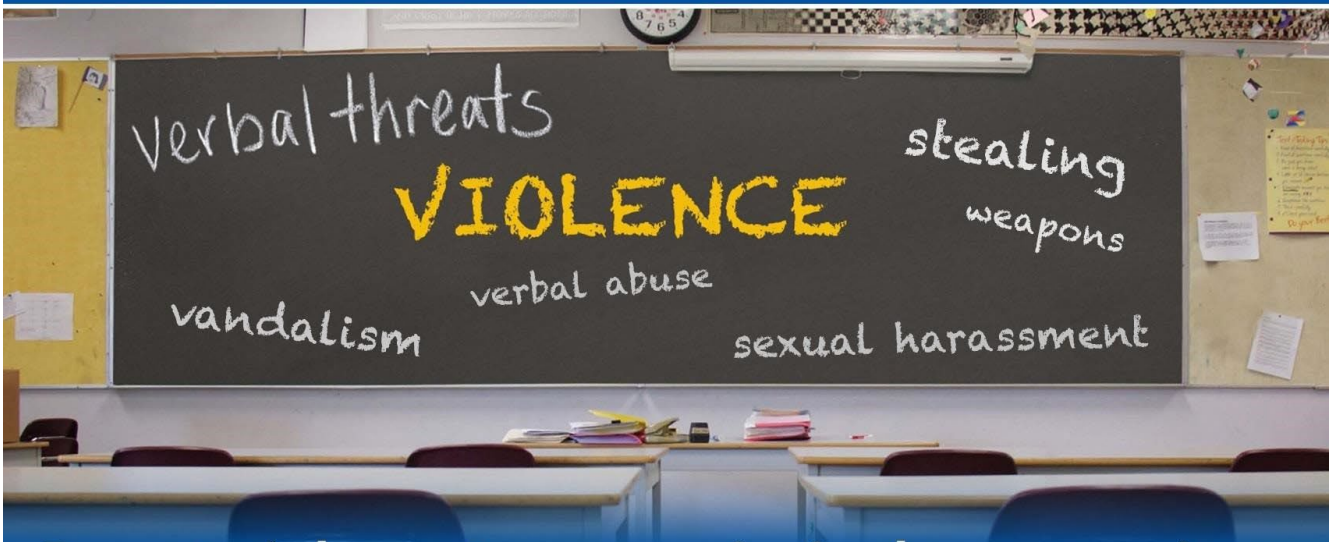
## Training & Other Resources

[Workplace Violence](#). OSHA. Contains links to a variety of training and reference materials, including presentations, publications, and handouts.

[Workplace Violence Prevention for Nurses](#). Centers Disease Control and Prevention (CDC), National Institute for Occupational Safety and Health (NIOSH) Course No. WB1865-NIOSH Pub. No. 2013-155. Online course that provides training to healthcare workers on how to recognize the elements of a workplace violence prevention program and develop skills for preventing and responding to workplace violence.

[Violence Prevention Program - Online](#). Oregon OSHA Online Course. Provides information about methods to recognize, evaluate and respond to risk factors related to workplace violence.

# Violence is *not* Part of the Job



**Report violence to your principal or supervisor.**

To learn more go to [www.OSHA.gov](http://www.OSHA.gov)

## WHAT IS WORKPLACE VIOLENCE?

Occupational Safety and Health Administration defines Workplace violence as "violence or the threat of violence against workers. It can occur at or outside the workplace and can range from threats and verbal abuse to physical assaults and homicide".

Our Charter Schools have a zero-tolerance policy towards workplace violence against or by their employees.

## HOW CAN THE EMPLOYEES PROTECT THEMSELVES?

Nothing can guarantee that an employee will not become a victim of workplace violence but these steps, however, can help reduce the odds:

- Learn how to recognize, avoid and diffuse potentially violent situations. Immediately notify your Principal or Administrator of any violent situations.
- Alert Principals or Administrators of any concerns about safety or security and report all incidents immediately in writing.
- Avoid travelling into unfamiliar locations or situations whenever possible and use the "check person" procedure if that is unavoidable.
- Avoid working alone or staying after hours whenever possible and use the "check person" procedure if that is not possible.

