

2024

School Crisis, Emergency Management, and Medical Emergency Response Plan Template – Resource Templates





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Color key for fillable fields:

School Division

Reunification Site

Other information



Resource Templates

The resource templates in this section are designed to provide sample charts, forms, and checklists to assist in carrying out tasks discussed in the School Crisis, Emergency Management, and Medical Emergency Response Plan (CMP). These are samples only and should be modified or adapted to fit the needs of the specific school or division.

Before Section Resource Templates

The documents listed below relate to tasks discussed in the *Before* section of the CMP Template. These actions support the prevention/mitigation, protection, and preparedness phases of emergency management.

Document Title	Type of Document
Administrator's Mobile Toolkit	Checklist
Classroom Go-Kit Inventory	Checklist
Clinic Go-Kit Inventory	Checklist
Drill/Exercise After-Action Report	Template, Completed sample
Drill/Exercise Log	Template
Hazard Analysis	Template
Individual Safety Plan	Informational, Link to templates
Overview of State Safety Audit process	Informational
Sample Maps	Completed sample
School Safety Inspection	Informational, Link to checklist
Shelter Kit Inventory	Checklist
Staff Badge Access	Completed Sample
Staff Skills Survey	Informational, Link to templates

The following documents produced by the Virginia Department of Criminal Justice Services (DCJS) should be reviewed for additional considerations when completing the CMP template.

- [Division Guide for Crisis Management Planning](#)
- [The Virginia Educator's Guide for Planning and Conducting School Emergency Drills](#)
- [Threat Assessment and Management in Virginia Public Schools: Model Policies, Procedures, and Guidelines](#)
- [Virginia Safety Planning Guide for Individuals with Special Needs](#)



Administrator's Mobile Toolkit

This toolkit should be kept in a brightly colored portable container and stored in a secure area. An administrator should be assigned to take the kit during any emergency activation.

- | | |
|--|--|
| <input type="checkbox"/> Printed copy of CMP | <input type="checkbox"/> Keys for rooms the Master does not open |
| <input type="checkbox"/> School neighborhood map | <input type="checkbox"/> Property gate keys |
| <input type="checkbox"/> School campus aerial photos | <input type="checkbox"/> Procedures for turning off fire alarm system |
| <input type="checkbox"/> School floor plans | <input type="checkbox"/> Procedures for shutting off sprinkler system |
| <input type="checkbox"/> School map of all staging areas | <input type="checkbox"/> Procedures for disarming alarm systems |
| <input type="checkbox"/> School utilities system diagram (gas and utility lines) | <input type="checkbox"/> Staff and student photos (most current available) |
| <input type="checkbox"/> Evacuation route | <input type="checkbox"/> Master roster of all classes |
| <input type="checkbox"/> On-site gathering location | <input type="checkbox"/> Master bus schedules |
| <input type="checkbox"/> Staff roster with special skills listed | <input type="checkbox"/> Bell schedule |
| <input type="checkbox"/> Map of emergency response equipment | <input type="checkbox"/> Blank notepads |
| <input type="checkbox"/> Inventory list for first aid and bleeding control stations | <input type="checkbox"/> Pens, pencils, other writing devices |
| <input type="checkbox"/> Contact information for: <ul style="list-style-type: none"><input type="checkbox"/> Division-level administrators<input type="checkbox"/> Responding agencies<input type="checkbox"/> Utility providers | <input type="checkbox"/> Blank copy of ICS Incident log |
| <input type="checkbox"/> Keys (should be in a locked container in the kit or in the Knox Box–rapid entry system) | <input type="checkbox"/> First aid kit with latex-free surgical gloves |
| <input type="checkbox"/> Master key | <input type="checkbox"/> Flashlight (batteries should be refreshed every 6 months) |

When exiting the building or moving locations:

- ☐ Student attendance roster for the day
- ☐ Visitor and substitute teacher log for the day
- ☐ Extra two-way radios



Classroom Go-Kit Inventory

Classroom go-kits should be kept in a highly visible, easily portable bag that is stored near the classroom door. Go-kits should be taken with the class during an emergency that requires relocating from the classroom.

Folder containing:

- ☐ Emergency phone numbers
- ☐ Buddy Teacher list
- ☐ Evacuation route map
- ☐ Assembly areas
- ☐ Instructions for substitute teacher
- ☐ General response protocol overview
- ☐ Hazard-specific responses
- ☐ Class rosters (update monthly)
- ☐ List of assigned students with access or functional needs
- ☐ Blank paper
- ☐ Brightly colored vest to be worn by teacher
- ☐ Blank copies of student release forms
- ☐ Red/Green status cards

Additional kit items:

- ☐ Basic first aid kit
- ☐ Pressure dressings
- ☐ Latex-free gloves
- ☐ Flashlight (batteries should be refreshed every 6 months)
- ☐ Large garbage bags (1 per student to keep warm or dry)
- ☐ Whistle
- ☐ Small garbage bags with ties for sanitation
- ☐ Tissues (1 box or roll)
- ☐ Hand sanitizer/wet wipes
- ☐ Scissors
- ☐ Small snacks (allergen free) – optional
- ☐ Small games/activities – *optional*



Clinic Go-Kit Inventory

The clinic go-kit should be kept in a secure location and stored in an easily portable container marked as “MEDICAL” or utilizing the ISO 7010 symbol of a green cross on a white background or white cross on a green background. The school nurse should monitor and resupply the kit as needed.

