



Emergency Preparedness Plan

Approved by Board on April 6, 2023

Table of Contents

| | |
|---|----|
| Armed Intruder Incident | 1 |
| Assaults and Rape | 2 |
| Bombs and Bomb Threats | 3 |
| Bus Accidents..... | 4 |
| Death..... | 5 |
| Suicide Attempts/Threats | 8 |
| Suicide Attempt | 8 |
| Suicide Threat | 8 |
| Afterthoughts | 9 |
| Full Blown Emergencies | 10 |
| Closing of the School in Emergency Situation | 11 |
| Escaped Convicts/Manhunt | 12 |
| Evacuation and Designated Temporary Facilities..... | 13 |
| Fire | 14 |
| Debriefing Team Resource Materials..... | 15 |
| Debriefing Session Procedures | 15 |
| Stress and Trauma | 16 |
| The Crisis Reaction..... | 17 |
| Physical Response | 17 |
| Emotional Reaction..... | 17 |
| Trauma and loss..... | 17 |
| Trauma and Regression..... | 17 |
| Recovery from Immediate Trauma | 18 |
| Long-Term Crisis Reactions | 18 |
| Long-Term Traumatic Stress Reaction | 19 |
| Children's Reaction to Trauma | 20 |
| Child Reactions to Trauma | 22 |
| Some Coping Strategies for Children | 23 |
| Emergency Contacts/First Response Team | 24 |
| Hazardous Materials Incident..... | 26 |
| Incident Inside the Building..... | 26 |
| Incident Outside Building | 27 |
| National Emergency or Catastrophe..... | 28 |
| Medical Emergencies | 29 |
| Universal Precautions | 29 |

| | |
|---|----|
| Bee Sting..... | 29 |
| Bleeding..... | 29 |
| Cessation of Breathing/Choking Incidents | 30 |
| Convulsions/Epileptic Seizures | 30 |
| Drowning | 30 |
| Eye Injury - Chemical Burns | 31 |
| Eye Injury - Penetrating Injuries of the Eye..... | 31 |
| Insulin Reactions | 31 |
| Neck or Spinal Cord Injury (suspected) | 31 |
| Food Poisoning | 31 |
| Shock | 31 |
| Severe Weather | 33 |
| Severe Thunderstorm Watch | 33 |
| Severe Thunderstorm Warning | 33 |
| Tornado Watch | 33 |
| Tornado Warning | 33 |
| Blizzards/Winter Storms..... | 34 |
| Utility Emergencies | 35 |
| Gas Line Break | 35 |
| Electric Power Failure..... | 35 |
| Water Main Break..... | 35 |
| Sudden Damage to Facility | 35 |
| Vandalism or Break-in..... | 36 |
| Communications During Crisis..... | 37 |
| Crisis Communication Plan..... | 38 |

Armed Intruder Incident

Calm is key.

During the Incident:

1. Notify the Main Office of the threat.
2. Main Office calls 911.
3. Alert staff using the following code:

Staff is reminded Form 100 is due to the office immediately.

4. Staff and students remain in the classroom with doors locked unless otherwise directed.
5. Give law enforcement the following information:
 - a. Number of people involved.
 - b. Type(s) of weapon(s) involved.
 - c. Where the intruders are within the building or on the grounds.
 - d. Number of injuries, if any.
 - e. Number of hostages, if any.
 - f. Description of the people involved.
 - g. Any other information that might help law enforcement.
6. Notify the Executive Director.

Do not talk to the news media during the incident.

Phone conversations could lead intruders directly to your location.

7. If you are personally confronted by a violent intruder:
 - a. Remain calm.
 - b. Do as the intruder says and do nothing to agitate him/her. The first moments of this type of situation are extremely dangerous. Cooperate fully.
 - c. Do not talk to the intruder unless spoken to, then respond in a calm tone. Do not volunteer any information, but also do not lie to the intruder.

After the Incident

These types of incidents can cause great emotional distress and traumatic stress. Provide debriefing and follow-up support for all students and staff touched by this incident.

Assaults and Rape

In the event of a physical assault or rape, school staff must initially respond to this incident as a medical emergency.

1. Apply first aid but be careful not to clean away potential evidence.
2. Call law enforcement - 911.

The Executive Director, designee or staff should take the following steps:

1. Make sure law enforcement has been notified.
2. Notify the Executive Director.
3. Check for:
 - a. The emergency card is on file if the victim is a student.
 - b. The personnel emergency card is on file if the victim is a staff member.
 - c. Provide immediate assistance for rape victim, if specifically trained staff member is present.
4. Notify the Board Chair or Executive Director, if not already done.
5. Accompany the victim to a medical facility or law enforcement offices.