**If you have any questions, please contact:**

**Soliman Villapando**  
Safety Manager  
(661) 418-1539

**Shawn Dunn**  
Security Coordinator  
(661) 429-8331



## "CHECK PERSON" PROCEDURE

Avoid working alone or afterhours whenever possible. If such situations are unavoidable, the "check person" procedure should be implemented.

1. Inform another staff member or the dispatch person of your security provider \* the exact time, location and duration of your stay. Provide a phone number (two phone numbers if possible) which they can call to find out that you are alright.
2. A pre-determined periodic phone call (e.g. every 5, 10, 15 minutes) will be placed to you (the employee) to check if you are alright.
3. If the location or school is equipped with video monitoring system, the security provider\* may be able to verify and monitor visual presence in that location.
4. Procedure will repeat until you (the employee) has confirmed your departure from the location safely.

*\*some locations may not have regular security guards posted but they could provide the "check person" service along with the employee notifying a co-worker.*

The Security Coordinator's number is (661) 429-8331

## VI. State Mandated Reporting, Policies & Training

### A. Mandated Reporter Training

Children's Law Center  
University of South Carolina School of Law

## Mandated Reporter Quick Reference Guide

### Who Are Mandated Reporters?

S.C. Code Ann. § 63-7-310 identifies the following professionals as mandated reporters:

- Physicians
- Nurses
- Dentists
- Optometrists
- Coroners
- Medical Examiners
- Employees of Coroners/Medical Examiners
- Any other professional in these fields:
  - Medical
  - Emergency Medical Services
  - Mental Health
  - Allied Health
- School Teachers
- Counselors
- Principals and Assistant Principals
- School Attendance Officers
- Childcare Workers in Childcare Centers or Foster Care Facilities
- Foster Parents
- Police and Law Enforcement Officers
- Juvenile Justice Workers
- Substance Abuse Treatment Staff
- Social Workers
- Public Assistance Workers
- Clergy, including Christian Science Practitioners & Religious Healers (subject to laws governing privileged communication)
- Clerical or Nonclerical Religious Counselors Who Charge for Services
- Undertakers
- Funeral Home Directors
- Employees of Funeral Homes
- Judges
- Volunteer Non-Attorney Guardians ad Litem
- Computer Technicians
- Persons Responsible for Processing Film

However, a person under age 18 is not required to be a mandated reporter.  
(S.C. Code Ann. § 63-7-310(F))

June 2018 <http://childlaw.sc.edu>  
DSS Brochure 1957 (JAN 19)

### When to Report?

Mandated reporters must make a report when information is received in their professional capacity that gives them reason to believe that a child has been or may be abused or neglected.

- Reporting to a supervisor or person in charge of an institution, school, facility, or agency does not relieve a mandated reporter of his individual duty to report.
- The duty to report is not superseded by an internal investigation of an institution, school, facility, or agency.

(S.C. Code Ann. § 63-7-310(A), (C))

### Where to Report?

Reports may be made to the county department of social services or to a law enforcement agency in the county where the child resides or is found.

(S.C. Code Ann. § 63-7-310(E))

### Failure to Report

A person who is required to report child abuse or neglect and who fails to do so is guilty of a misdemeanor and, upon conviction, must be fined not more than \$500 or imprisoned not more than six months, or both.

(S.C. Code Ann. § 63-7-410)

### Additional Information

For a detailed overview of mandated reporter requirements and how to make a report, see the Mandated Reporter Guide found on the Children's Law Center website at <http://childlaw.sc.edu>.

To schedule a free training on Mandated Reporting, contact the Children's Law Center at 803-777-1646.



UNIVERSITY OF  
SOUTH CAROLINA  
School of Law

## B. Child Abuse Reporting Guidelines

Information for school personnel and those who work in our children's schools to be able to identify signs of suspected cases of child abuse and/or child neglect and to have the tools to know how to make a report to the proper authorities.