- | | |
|--|---|
| <input type="checkbox"/> Disposable bottled water | <input type="checkbox"/> Waterless antibacterial soap |
| <input type="checkbox"/> Flashlight (batteries should be refreshed every 6 months) | <input type="checkbox"/> Steri-Strips (butterfly closures) |
| <input type="checkbox"/> Radio (battery operated) | <input type="checkbox"/> Latex-free disposable gloves |
| <input type="checkbox"/> Duct tape | <input type="checkbox"/> Eye protection masks |
| <input type="checkbox"/> Large plastic trash bags | <input type="checkbox"/> Sugar source for diabetic students/staff |
| <input type="checkbox"/> Assorted bandages and sterile pads | <input type="checkbox"/> Sanitary napkins |
| <input type="checkbox"/> Oval eye patches | <input type="checkbox"/> Finger splints |
| <input type="checkbox"/> Matches | <input type="checkbox"/> Cardboard splints |
| <input type="checkbox"/> Pillow | <input type="checkbox"/> Folder with needed paperwork: |
| <input type="checkbox"/> Tongue depressors | <input type="checkbox"/> Student medication disbursement list |
| <input type="checkbox"/> Sterile water (for burns) | <input type="checkbox"/> Individuals with ISPs |
| <input type="checkbox"/> Instant ice packs | <input type="checkbox"/> Blank paper |
| <input type="checkbox"/> Hypo-allergenic tape | <input type="checkbox"/> Map of mobility aids |
| <input type="checkbox"/> Scissors | <input type="checkbox"/> Map of first aid kits |
| <input type="checkbox"/> Tweezers | <input type="checkbox"/> Map of bleeding control kits |
| <input type="checkbox"/> Gauze rolls | <input type="checkbox"/> Inventory of first aid kits |
| <input type="checkbox"/> Ace bandages | <input type="checkbox"/> Inventory of bleeding control kits |
| <input type="checkbox"/> Sewing needle and thread | |
| <input type="checkbox"/> Safety pins (various sizes) | |

When exiting the building or moving locations:

- ☐ Student medications (prioritize by medical need and availability)
- ☐ Mobile AED



Drill/Exercise After-Action Report

An after-action report (AAR) should be completed after each drill or exercise is debriefed by the School Safety Team.

Drill/Exercise Information

Drill/Exercise:	Drill/Exercise Date:	Threat or Hazard:	Scenario:

Drill/Exercise Analysis

Objective:	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to Be Performed (U)
<i>(Add additional objectives as needed)</i>				

Objective and Challenge Faced:	Corrective Action:	Person Responsible:	Date Completed:



Sample Completed AAR

Drill/Exercise Information

Drill/Exercise:	Drill/Exercise Date:	Threat or Hazard:	Scenario:
October Fire Drill	October 15, 2023	Fire	Fire erupted in the kitchen while 7 th grade students were exiting the cafeteria between lunch periods

Drill/Exercise Analysis

Objective:	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to Be Performed (U)
Practice evacuation routes during non-classroom times	P			
Practice teacher/student recall of secondary evacuation routes		S		
Practice student recall of gathering locations during an evacuation			M	
Ensure all students, staff, and visitors leave the building in an orderly and timely fashion	P			
Practice student, staff, and visitor accountability process		S		

Objective and Challenge Faced:	Corrective Action:	Person Responsible:	Date to be Completed:
Practice teacher/student recall of secondary evacuation routes. Challenge: Secondary routes were not utilized efficiently.	Review secondary evacuation routes with teachers assigned to classrooms nearest cafeteria	Mrs. Jones, Team Lead	November 1, 2023
Practice student recall of gathering locations during an evacuation. Challenge: 7 th grade students did not move to assigned location after exiting the building.	Review gathering locations with 7 th grade students; walk to meeting location	4 th period teachers (7 th grade only)	November 1, 2023
Practice student, staff, and visitor accountability process. Challenge: Time to account for students who were not with assigned class exceeded acceptable time.	Review documentation and communication process with teachers when students are not assigned to their class	Mr. Smith, AP	November 1, 2023



Drill/Exercise Log

A drill/exercise log should be completed after the AAR has occurred with the school safety team, no later than five school days after the drill/exercise was conducted. Logs should be stored either digitally or on paper in an easy-to-review manner and produced when requested by division-level staff or fire marshal officials.

School Name: _____ Drill Conducted: _____

Date of Drill: _____ Drill Led By: _____

Date AAR Completed: _____ Date Log Completed: _____

Members of School Safety Team Present for AAR:

Students Participating: _____ # Staff Participating: _____

Were visitors present at the time of the drill/exercise? ☐ Yes / ☐ No Did visitors follow all directions given? ☐ Yes / ☐ No

Scenario tested during drill/exercise:

Special circumstances simulated:

Were first responders present for observation? ☐ Yes / ☐ No Did visitors follow all directions given? ☐ Yes / ☐ No

Was feedback solicited from staff members? ☐ Yes / ☐ No Were drill/exercise actions reviewed with students? ☐ Yes / ☐ No

Feedback provided by responders, staff, or students:

Please see [The Virginia Educator's Guide for Planning and Conducting School Emergency Drills](#) for additional templates and drill recommendations.



Hazard Analysis

In addition to using the data sources listed in the CMP Template Before Section, planning teams should also develop a master list of all threats and hazards, assess the likelihood of occurrence, and plan a site-specific mitigation strategy. School safety teams should err on the side of caution in evaluating risks and identifying vulnerabilities so that plans are developed for the worst possible outcome and can be scaled back as needed.

