



## SCHOOL EMERGENCY PLAN

School Year 20\_\_\_\_–20\_\_\_\_

|                                                                                                                                                     |                                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>School Name:</b><br><br>Main Office Phone #:<br><br>FAX #:<br><br>Nextel Phone #:<br><br>Emergency Kit Cell Phone #:<br><br>High School Cluster: | <b>Principal:</b><br>Cell Phone #:<br>Address of School:<br><br><br>Student Start Time ____:____<br>Student Dismissal Time ____:____<br><b>Name of the person who completed this plan:</b><br>Date plan was submitted to DSSS for review/approval:<br>____/____/____ |
| <b>Community Superintendent:</b><br>Office Phone #:<br>Cell Phone#:                                                                                 | <b>Cluster Security Coordinator:</b><br>Cell Phone #:                                                                                                                                                                                                                |
| Number of students:                                                                                                                                 | Number of staff:                                                                                                                                                                                                                                                     |
| Campus size in acres:                                                                                                                               | Building square footage:                                                                                                                                                                                                                                             |
| Reviewed and approved by:                                                                                                                           | Approval date:                                                                                                                                                                                                                                                       |

### ICS CHAIN OF COMMAND, COMMAND TEAM, AND OSET POSITIONS

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

| Assignment                               | Full Name of Team Member | Name of Back-Up Team Member |
|------------------------------------------|--------------------------|-----------------------------|
| Incident Commander (principal/designee)  | 1.                       | 2.<br>3.                    |
| Operations Team Leader                   |                          |                             |
| Planning Team Leader                     |                          |                             |
| Logistics Team Leader                    |                          |                             |
| Finance/Administration Team Leader       |                          |                             |
| Recorder/Tracking Coordinator            |                          |                             |
| Student/Staff Accountability Coordinator |                          |                             |
| Parent/Child Reunification Coordinator   |                          |                             |

**COMMAND POST**

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

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

**Primary Location** \_\_\_\_\_ **Alternate Location** \_\_\_\_\_

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

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

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

| <b>Responsibility</b>                                                                            | <b>Name of Responsible Staff Member</b> |
|--------------------------------------------------------------------------------------------------|-----------------------------------------|
| Maintain emergency kit.                                                                          |                                         |
| Maintain emergency kit phone.                                                                    |                                         |
| Maintain the Nextel emergency phone.                                                             |                                         |
| Maintain the NOAA weather radio.                                                                 |                                         |
| Bring the emergency kit, the Nextel phone and the emergency kit phone when the school evacuates. |                                         |

**Location of Emergency Kit** \_\_\_\_\_

**Location(s) of First Aid Kit(s)** \_\_\_\_\_

**TYPES OF EVACUATION**

**Fire:** Evacuate at least **50 feet** from the building.

**Bomb Threat or Multi-hazard Threats:** Evacuate at least **300 feet** from the building.

**EVACUATION SITES**

|                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>On-Campus Multi-hazard Evacuation Locations</b> (i.e., athletic field, stadium, parking lot, playgrounds)                                                                                                          |  |
| <b>Primary Location</b>                                                                                                                                                                                               |  |
| <b>Alternate Location</b>                                                                                                                                                                                             |  |
| <b>Off-Campus Multi-hazard Evacuation Locations</b> (i.e., church parking lot, shopping center, another school, vacant field, cul-de-sac). During inclement weather, OSP should be contacted regarding special needs. |  |
| <b>Primary Location</b><br><i>(location/address/phone)</i>                                                                                                                                                            |  |
| <b>Alternate Location</b><br><i>(location/address/phone)</i>                                                                                                                                                          |  |

**STUDENT/STAFF ACCOUNTABILITY**

Students/staff must be accounted for during an emergency. Staff with computer access should use the Outlook private folder. If there is no access to a computer, other means should be employed to report attendance.

For high schools only: Open Lunch?  No  Yes Start/End Time \_\_\_:\_\_\_/\_\_\_:\_\_\_

## SAFE LOCATIONS

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

|    |
|----|
| 1. |
| 2. |
| 3. |

## MEDIA STAGING AREA

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

|                                                                                                   |  |
|---------------------------------------------------------------------------------------------------|--|
| <b>Off Campus</b> (i.e., nearby street, park, open area, commercial area) <i>location/address</i> |  |
|---------------------------------------------------------------------------------------------------|--|

## AREAS OF REFUGE (AOR)

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

### Location of AOR \_\_\_\_\_

Schools should identify students/staff with special needs and plan specifically for their needs.