These guidelines are issued by the South Carolina Department of Social Services, to help all persons, particularly those persons who work in our children's schools, to be able to identify signs of suspected cases of child abuse and/or child neglect and to have the tools to know how to make a report to the proper authorities. These guidelines are issued in conjunction with an extensive training module, specifically aimed at training school employees and educators on their obligations as mandated reporters of child abuse, which can be located online at [South Carolina Child Abuse Mandated Reporter Training](#)

### Identification of Child Abuse and Neglect

Child abuse is more than bruises or broken bones. While physical abuse often leaves visible scars, not all child abuse is as obvious, but can do just as much harm. It is important that individuals working with and around children be able to know what constitutes child abuse or child neglect and know how to identify potential signs.

### Child Abuse and/or Child Neglect Can Be Any of the Following:

A physical injury inflicted on a child by another person other than by accidental means. The sexual abuse, assault, or exploitation of a child.

The negligent treatment or maltreatment of a child by a person responsible for the child's welfare under circumstances indicating harm or threatened harm to the child's health or welfare. This is whether the harm or threatened harm is from acts or omissions on the part of the responsible person.

The willful harming or endangerment of the person or health of a child, any cruel or inhumane corporal punishment or any injury resulting in a traumatic condition.

One does not have to be physically present or witness the abuse to identify suspected cases of abuse, or even have definite proof that a child may be subject to child abuse or neglect. Rather, the law requires that a person have a "reasonable suspicion" that a child has been the subject of child abuse or neglect. Under the law, this means that it is reasonable for a person to entertain a suspicion of child abuse or neglect, based upon facts that could cause a reasonable person, in a like position, drawing, when appropriate, on his or her training and experience, to suspect child abuse or neglect.

Red flags for abuse and neglect are often identified by observing a child's behavior at school, recognizing physical signs, and observations of dynamics during routine interactions with certain adults.

While the following signs are not proof that a child is the subject of abuse or neglect, they should prompt one to look further.

### Warning Signs of Emotional Abuse in Children

Excessively withdrawn, fearful, or anxious about doing something wrong.

Shows extremes in behavior (extremely compliant or extremely demanding; extremely passive or extremely aggressive).

Doesn't seem to be attached to the parent or caregiver.

Acts either inappropriately adult-like (taking care of other children) or inappropriately infantile (rocking, thumb-sucking, throwing tantrums).

## Warning Signs of Physical Abuse in Children

Frequent injuries or unexplained bruises, welts, or cuts.

Is always watchful and "on alert" as if waiting for something bad to happen. Injuries appear to have a pattern such as marks from a hand or belt.

Shies away from touch, flinches at sudden movements, or seems afraid to go home. Wears inappropriate clothing to cover up injuries, such as long-sleeved shirts on hot days.

## Warning Signs of Neglect in Children

Clothes are ill-fitting, filthy, or inappropriate for the weather.

Hygiene is consistently bad (unbathed, matted and unwashed hair, noticeable body odor). Untreated illnesses and physical injuries.

Is frequently unsupervised or left alone or allowed to play in unsafe situations and environments. Is frequently late or missing from school.

## Warning Signs of Sexual Abuse in Children

Trouble walking or sitting.

Displays knowledge or interest in sexual acts inappropriate to his or her age, or even seductive behavior.

Makes strong efforts to avoid a specific person, without an obvious reason.

Doesn't want to change clothes in front of others or participate in physical activities.

A sexually transmitted disease (STD) or pregnancy, especially under the age of fourteen. Runs away from home.

## Reporting Child Abuse or Neglect

Community members have an important role in protecting children from abuse and neglect. While not mandated by law to do so, if child abuse or neglect is suspected, a report should be filed with qualified and experienced agencies that will investigate the situation. Examples of these agencies are listed below.