Hazard	Probability	Magnitude	Warning	Duration	Risk Priority
Extreme Heat/ Drought	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Flooding/ Flash Flooding	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Hail	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Hurricane/ Reception Support	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Infestation/Disease	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Mold/Air Quality	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Thunderstorm/ Lightning	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Tornado/ Straight-Line Winds	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Tremors/ Earthquake	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low



Hazard	Probability	Magnitude	Warning	Duration	Risk Priority
Urban Wildland Interface/Fire	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Winter Storm	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Building Collapse	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Energy/Fuel Shortage	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Hazardous Materials	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Major Urban Structure Fire	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Plane Crash	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Pipeline Failure	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Telecommunication Failure	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Bus/Vehicle Wreck	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Water/Wastewater System Failure	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low



Hazard	Probability	Magnitude	Warning	Duration	Risk Priority
Train Derailment	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Bomb/Terrorist Threat	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Civil Disorder	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Felony Crimes	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Hostage	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Mass Casualty	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Campus Death(s)	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Security Breach/ Trespassing	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Terrorism/ Bio Terrorism	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Weapons Incidents	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low
Cyber Security Breach	4. Highly Likely 3. Likely 2. Possible 1. Unlikely	4. Catastrophic 3. Critical 2. Limited 1. Negligible	4. Minimal 3. 6–12 hrs. 2. 12–24 hrs. 1. 24+ hrs.	4. 12+ hrs. 3. 6–12 hrs. 2. 3–6 hrs. 1. <3 hrs.	High Medium Low



Individual Safety Plan

The TEAMS Framework can be used to streamline identification and preparation for the access and functional needs of students, staff, and visitors such as volunteers, parents, delivery personnel, substitutes, and guests. While it is often not possible to know the needs of some individuals ahead of time, the TEAMS Framework can help prepare with inclusivity in mind.

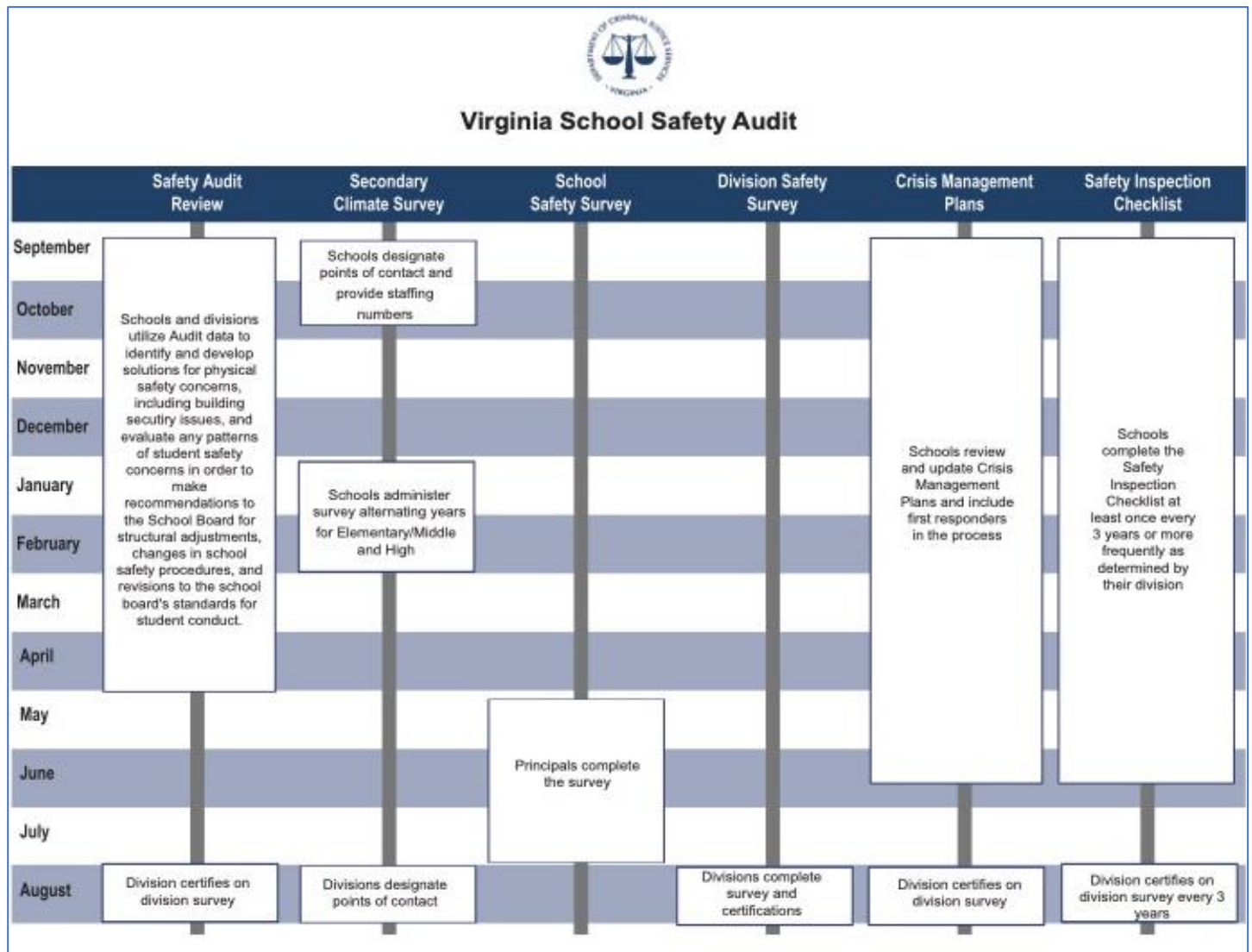
Support Category	Definition	Examples of Need
T Transportation & Mobility	Accommodations necessary to support an individual's movement to safety, alternative location, or protective position during and after a crisis	Individuals in wheelchairs (manual and electric), with crutches, requiring lift and/or stair equipment, medically fragile individuals, pregnant individuals, etc.
E Emotional, Mental & Behavioral Health	Accommodations, personnel, procedures, services, or specialized preparation required to ensure an individual's emotional well-being and/or behavioral health during a crisis	Individuals with ADHD, sensory disorders, anxiety, trauma history, PTSD, cognitive or intellectual impairment, etc.
A Auxiliary Communication	Accommodations, personnel, equipment, or specialized training required to assist an individual's ability to receive, understand, and relay information during a crisis	Individuals with speech or cognitive disabilities and impairments, visual impairments/blindness, deaf or hard of hearing, etc., as well as English Language Learners and individuals who speak a language other than English
M Medical	Medicine, medical care, specialized training, equipment, or medical protocols required to ensure an individual's safety during a crisis	Individuals with medical conditions such as asthma, allergies, diabetes, medical fragility, seizure disorders, traumatic brain injury, physical injury, or impairment, etc.
S Security & Supervision	Additional equipment, training, protocols, and personnel required to maintain accountability and security of an individual during and after a crisis	Individuals for whom traditional lockdown presents a physical, sensory, or emotional challenge, those who cannot remain quiet or stationary, individuals who are known to elope (run away) or initiate self-evacuation in a crisis, etc.