Bombs and Bomb Threats

Bomb threats may be received through several channels: telephone, face-to-face contact, written notes, e-mail, and other means. They must all be taken seriously.

ALL bomb threats are to be reported to law enforcement as soon as they are discovered.

When you learn of a bomb threat:

1. Call 911 immediately. Consult with law enforcement, then decide if your building will be immediately evacuated.

2. Use Overhead intercom to notify staff. Saying:

Please evacuate the building due to utility concerns.

3. Have someone call the telephone company [Frontier Communications 1-800-921-8106 or Midcontinent 1-800-888-1300] and ask them to trace the call.

4. Notify the Executive Director.

5. Preserve the phone call message, e-mail or other communication for future investigation.

DO NOT TOUCH ANYTHING SUSPICIOUS

6. The building will not automatically be evacuated.

7. Any decision to evacuate the building will be made by the Executive Director based on the amount/characteristics of information received and any additional information received from the law enforcement department.

8. Fire alarms can be used to evacuate the building.

Bus Accidents

Unless a bus accident occurs immediately outside the school building, you will find out about this type of incident from any number of sources.

In the event of a bus accident:

1. Assign a staff person to the accident site. This person should:
 - a. Bring a cellular phone, the bus roster, and the student directory.
 - b. Gather information and act as your liaison at the scene.
 - c. Call with information whenever new information is made available.
2. If injured students are transferred to a medical facility, assign a staff person to the hospital.
3. Notify Executive Director.
4. If you decide to be at the scene, designate at least two persons to complete the tasks outlined below:
 - a. Determine the extent of injuries, deaths, number of students transported to medical facilities, number of students who will continue traveling to school/home.
 - b. Log calls coming into your office about this incident.
 - c. Designees will notify parents of injured students and let them know where the students are being taken.
 - d. Law enforcement notify parents in case of death.

Death

INTRODUCTION

When someone connected with the school dies, the school is confronted with several immediate challenges:

1. verifying the incident.
2. managing information inside and outside the school.
3. protecting the privacy of the family.
4. helping students and staff cope with the death.
5. bringing the resources of the community to bear on the problem.
6. minimizing the possibility that others may imitate harmful behaviors.

The first 48 hours are crucial

IMMEDIATE ACTION

1. Verify the death and call 911.
2. Notify the Executive Director and Board Chair.
3. Prepare and use a concise statement with students, staff, family, and the public

Respond to media calls only after the first three steps have been completed. Contact the Executive Director or Board Chair to respond to the media. Do not allow media access to students and staff until a formal plan is in place.

CAUTIONS

1. Only use the word "death." Do not use the word "suicide" or "murder."
2. Use only information already released by the law enforcement or medical director at hospital.
3. Do not provide information about the school's response to the incident.
4. Never guess/speculate about details.
5. Never hypothesize.

FOLLOW-UP ACTION

1. Update statements, as needed.
2. Use the Debriefing Team, as needed.
3. Draft a letter to parents and send it home, as appropriate.

FOLLOW-UP RESOURCES

1. The Debriefing Team: In consultation with the Executive Director, the role of this team is to:
 - a. Assist in the mobilization of the first response team.
 - b. Provide brief crisis response training/refresher.
 - c. Identify high-risk groups in need of group crisis intervention sessions (victims/survivors, parents, students, emergency responders, etc.).
 - d. Hold intervention sessions for each group (one-to-two-hour sessions).
 - e. Facilitate debriefing sessions for the first response team.
 - f. Other duties assigned by the Executive Director.
2. Make counselors available to students and provide rooms for students to meet in small groups.
 - a. Counselor will visit classrooms of the students to talk with students and answer questions.
 - b. Another counselor visits the classrooms of the siblings.
 - c. Establish a crisis room (staffed at all time and staff prepared to allow students access)
3. Help students:
 - a. Students must have an opportunity to express their confusion and grief in a safe, supportive environment.
 - b. They must be reassured that they are in the company of caring professionals. The death of a classmate may leave survivors with feelings of abandonment and rejection. The tendency to blame, common after any death, is always in evidence following a suicide.
 - c. Attempted suicides and completed suicides also increase after stories about suicide appear in newspapers or on television. Imitation by adolescents is common, and teachers must be cautious about discussing suicide with any young person.
 - d. If you learn about the death late in the school day, do not allow the students or staff to leave the building without informing them about the death and offering help. Be prepared for the fact that students will stream into the halls after the announcement of a death crying or sobbing uncontrollably. Have a plan for students to meet with counselors and others to discuss the death.
 - e. Arrange meetings for students who may be deeply affected by the death. Meet in small groups. Do not allow peer counselors to conduct these meetings. Have a professional present in every room. Ask, "Are there any others who should be invited?" Encourage students to express their feelings. Recognize the various stages of bereavement and recovery: denial, anger, acceptance, and resolution. Help students work through these stages.
 - f. Avoid isolated discussions of suicide. Identify healthy coping strategies available to young people and emphasize the futility of suicide as an option. Do not dramatize the death, and