Parents and guardians of pupils have the right to file a complaint against anyone they suspect has engaged in abuse or neglect of a child. Community members do not need to provide their name when making a report of child abuse or neglect. Telephone numbers for each county's emergency response for child abuse reporting are located at [South Carolina Emergency Response Child Abuse Reporting Telephone Numbers](#) 13 (PDF).

School volunteers, while not mandated reporters, should also be encouraged to report any suspected cases of abuse and neglect. Additionally, school volunteers are highly encouraged by the law to have training in the identification and reporting of child abuse and neglect. The training offered online to mandated reporters, is equally available to school volunteers.

## Obligations of Mandated Reporters

A list of persons whose profession qualifies them as "mandated reporters" of child abuse or neglect is extensive and continues to grow. It includes all school/district employees, administrators, and athletic coaches. All persons hired into positions included on the list of mandated reporters are required, upon employment, to be provided with a statement, informing them that they are a mandated reporter and their obligations to report suspected cases of abuse and neglect.

All persons who are mandated reporters are required, by law, to report all known or suspected cases of child abuse or neglect. It is not the job of the mandated reporter to determine whether the allegations are valid. If child abuse or neglect is reasonably suspected or if a pupil shares information with a mandated reporter leading him/her to believe abuse or neglect has taken place, the report must be made. No supervisor or administrator can impede or inhibit a report or subject the reporting person to any sanction.

To make a report, an employee must contact an appropriate local law enforcement or county child welfare agency, listed below. This legal obligation is not satisfied by making a report of the incident to a supervisor or to the school. An appropriate law enforcement agency may be one of the following:

A Police or Sheriff's Department (not including a school district police department or school security department). A County Probation Department, if designated by the county to receive child abuse reports. A County Welfare Department/County Child Protective Services.

The report should be made immediately over the telephone and should be followed up in writing. The law enforcement agency has special forms for this purpose that they will ask you to complete. If a report cannot be made immediately over the telephone, then an initial report may be made via e-mail or fax. A report may also be filed at the same time with your school district or county office of education (COE). School districts and COEs, however, do not investigate child abuse allegations, nor do they attempt to contact the person suspected of child abuse or neglect.

School districts and COEs may have additional policies adopted at the local level relating to the duties of mandated reporters. School staff should consult with their district to determine if there are additional steps that must be taken. These policies do not take the place of reporting to an appropriate local law enforcement or county child welfare agency.

## New Required Training for School Employees

South Carolina Department of Education and Department of Social Services require all local educational agencies (LEAs) to train all employees each year on what they need to know in order to identify and report suspected cases of child abuse and neglect. "All employees" includes anybody working on the LEA's behalf, such as teachers, teacher's aides, classified employees, and any other employees whose duties bring them into direct contact and supervision of students. LEAs must also develop a process to provide proof that employees received training. An online training module has been developed specially for educators and is located at [South Carolina Child Abuse Mandated Reporter Training](#). Alternative training methods may be used but, if an LEA uses training other than the online training module, the LEA must report that fact to the COE and inform the COE of the training that was used. A form for this purpose is available at [Reporting Form for LEAs Who Use Alternative Training For Mandatory Reporting \(DOC\)](#).

## Rights to Confidentiality and Immunity

Mandated reporters are required to give their names when making a report. However, the reporter's identity is kept confidential. Reports of suspected child abuse are also confidential. Mandated reporters have immunity from state criminal or civil liability for reporting as required. This is true even if the mandated reporter acquired the knowledge, or suspicion of the abuse or neglect, outside his/her professional capacity or scope of employment.

## Consequences of Failing to Report

A person who fails to make a required report is guilty of a misdemeanor punishable by up to six months in jail and/or up to a \$500.00 fine ([South Carolina Department of Social Services](#))

## After the Report is Made

The local law enforcement agency is required to investigate all reports. Cases may also be investigated by Child Welfare Services when allegations involve abuse or neglect within families.

## Child Protective Services

[South Carolina Department of Social Services](#)) is the major organization to intervene in child abuse and neglect cases in South Carolina. Existing law provides for services to abused and neglected children and their families. More information can be found at Child Protective Services.