For planning purposes, the [Virginia Safety Planning Guide for Individuals with Special Needs](#) provides templates related to:

- Compiling a list of all individuals who may require an ISP (page 24)
- Completing an ISP per individual (page 25)
- Completing a TEAMS worksheet to identify and arrange necessary supports (page 26)



State Safety Audit Process





Virginia School Safety Audit (Accessible Content)

Safety Audit Review

September – April: Schools and divisions utilize Audit data to identify and develop solutions for physical safety concerns, including building security issues, and evaluate any patterns of student safety concerns in order to make recommendations to the School Board for structural adjustments, changes in school safety procedures, and revisions to the school board's standards for student conduct

August: Division certifies on division survey

Secondary Climate Survey

September – October: Schools designate points of contact and provide staffing numbers

January – February: Schools administer survey alternating years for Elementary/Middle and High

August: Divisions designate points of contact

School Safety Survey

May – July: Principals complete the survey

Division Safety Survey

August: Divisions complete survey and certifications

Crisis Management Plans

September – June: Schools review and update Crisis Management Plans and include first responders in the process

August: Division certifies on division survey

Safety Inspection Checklist

September – June: Schools complete the Safety Inspection Checklist at least once every 3 years or more frequently as determined by their divisions

August: Division certifies on division survey every 3 years

Sample Maps

Maps should be clearly marked and consistently labeled across schools within the same division. The following maps will need to be developed to complete the CMP Template. Additional maps may be created for site-specific needs and should be added to the applicable response section. Some maps may be combined (e.g., evacuation routes with building entry points or mobility aids with medical supplies), so long as all requirements for each map are included and the map does not become too cluttered for use.



Maps Needed for CMP Template:

- ☐ Building Entry Points: Labeled with assigned door number
- ☐ Emergency Alert (if installed): Activation buttons, notification lights
- ☐ Fire Safety: Pull stations, sensor zones, fire extinguishers, fire panel
- ☐ Medical Supplies: bleeding control kits, first aid kits, AED
- ☐ Mobility Aids: Wheelchair, backboard, carrying device, evacuation chair
- ☐ Primary and Secondary Evacuation Routes (Red for primary, Blue for secondary)
- ☐ Reunification Staging
- ☐ Shelter Areas: Weather and HazMat
- ☐ Site Map: Boundaries and entry points, all buildings, utility lines and shut off points

Sample Interior Mapping



Sample Exterior Mapping





School Safety Inspection

Regular assessments of the school's safety features should be conducted to ensure they are functioning as intended. For a detailed checklist and expected standards, download the [School Safety Inspection Checklist for Virginia Public Schools](#). The checklist covers the following items:

Exterior:

- ☐ Fencing and gates
- ☐ Lighting
- ☐ Building, grounds, and landscape maintenance
- ☐ Surveillance cameras and alarm systems
- ☐ Signage and property entrance
- ☐ Building entry points: Doors and windows
- ☐ Key control
- ☐ Walkways, covers, ledges, and roof access
- ☐ Modular, portable, and auxiliary buildings
- ☐ Traffic and parking lot design and use
- ☐ Vehicle loading areas

Interior:

- ☐ Exit signs and emergency lighting
- ☐ Interior lighting
- ☐ Identification badges (students, staff, and visitors)
- ☐ Digital records security
- ☐ Property inventory
- ☐ Two-way communication
- ☐ Entryway and hallways
- ☐ Cafeteria, gyms, auditorium, restrooms, and other common areas
- ☐ Classrooms, including high risk classrooms such as music rooms and computer labs
- ☐ Storage closets and mechanical rooms



Shelter Kit Inventory

In addition to the classroom go-kit, each shelter location should have a shelter kit that is stocked with enough supplies for the expected number of individuals assigned to that shelter.

- ☐ 5-gallon bucket (to store supplies and use as a toilet if needed)
- ☐ Toilet supplies
- ☐ Small plastic bags with ties
- ☐ Toilet paper
- ☐ Hand-washing supplies, wet wipes, or hand sanitizer
- ☐ Duct tape (2 rolls)
- ☐ Plastic sheeting to cover doors and windows
- ☐ Drinking water and cups
- ☐ Space blankets
- ☐ Tarp or ground cover
- ☐ Portable radio and batteries (batteries should be refreshed every 6 months)
- ☐ Flashlight and batteries (batteries should be refreshed every 6 months)
- ☐ Age-appropriate student activities
- ☐ Sensory supports (e.g., headphones, visual schedules, fidgets, and other indicated items)
- ☐ Gum, mints, or hard candy (to help relax students)
- ☐ Items for earthquake-prone areas (leather gloves, safety goggles, crowbar, etc.)
- ☐ Folder containing:
 - ☐ Shelter protocol documents
 - ☐ Student and staff roster
 - ☐ Emergency contact information
 - ☐ List of individuals with ISP and needed supports



Staff Badge Access – Sample Timeframes

Staff will have access to the facility at pre-determined times based on the scope of their job duties and responsibilities. Standards will be established to restrict access to the building when access is not essential. If staff members should need access outside of the designated times, they must contact their supervisor to request the exception. Below is a sample badge access schedule:

School Staff Access to Assigned Building:

Administrators

Monday – Sunday 12:00 AM – 11:59 PM All school doors

No access: Kitchen, Technology-secure areas

Child Nutrition

Monday – Friday 4:00 AM – 9:00 PM Kitchen doors only

No access: IDF, MDF, Technology-secure areas

Custodians

Monday – Sunday 12:00 AM – 11:59 PM All exterior doors

No access: IDF, MDF, Technology-secure areas

Faculty

Monday – Friday 6:00 AM – 9:00 PM All exterior doors

Monday – Sunday 12:00 AM – 11:59 PM Main entry

No access: Kitchen, IDF, MDF, Technology-secure areas

Faculty (Coach)

Monday – Friday 6:00 AM – 9:00 PM All exterior doors

Monday – Sunday 12:00 AM – 11:59 PM Main entry, Athletic areas

No access: Kitchen, IDF, MDF, Technology-secure areas

Faculty (Club Sponsor)

Monday – Friday 6:00 AM – 9:00 PM All exterior doors

Monday – Sunday 12:00 AM – 11:59 PM Main entry, Program area doors

No access: Kitchen, IDF, MDF, Technology-secure areas



Division Level Access (by Department):

Division Administrator

Monday – Sunday 12:00 AM – 11:59 PM All buildings, All doors

Athletics Staff

Monday – Sunday 12:00 AM – 11:59 PM All central office doors

Monday – Sunday 12:00 AM – 11:59 PM Main entry, Athletic area

No access: Kitchen, IDF, MDF, Technology-secure areas

School Support (Curriculum, Testing, Health Services)

Monday – Sunday 12:00 AM – 11:59 PM All central office doors

Monday – Sunday 12:00 AM – 11:59 PM All school exterior doors

No access: Kitchen, IDF, MDF, Technology-secure areas, Transportation areas

Child Nutrition Staff

Monday – Sunday 12:00 AM – 11:59 PM All central office doors

Monday – Sunday 12:00 AM – 11:59 PM All school kitchens

No access: IDF, MDF, School auxiliary buildings, Technology-secure areas, Transportation areas

Custodial Supervisors

Monday – Sunday 12:00 AM – 11:59 PM All buildings, All doors

No access: Kitchens, IDF, MDF, Technology-secure areas

First Responders

Monday – Sunday 12:00 AM – 11:59 PM All buildings, All doors

Maintenance and Operations

Monday – Sunday 12:00 AM – 11:59 PM All buildings, All doors

No access: IDF, MDF, Technology-secure areas

Safety and Security

Monday – Sunday 12:00 AM – 11:59 PM All buildings, All doors

Technology Administrators: All Access

Monday – Sunday 12:00 AM – 11:59 PM All buildings, All doors



Transportation (Bus Driver)

Monday – Sunday	12:00 AM – 11:59 PM	Transportation area doors
Monday – Friday	6:00 AM – 9:00 PM	Feeder Pattern school doors

No access: Kitchen, IDF, MDF, Warehouse, Technology-secure areas

Transportation Administration

Monday – Sunday	12:00 AM – 11:59 PM	Transportation area doors
Monday – Friday	6:00 AM – 9:00 PM	All school doors

No access: Kitchen, IDF, MDF, Warehouse, Technology-secure areas

Warehouse Staff

Monday – Friday	7:00 AM – 6:00 PM	All school delivery doors
Monday – Sunday	12:00 AM – 11:59 PM	All central office doors, Warehouse doors

No access: Kitchen, IDF, or MDF



Staff Skills Survey

Staff should be surveyed annually to identify any special skills that could be used during an emergency. The [*Division Guide for Crisis Management Planning*](#) provides a Staff Survey template that can be adjusted to collect any additional information needed by the School Safety Team.

Skillsets surveyed include:

- ☐ First aid training and certification
- ☐ AED training and certification
- ☐ CPR training and certification
- ☐ Other medical training (EMT, triage, EpiPen®, etc.)
- ☐ Fire safety (firefighting, HazMat, etc.)
- ☐ Search and rescue
- ☐ Critical incident stress debriefing
- ☐ Law enforcement
- ☐ Emergency planning/management
- ☐ Shelter management
- ☐ Bi/multi-lingual
- ☐ Sign language
- ☐ Ham radio operator
- ☐ CB radio
- ☐ Bus/truck driving
- ☐ Mechanical abilities
- ☐ Construction skills (electric, plumbing, carpentry, etc.)
- ☐ Survival training/techniques
- ☐ Food preparation
- ☐ Any special assistance accommodations needed



During Section Resource Templates

The documents listed below relate to tasks discussed in the During section of the CMP Template. These actions support the response phase of emergency management.

Document Title	Type of Document
Bomb Threat Reporting Form	Template
Incident Command System (ICS) Chart for Schools	Template
Memorandum of Understanding (MOU)	Template
Standard Response Protocol Public Address Announcements	Informational, Link to resources



Bomb Threat Report Form

Document the exact wording of the threat:

Time: _____

Date: _____

Gender of caller: _____

Culture: _____

Age of caller: _____

Length of call: _____

Name or number displayed on your phone: _____

Questions to Ask:

1. When is the bomb going to explode?
2. Where is it right now?
3. What does it look like?
4. What kind of bomb is it?
5. What will cause it to explode?
6. Did you place the bomb?
7. Why did you place the bomb?
8. What is your address?
9. What is your name?