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

## SCHOOL FLOOR PLAN (8½" x 11"—one page per floor)

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

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

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

Does your school have an emergency generator?  Yes  No If yes, location? \_\_\_\_\_

## PARENT/CHILD REUNIFICATION (PCR) PROCESS

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

**Name of Parent/Child Reunification Coordinator** \_\_\_\_\_

**Method(s) to Inform Parents/Guardians About the PCR Process** \_\_\_\_\_

**Name of Staff Person Who is Responsible for the PCR Box** \_\_\_\_\_

The PCR box is a file box, paper box, or similar container that can be easily recognized and labeled and should be kept near the school's emergency kit. The contents should include student schedules, MCPS Form 565-1; *Student Emergency Information*, preprinted PCR process logs, completed Authorization for Release forms, clipboards, pens, pencils, directional signs, and tape for hanging the signs. Additional materials may be needed for reunification, such as portable two-way radios, tables, and chairs.

### Guidelines for Implementing the Parent/Child Reunification Process

1. Post signs on entrance doors and hallways to direct parents/guardians to the PCR area.
2. Use available staff members to assist with the implementation.
3. Assign available staff members and OSET members to locate and release students.
4. Implement the *three-step approach*:
  - Step 1:* Use a parent/child reunification process log to sign in parents/guardians and check identification. If necessary, refer to the child's Authorization for Release form.
  - Step 2:* Use the current student database/schedule cards to locate the student's current teacher and room number.  
Give the assisting staff member the student's name, current teacher, and location.  
Staff member will retrieve the student and direct/escort him/her to the PCR area.
  - Step 3:* Release student to the authorized guardian.
5. Special procedures for students with custody concerns should include a document that identifies the specifics of the custody concerns.

**Location of Indoor, On-campus PCR Area** \_\_\_\_\_

**Location of Outdoor, On-campus PCR Area** \_\_\_\_\_

**Location of Off-campus PCR Area** \_\_\_\_\_

Phone number \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Address \_\_\_\_\_

| Step 1: Assignments/Tasks |            |
|---------------------------|------------|
| Name                      | Assignment |
| 1.                        |            |
| 2.                        |            |
| 3.                        |            |

| Step 2: Assignments/Tasks |            |
|---------------------------|------------|
| Name                      | Assignment |
| 1.                        |            |
| 2.                        |            |
| 3.                        |            |

| Step 3: Assignments/Tasks |            |
|---------------------------|------------|
| Name                      | Assignment |
| 1.                        |            |
| 2.                        |            |
| 3.                        |            |







## Relocatable Classroom(s)

MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland

This page must be attached to the school's emergency plan.

**School Name** \_\_\_\_\_

| <b>Relocatable Classroom #</b> | <b>Cell Phone #<br/>(if assigned)</b> |  | <b>Relocatable Classroom #</b> | <b>Cell Phone #<br/>(if assigned)</b> |  | <b>Relocatable Classroom #</b> | <b>Cell Phone #<br/>(if assigned)</b> |
|--------------------------------|---------------------------------------|--|--------------------------------|---------------------------------------|--|--------------------------------|---------------------------------------|
|                                |                                       |  |                                |                                       |  |                                |                                       |
|                                |                                       |  |                                |                                       |  |                                |                                       |
|                                |                                       |  |                                |                                       |  |                                |                                       |
|                                |                                       |  |                                |                                       |  |                                |                                       |
|                                |                                       |  |                                |                                       |  |                                |                                       |
|                                |                                       |  |                                |                                       |  |                                |                                       |
|                                |                                       |  |                                |                                       |  |                                |                                       |



## Joint Occupancy Users

MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland

This page must be attached to the school's emergency plan.

School Name \_\_\_\_\_

|                            |  |
|----------------------------|--|
| <b>Organization's Name</b> |  |
| Name of Person in Charge   |  |
| Phone Number               |  |
| Location in Building       |  |
| Days/Times on Site         |  |
| <b>Organization's Name</b> |  |
| Name of Person in Charge   |  |
| Phone Number               |  |
| Location in Building       |  |
| Days/Times on Site         |  |
| <b>Organization's Name</b> |  |
| Name of Person in Charge   |  |
| Phone Number               |  |
| Location in Building       |  |
| Days/Times on Site         |  |
| <b>Organization's Name</b> |  |
| Name of Person in Charge   |  |
| Phone Number               |  |
| Location in Building       |  |
| Days/Times on Site         |  |
| <b>Organization's Name</b> |  |
| Name of Person in Charge   |  |
| Phone Number               |  |
| Location in Building       |  |
| Days/Times on Site         |  |
| <b>Organization's Name</b> |  |
| Name of Person in Charge   |  |
| Phone Number               |  |
| Location in Building       |  |
| Days/Times on Site         |  |



## **Additional PCR Instructions/Concerns/Details**

MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland

This page must be attached to the school's emergency plan.

**School Name** \_\_\_\_\_