[South Carolina Department of Social Services](#) requires all schools districts, county offices of education, charter schools, state special schools and Department of Education diagnostic centers to provide annual training to their employees in child abuse detections and mandatory reporting obligations. under the Child Abuse and Neglect Reporting Act ("CANRA")

Dear Employee,

To be in compliance with South Carolina State law, you are required to complete the training. The training is web based and will take approximately 90 minutes to complete. The training is a priority and your attendance is required.

At the conclusion of the training, there is a Final Test required to pass to receive a Certificate of Completion. You are responsible for submitting your certificate to the Training and Development Department for credit. Please submit your certificate no later than two weeks from today's date to [Training@learn4life.org](mailto:Training@learn4life.org).

During this training, you will learn:

- What the law requires of you as a mandated reporter
- How to spot indicators of possible child abuse or neglect
- How to talk to children about suspected abuse
- How to make a report
- What happens after a report is filed

Special issues related to child abuse reporting in the school environment.

The link for the training is:

<http://educators.mandatedreporterca.com/default.htm>

## C. Service Animal Emotional Support Animal Policy

The use of service animals is a permitted practice under the Americans with Disabilities Act. The School acknowledges this and allows the use of service or emotional support animals. A service animal is not a pet. The ADA requires public accommodations to modify their "no pets" policies to allow the use of a service animal by a person with a disability only.

### 1. Basic Guidelines

- a. A Health Plan will be constructed to document the use of the service or emotional support animal. It may also be appropriate to include this in a student's IEP or 504 plan. The Health Plan will specify whether this is a service or emotional support animal and which service the animal provides, i.e., retrieving items, warning of an oncoming seizure, etc.
- b. A copy of the Health Plan will be placed in the student's records and a copy will be provided to parent and/or student. Staff will be made aware of the accommodations for the use of a service/emotional support animal.

### 2. Student/Handler's Responsibility

- a. The student/handler is responsible for the care and supervision of his or her animal. The animal is expected to behave in an acceptable way. Uncontrolled barking, jumping on other people, or running away from the handler are examples of unacceptable behavior. The student/handler may be asked to remove the animal in these instances.

- b. The student/handler must maintain control of the animal. Maintaining control of the animal should occur with the use of a harness, leash, or other tether unless these devices interfere with the service animal's work or the student/handler's disability prevents use of these devices.
- c. The animal must be housebroken. School may charge student/parent/handler if a service/emotional support animal causes damage to school property.
- d. The animal should be vaccinated in accordance with state and local laws.

### 3. Areas Where Permitted

- a. The service animal will be permitted to accompany the individual with a disability to all areas of the facility where students/employees are normally allowed to go. An individual with a service animal will not be segregated from other students/employees.

### 4. Reaction/Response of Others

- a. Allergies and fear of dogs are not valid reasons for denying access or refusing service to people using service animals. When a person who has an animal allergy and a person who uses a service/emotional support animal must spend time in the same room or facility, they both should be accommodated by assigning them, if possible, to different locations within the room or different rooms in the facility.

## D. Water Testing for lead

To request water testing for lead, please contact the Safety Coordinator. Testing is done on an as needed basis.

## V. Security Systems

### A. Titan HST-Emergency Notification System App

#### Lockdowns

To initiate a campus wide lockdown, select the Broadcast tab and select the lock icon in the top left corner of your screen.

- Select your campus
- Select the desired Lockdown notification recipients
- Press Update Lockdown Status

If 1 or more of your campuses is on lockdown, a red bar will appear & your broadcast tab will show a red badge with lock

**To Disengage Lockdown**

- Select the red lock icon
- Select the desired Disengage Lockdown notification recipients
- Press Update Lockdown Status

Send & Receive Alerts | Broadcast Messages | [Lockdown](#) | Community Safety Status | Emergency Docs

#### Population Safety Status

To view your population's safety status, select the Status tab in the bottom right side of your screen and then click the Send Status Request button at the top of your screen.