If voice is familiar, who did it sound like? _____

- ☐ Words clearly spoken
- ☐ Foul language
- ☐ Irrational
- ☐ Taped/Recorded
- ☐ Incoherent

Background Sounds

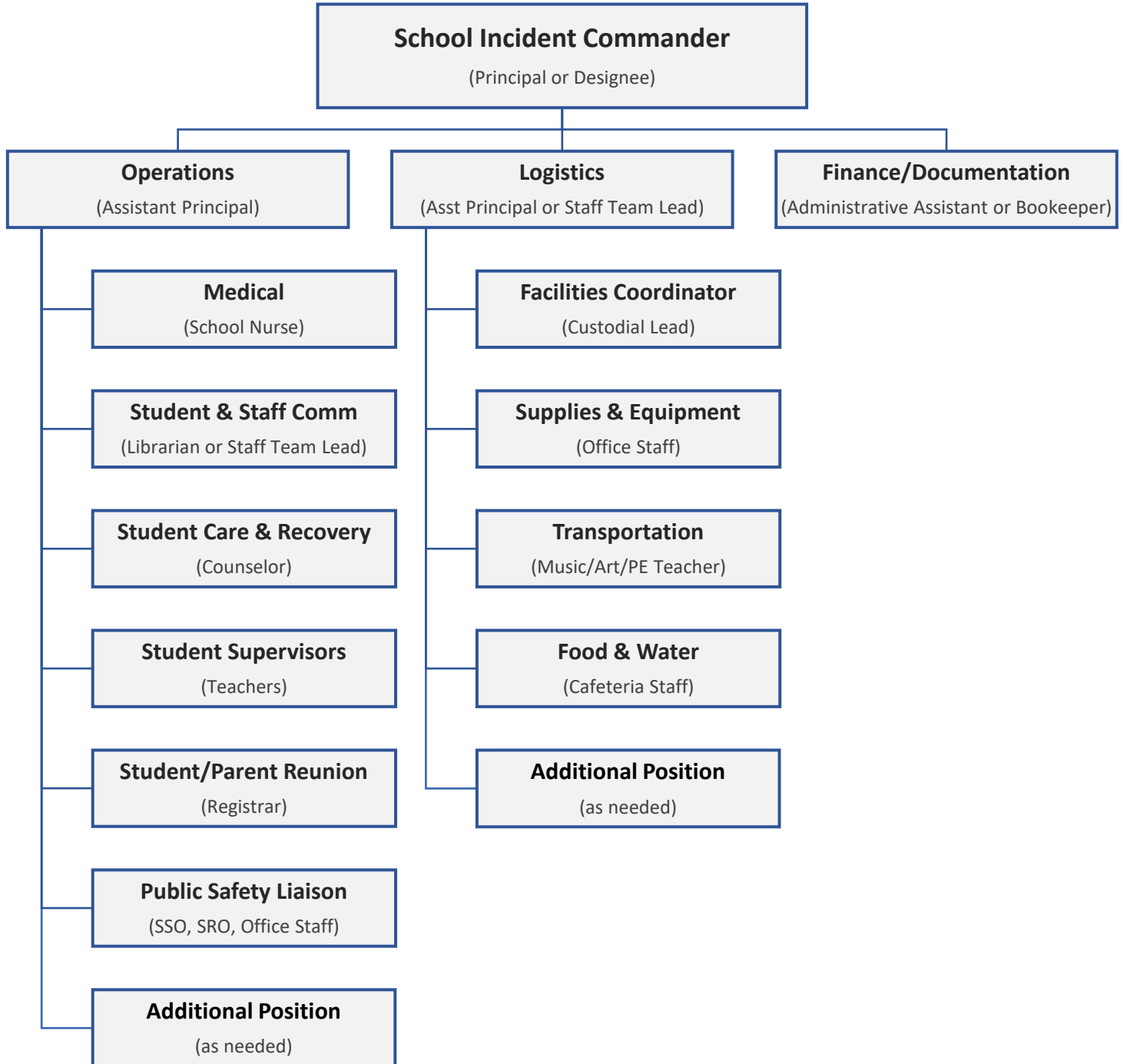
- ☐ Street
- ☐ Animal Noises
- ☐ Public Announcement System
- ☐ Static
- ☐ Voices
- ☐ Music
- ☐ Motor
- ☐ House Noises
- ☐ Local
- ☐ Office Machinery
- ☐ Isolated Location (Phone Booth)
- ☐ Other: _____

Caller's Voice

- ☐ Calm
- ☐ Angry
- ☐ Slow
- ☐ Rapid
- ☐ Soft
- ☐ Loud
- ☐ Laughter
- ☐ Normal
- ☐ Distinct
- ☐ Slurred
- ☐ Whispered
- ☐ Cracking Voice
- ☐ Nasal
- ☐ Stutter
- ☐ Raspy
- ☐ Deep
- ☐ Ragged
- ☐ Clearing Throat
- ☐ Crying
- ☐ Disguised
- ☐ Accent
- ☐ Familiar
- ☐ Deep Breathing
- ☐ Other: _____



Incident Command System (ICS): School Assignments





Memorandum of Understanding (MOU)

An MOU should be completed between the school division and all locations that have been identified for use as a reunification site. This agreement outlines the needs of the school division, the responsibilities of each organization, and the actions that need to be taken to activate the site. Below is a sample MOU that can be customized by the school division's legal team to fit their needs:

MEMORANDUM OF UNDERSTANDING

Between

[Click or tap here to enter text.](#) and [Click or tap here to enter text.](#)

Regarding:

Use of Facilities for an Off-Site Reunification Site

This Agreement is made and entered into by and between [Click or tap here to enter text.](#) and [Click or tap here to enter text.](#)

ORGANIZATIONS

[Click or tap here to enter text.](#)

[Click or tap here to enter text.](#) is a public school district that serves over [\(total enrollment\)](#) [Click or tap here to enter text.](#) students in grades pre-K-12. As part of its commitment to the safety and security of all [Click or tap here to enter text.](#) staff, students, and families, the division develops, maintains, and tests a variety of emergency procedures to be prepared for the emergencies the division may encounter. An important aspect of this planning is the identification of off-site (non-division property) evacuation and reunification sites.