View your population by selecting the Active request.

Select one of your users.

Each blue pin will signify a safe user. Red pins signify an unsafe user. To call one of the users, select their pin.

To input your safety status, select the pulses icon found at the top left corner of your screen.

To re-send a status request or end an existing request, slide the active request to the left and make your selection.

Send & Receive Alerts | Broadcast Messages | Lockdown | [Community Safety Status](#) | Emergency Docs

### I'm an Administrator and Parent

Parents connected to their child's school will only receive broadcast notifications from their child's school.

You will continue to have full Admin functionality at the school at which you are an Admin and be able to send/receive all relevant types of communication.

**NOTE: In 24 hours, your staff will be notified about TITAN HST. They will be able to login and start using the system.**

View your campuses & role types by selecting the Me tab. Then select My Campuses.

Incoming broadcast notifications will list the site that they were sent from. Incoming alerts will list the name of the user.

Send & Receive Alerts | Broadcast Messages | Lockdown | Community Safety Status | [Emergency Docs](#)

#### Emergency Documentation

View your emergency plans by selecting the Me tab at the bottom right corner of your screen. Then select Emergency Materials.

**To Upload Emergency PDF's**

- Select the upload icon
- Choose a file or take a photo
- Press Submit in the top right corner of your screen

Select the desired campus

Select user groups that you'd like to have access to the document

Send & Receive Alerts | Broadcast Messages | Lockdown | Community Safety Status | [Emergency Docs](#)

B. Identimetrics System

# Biometric Student Identification:

**Practical Solutions for  
Accountability & Security  
in Schools**

**Raymond J. Fry, Ed.D.  
Anne Marie Dunphy**

March 2015



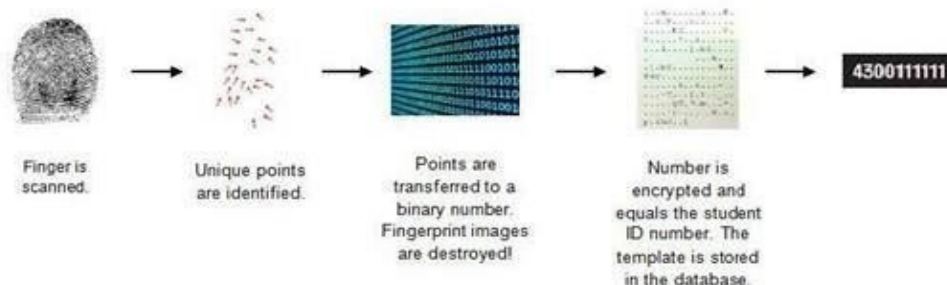
Believe it or not, biometrics is not a new technology. The ancient Egyptians used bodily characteristics to identify workers to make sure they didn't claim more provisions than they were entitled - just like governments today are using biometrics to reduce fraud. Chinese merchants in the fourteenth century used palm prints and foot prints to identify children. Fingerprint recognition is by far the most developed technology today. It's trusted, cost-effective and easy to use. All biometrics have their strengths and weaknesses. The key is finding the right technology for the right application.

## How does it work?

Fingerprint identification is the oldest method that has been successfully used in numerous applications. Each of our ten fingerprints is different from one another and from those of every other person. Even identical twins have unique fingerprints. That makes them ideal for personal identification. A fingerprint is made of a series of ridges and furrows on the surface of the finger. The uniqueness of a fingerprint is determined by the pattern of ridges and furrows as well as the minutiae points. Minutiae points are local ridge characteristics that occur when a ridge splits apart or a ridge ends.

There are several significant differences between finger printing law enforcement applications and finger scanning identification software. Finger printing captures rolled images of all ten fingers. Rolled images capture unique identifying points on the entire finger surface in order to collect the maximum number of unique identifying points. The purpose is to identify suspects based on fingerprint images directly taken from a crime scene or for other forensic identification purposes. Finger scanning uses flat images of only two fingers to create templates. Flat images reveal the center of the finger and require only a minimum of unique identifying points in order to make a match. The purpose is to identify a person already enrolled in a particular software.