Reunification is the critical process that schools use to reunite children with their caregivers in a safe and efficient way. In the instance that [Click or tap here to enter text.](#) cannot use the impacted building(s) or other division property to reunite children with their caregivers, the division will look to off-site reunification locations in the immediate area.

[Click or tap here to enter text.](#)

The [Click or tap here to enter text.](#) is located at [Click or tap here to enter text.](#). The [Click or tap here to enter text.](#) is committed to supporting the community, including [Click or tap here to enter text.](#), in times of need and will make its facility available at the address listed above in line with the assumptions, processes, and terms outlined below.

TERMS AND ASSUMPTIONS OF THE AGREEMENT

[Click or tap here to enter text.](#) desires to enter into a Memorandum of Understanding with the [Click or tap here to enter text.](#) to serve as an off-site reunification location should [Click or tap here to enter text.](#) need to relocate students, staff, and visitors following an emergency that greatly impacts the use of its facilities to ensure students are reunited with their families.

[Click or tap here to enter text.](#) and the [Click or tap here to enter text.](#) desire to enter this Memorandum of Understanding to establish a framework of cooperation and a working



relationship that would assist in facilitating the use of this site as a reunification location to ensure that all impacted students are safely reunited with their families following an emergency in one or more of the division's facilities.

Now, therefore, [Click or tap here to enter text.](#) and the [Click or tap here to enter text.](#), in consideration of the mutual covenants and agreements herein contained, do mutually agree as follows:

1. Should [Click or tap here to enter text.](#) need to act on this MOU, it will require space for upward of approximately [Click or tap here to enter text.](#) students.
2. [Click or tap here to enter text.](#) staff would be responsible for setting up and facilitating the transport, care, and successful reunification of all [Click or tap here to enter text.](#) students.
3. [Click or tap here to enter text.](#) has an established reunification procedure that will be followed, including trained staff that will facilitate this process.
4. [Click or tap here to enter text.](#) will work with local law enforcement to ensure security during transport and once the students are on the premises.
5. [Click or tap here to enter text.](#) will, as soon as possible, notify the designated point of contact for [Click or tap here to enter text.](#), should the off-site reunification area be needed for use.
6. [Click or tap here to enter text.](#) will continuously coordinate with [Click or tap here to enter text.](#) during any use of their facility.
7. [Click or tap here to enter text.](#) staff would be responsible for making the facilities on the property accessible and suitable for [Click or tap here to enter text.](#)'s use.
8. [Click or tap here to enter text.](#) would, at minimum, require a space to securely house all students, as well as a designated area for parents/guardians to check in and an area where students and parents/guardians can be reunited. Additional rooms may be needed depending on the situation.
9. [Click or tap here to enter text.](#) should expect that a large volume of vehicle traffic will be likely, given the number of students.
10. [Click or tap here to enter text.](#) would make every effort to ensure that the facility is returned to its previous state following any use.

In an ongoing effort to ensure the success of the agreement, both parties agree to the following:

- ☐ Encourage ongoing liaison with the other.
- ☐ Work with each other to develop emergency plans, training exercises, and a state of preparedness.
- ☐ Work with each other in times of disaster or emergency to meet the needs of the division and community.
- ☐ Work within its own lines of authority and respect the lines of authority of the other.
- ☐ Strive to distribute copies of and publicize this agreement through channels to its own members and to other organizations, both public and private, which may have an active interest in disaster relief.
- ☐ [Click or tap here to enter text.](#) will not incur nor reimburse any expenses pertaining to this agreement or the parties involved.



- ☐ Acknowledge that each Party intends that transportation, food, housing, and any expense incurred by either Party shall be the responsibility of the Party that incurs the expense.
- ☐ Acknowledge that each Party intends to supply the best-that-can-be-applied accommodations and necessities during activation but agree that such may not be the priority during activation and, as such, cannot be assured.

IMPLEMENTATION

This memorandum shall take effect upon its signing by authorized representatives of [Click or tap here to enter text.](#) and representatives of the [Click or tap here to enter text.](#) and be valid for a period of three years.

This memorandum may be amended by mutual agreement of both parties, and it is understood by both parties that at any time, this Memorandum of Understanding may be terminated by written notification from either party to the other. Six months prior to termination, the parties shall meet to review the progress and success of the Memorandum of Understanding and determine whether it shall be extended for an additional three years. In no event shall any single extension of this Memorandum of Understanding be for a term exceeding three years.

MISCELLANEOUS

Powers: This Memorandum of Understanding does not create a partnership or a joint venture, and neither Party has the authority to bind the other.

Release: [Click or tap here to enter text.](#) hereby releases, acquits, and forever discharges the [Click or tap here to enter text.](#) and all of its affiliates (collectively, the “Released Parties”) of, from, and with respect to any and all liability arising from any and all obligations, causes of action, suits, promises, agreements, losses, damages, charges, expenses, challenges, contests, liabilities, costs, claims, and demands of whatsoever nature, known or unknown, which may ever accrue in the future to [Click or tap here to enter text.](#) in connection with their use of the [Click or tap here to enter text.](#) [Click or tap here to enter text.](#) further indemnifies the [Click or tap here to enter text.](#) for all obligations, causes of action, suits, promises, agreements, losses, damages, charges, expenses, challenges, contests, liabilities, costs, claims, and demands of whatsoever nature, known or unknown, which may arise out of this Memorandum of Understanding.

IN WITNESS WHEREOF, this agreement has been executed on behalf of the [Click or tap here to enter text.](#) by a duly authorized representative and on behalf of the [Click or tap here to enter text.](#) by an authorized representative.

School Division: _____
By: _____
Print name: _____
Signature: _____
Title: _____
Date: _____

Reunification Site: _____
By: _____
Print name: _____
Signature: _____
Title: _____
Date: _____



Standard Response Protocol Public Address Announcements

Additional SRP materials, including parent handouts, can be found at the I Love U Guys Foundation website.

IN AN EMERGENCY TAKE ACTION



HOLD



SECURE



LOCKDOWN



EVACUATE



SHELTER

Standard Response Protocol – Public Address	
Medical Emergency	Hold in your Room or Area. Clear the halls.
Threat Outside	Secure! Get inside. Lock outside doors.
Threat Inside	Lockdown! Locks, Lights, Out of Sight!
Bomb	Evacuate to (location) Shelter for Bomb!
Earthquake	Shelter for Earthquake!
Fire Inside	Evacuate to the (location)
Hazmat	Shelter for Hazmat! Seal your Rooms
Weapon	Lockdown! Locks, Lights, Out of Sight!
Tornado	Evacuate to (location) Shelter for Tornado!



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After Section Resource Templates

The documents listed below relate to tasks discussed in the After section of the CMP Template. These actions support the recovery phase of emergency management.

Document Title	Type of Document
Essential Departments and Functions for Division Level	Checklist Template
Standard Reunification Method Info Card	Informational, Link to resources



Essential Departments and Functions for Division Level

Department	Essential Function	Person(s) Responsible (by Position Title)	0-24 Hours	2-3 Days	1 Week	Week 2-3	Week 4+
Business Office	Ensure payroll operations are functional		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Office	Ensure pending invoices are reconciled and paid		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Purchasing Department	Halt requisitions if closure is predicted to last longer than [one week]		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Purchasing Department	Halt/reroute deliveries if closure is predicted to last longer than [one week]		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Department	Determine Essential Duty Pay for employees required to report to work		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum/ Instruction	Review adjustments needed for state testing		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum/ Instruction	Prepare for remote learning transition		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum/ Instruction	Evaluate impact on Dual Credit/AP courses		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum/ Instruction	Evaluate impact on graduation, class rank, GPA		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum/ Instruction	Prepare for grading period processes (i.e., report cards, progress reports, etc.)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Department	Essential Function	Person(s) Responsible (by Position Title)	0-24 Hours	2-3 Days	1 Week	Week 2-3	Week 4+
Special Education	Prepare priority list for resuming accommodations		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special Education	Ensure remote services implementation		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special Education	Evaluate timeline of required services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communications	Prepare initial communication regarding division closure		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communications	Distribute emergency communications information to families		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communications	Update website and social media channels with closure information		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communications	Establish and activate phone bank (as needed)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance/ Facilities	Evaluate all facilities for priority needs		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance/ Facilities	Establish modified schedule of routine services (custodial, etc.)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance/ Facilities	Verify inventory of relevant supplies		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Department	Essential Function	Person(s) Responsible (by Position Title)	0-24 Hours	2-3 Days	1 Week	Week 2-3	Week 4+
Maintenance/ Facilities	Establish regular check in/reports for all facilities		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety & Security	Verify functionality of all security systems		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety & Security	Establish communication channels with local Emergency		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety & Security	Implement standards for building access		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student Support/ Counseling	Identify immediate needs to address		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student Support/ Counseling	Confirm resources available through community partners		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Services	Distribute medications from schools (as needed)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Nutrition	Establish plan for food distribution		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Nutrition	Identify staffing needs for distribution sites		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administration	Cancel school events		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Department	Essential Function	Person(s) Responsible (by Position Title)	0-24 Hours	2-3 Days	1 Week	Week 2-3	Week 4+
School Administration	Communicate expectations to staff regarding availability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administration	Monitor remote learning transition		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology	Ensure server systems are functioning		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology	Ensure security camera system is functioning		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology	Establish technology device checkout system (if needed)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office of Superintendent	Establish regular meetings with staff		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office of Superintendent	Establish regular internal communication schedule		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office of Superintendent	Obtain Board approval for any modified policies/procedures		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office of Superintendent	Establish regular external communication schedule		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Standard Reunification Method (SRM) Information Card

One card should be available for every student enrolled in the school. Additional SRM materials, including parent handouts in multiple languages, site setup signs, and procedure manuals, can be found on the [I Love U Guys Foundation website](http://www.loveuguyz.org).



Reunification Information

(PLEASE PRINT CLEARLY)

Have photo identification out and ready to show school district personnel.

Student Name
Student Grade Student Cell Phone Number
Name of person picking up student
Signature
Phone number of person picking up student
Relationship to student being picked up

School personnel completes:
Photo identification matches name
of person picking up student?
Yes or No

Parent/Guardian completes:

Print Student Name Again..... Student Grade
Teacher
Student Birthday

School personnel completes upon release of student

TIME INITIALS OTHER

*Fold in half
at this line*

Signature
Print Your Name
Date.....
Parent/Guardian Sign Off
I have read and understand these instructions.

Reunification Instructions

First, we want to thank you for your patience during this reunification. We share the same goal during this process: Getting you and your student back together as quickly as possible. The reason we're going through this is that an event has occurred at the school that mandates we personally reunite you with your child.

1. Please complete the information on the other side of this card.
2. Prepare identification (if you don't have ID with you, please move to the side of the line, it may take a little longer to verify your identity.)
3. Select the check-in line based on either student last name or student grade.
4. After check-in, staff will split this card and a runner will be sent to recover your student. Please step over to the Reunification Location.
5. If there has been injury or other concerns, you may be asked to meet a counselor.
6. Please don't shout at school or district staff. We'll get through this as quickly as possible.



Virginia Department of Criminal Justice Services
1100 Bank Street
Richmond, VA 23150
www.dcjs.virginia.gov