Here's how finger scanning works:





*Biometric technology has become an accepted method of identification. Specifically, finger scanning biometric identification has proven to be a better, faster, safer and more cost-effective solution than other methods of identification such as swipe cards and PINs.*

*Finger scanning biometrics is providing the ideal solution for school administrators in their effort to identify students, provide accurate and auditable student records and provide a safer and more secure environment for students, teachers and staff.*

*The following discussion provides information for school administrators and policymakers who are evaluating biometric solutions for student identification and security.*

## Purpose

One of the many challenges facing schools today is accurately identifying students. The bottom line is that schools receive federal and state money based on accurate and auditable records. In addition, schools need to provide a safe and secure environment for everyone on campus. Now more than ever, accurate student identification is key to the efficient operation of a school.

Over the past few decades, schools have been implementing all kinds of new technologies to both enhance learning and improve operations. Smart boards, laptops and real-time Internet resources are just a part of a student's everyday experience. Schools world-wide have been implementing biometric finger scanning to streamline operations, increase teaching time and enhance security.

## A Biometrics Primer

When most people think of biometrics, they think about high security technology - a technology that the government uses for passports and border control, that banks use to combat identity theft, that police use to find criminals, that we see in the movies. But the high cost, high security, futuristic biometric technology, unthinkable in a school environment just a few years ago, is here - and it's practical and affordable and being used in schools all over the world.

Biometrics are automated methods of recognizing a person based on physiological or behavioral characteristics. They include facial recognition, fingerprint, hand geometry, handwriting, iris, vein and voice – anything that's a part of you.

When the student returns to be identified, the finger scanner again scans the finger. The computer software now compares the new template with the other templates in the database. When a matching template is found, the student is identified.

This identification and matching process takes about one second to complete. At no time is a fingerprint image ever stored and fingerprints cannot be recreated from the template.

## Why Biometrics in Schools?

Many areas in a school require identification. The most common kinds of identification currently in use are picture ID cards, PINs, and, of course, visual identification. Each of these methods creates its own issues and is a drain on the time and resources of IT departments.

Cards are regularly forgotten, lost, mutilated and shared; PINs are easily forgotten, swapped or stolen. Also, visual identification is a poor solution, especially with today's considerable security concerns and reporting issues. By using biometrics for identification, the problems and costs associated with the current methods of student identification can be avoided and new standards of accountability can be put into place.

## Practical Applications in Schools

Why would a school use biometrics? Quite simply, to improve efficiency, operations and security. A typical first installation in a school is in the cafeteria where accurate records are critical for reimbursement from the federal government's \$14 billion National School Lunch Program and School Breakfast Program. Schools can then use the same biometric database to identify students to other applications such as those used for attendance, in the nurse's office, in the library or media center and on the bus. Once biometrics is being used successfully in one part of a school, the idea is often embraced in other areas as well. Schools even use it for student identification at athletic events and dances to keep out students who don't belong.

**School Access:** A controlled environment is critical to a school's success. Access to the school must be permitted only to authorized persons. Students, teachers, staff and

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## C. Digital Video Surveillance System

Prime DVR - DVST PRO1600

# PRIME PRO HD



## FULL HD LIVE DISPLAY

Prime DVR - DVST PRO1600  
CODE: DVST PRO1600

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**SPECIFICATION:**

Compression	H.264 (Main Profile)
Signal Format	NTSC or PAL (Auto Selected)
Video Input	Composite 16 BNC Inputs
Main Monitor Output	1 BNC / 1 VGA
Spot Output	1 BNC
Sequence	Yes
Max Recording Rate at CIF (FPS)	480 (NTSC) / 400 (PAL)
Max Recording Rate at H.D1 (FPS)	240 (NTSC) / 200 (PAL)
Max Recording Rate at Full D1 (FPS)	120 (NTSC) / 100 (PAL)
Video Stream	Dual
Audio Input	1 Inputs (RCA Jack)
Audio Output	1 Output (RCA Jack)
Ethernet	10 / 100Mbps Ethernet (RJ-45)
ATM / POS	Up to 4 Channels Over USB
Alarm Input	4 (TTL) Programmable as NC/NO
Alarm Output	4 (TTL) Programmable as NC/NO
USB Port	4 x USB2.0 (2 x Front Panel, 2 x Rear Panel)
Recording Qualities	Super / High / Standard
Network Transmission Quality	Standard 1,2,3,4 / High 1,2,3 / Super 1,2,3
Network Bandwidth Control	56kbps ~ Unlimited
Recording Modes	Continuous / Alarm / Motion / Emergency
Pre-Alarm Recording	Up to 3 Hours / User Programmable
Motion Detection	Yes (22 x 15)
Playback Speed	X1, X2, X4, X8, X16, X32, X64,
Archive File Format	EXE (Video Clip) / JPEG (Still Image)
NTP Server	Yes
GMT Time Zone	Yes
Auto DST	Yes
Multi Language	English / Danish / Chinese (Traditional) / Japanese / Korean / Italian / Polish / Russian / Chinese (Simplified) / Thai / Turkish / Spanish / French / Czech / German / Persian / Portuguese / Croatian
Operating System	Embedded Linux
OS Firmware	Linux OS in Flash Memory

[http://www.avscatalog.com/index.php?target=products&product\\_id=999](http://www.avscatalog.com/index.php?target=products&product_id=999)[6/22/2015 10:38:28 AM]



**VANDAL PROOF IR CAMERA - 620 TVL**  
CODE: CCD-23VF

## FEATURES

Resolution	650 TV Line
Sensor	1/3 inch Sony Super HAD II CCD
Total Pixels	811(H) x 508(V) 410K pixels
Effective Pixels	768(H) x 494(V) 380K pixels
Scanning System	2:1 Interface
S/N (Y signal)	More than 50 dB (AGC Off)
Frequency	Horizontal : 15.734KHz / Vertical : 59.94Hz
Video Output	CVBS : 1.0 Vp-p Comp. 75Ω
Minimum Illumination	0 Lux (IR On)
White Balance	ATW / AWC / PUSH / MANUAL
Electronic shutter speed	Auto / Manual (1/60sec ~ 1/100,000sec)
O.S.D	Built-in
Backlight Compensation	Low / Middle / High / HLM / Off Selectable
Gain Control	Low / Middle / High / Off Selectable
3D DNR (3D digital noise reduction)	Low / Middle / High / Off Selectable
WDR (Long and Short exposure)	ON / OFF
SENS-UP	x2 ~ x256 / OFF
Day & Night	Auto / Color / B&W / CDS
Privacy	On / Off (6 zone)
Motion Detection	On / Off
Mirror	Mirror / v-Flip / Rotate / Off
SYNC	Internal / Auto
Operating Temp. / Humidity	-10°C ~ 60°C / 30%~80% RH
Storage Temp. / Humidity	-20°C ~ 80°C / 20%~90% RH
Power Source	DC 12V
Dimensions	5.7"(Ø) x 4.6"(H) / 2.6 lbs / Storm IR Case (IP68)

## D. Brivo Door Access Control System

The Brivo door system (if applicable) is a lock door system that helps control access. The access is controlled/tracked by using ID badges to unlock the doors from the lobby to the main classroom area. Sites that use this system have badges for ALL staff, but some sites also have access badges for students or front desk staff has an access button to “buzz” people in if necessary. This system is NOT used to track attendance.



## E. Raptor Visitor Access Control System



A **school visitor management system** eliminates uncertainty and helps schools know precisely who is on campus. By scanning their ID, each visitor's information is screened against the sex offender registry and custom databases, including those with custody orders and banned visitor status. The system instantly alerts school officials if a visitor is flagged as a security risk. Visitor management systems automatically capture and store visitor data, enabling schools to create security-focused reports for analytical and investigative purposes.