do not dwell on the details of how the student took his or her life. Be as truthful as possible. Help students understand the importance of protecting the privacy of the family.

- g. Team should discuss staff and students who are at risk for reactions--i.e. those who may have experienced recent personal loss--and determine a support system.

4. Contact Community Resources

- a. Specify procedures for establishing contact with officials of local agencies who may be called on for help. Designate a person who is responsible for initiating and maintaining contact with various community agencies.
- b. Ask student personnel specialists and the community who are members of the School Crisis Network (for example, clergy, counselors, psychologists, social workers) to assist you and your staff in working with students and parents.

5. Hold Faculty Meeting after school (Day 1)

6. Funeral (announce funeral arrangements when they become known, with permission of family)

7. Hold small group meetings for students (Day 2)

8. Follow-up Plan – Team should meet to determine if the following are needed:

- a. Parent information session and how to meet students' concerns regarding the incident.
- b. Grief course.
- c. Grief groups for students.

9. Team members may want to visit with the family several weeks later.

Suicide Attempts/Threats

These procedures are intended to provide a planned, consistent response in situations involving suicide to maximize the safety and well-being of the student. Any suicide threat, gesture or statement must never be treated lightly. It is the responsibility of all staff in each building to immediately follow these procedures regardless of confidentiality. Information cannot be taken in confidence if student safety is involved.

Suicide Attempt

1. Suicide Attempt Resulting in Physical Injury
2. Treat first as a medical emergency (see Medical Emergencies section). Then follow the procedures outlined below.
3. Suicide Attempt Resulting in No Physical Injury
4. Report the suicide threat, gesture, etc. to the principal, providing available information regarding the student and incident.
5. The Executive Director will designate a person(s) to handle the suicide situation, i.e., school psychologist, social worker or counselor.
6. The designated person(s) will interview the student as soon as possible following the report.
7. If the student is IMMEDIATELY SUICIDAL - Emergency Intervention MUST BE IMPLEMENTED:
8. Evaluate the risk. Ask straightforward questions. Give emotional support.
9. Staff stay with students unless there is a direct threat to staff safety.
10. Send someone to notify the Executive Director.
11. The Executive Director will call 911 or direct other staff to call.
12. The Executive Director or designated staff will call Washington County Mental Health Crisis Response Unit at 651-275-7400 or text 988.
13. The Executive Director or designee will contact the parent.
14. NEVER LEAVE A STUDENT in this state alone or allow them to return home without parental notification and support.

Suicide Threat

1. Call parent(s) to arrange for immediate assessment by an outside agency.
2. If parents are uncooperative or unavailable, the Executive Director calls an outside agency.
3. Document the incident in writing, providing student identification and data, a summary of the incident and the disposition of the situation.
4. Consider referral to a child psychologist.
5. If there is Need for REFERRAL:
6. The Executive Director will call parent(s), keeping in mind it is the school's responsibility to inform, and the parent's responsibility to act.
7. Help parents arrange an appointment with an appropriate agency, only if the parent is unable or asks for assistance.
8. If parents are uncooperative, or emotionally unable to respond, report the case to Social Services or Crisis Intervention, as per Minnesota mandate.
9. Document the incident in writing, providing student identification and data, a summary of the incident and the disposition of the situation.
11. Consider referral to a child psychologist.
12. At the Executive Director's discretion, discuss student concerns with appropriate staff members.

Afterthoughts

The final determination of whether a death is suicide is often a complex legal matter, regardless of notes that may have been left or other evidence discovered after the death. A coroner may rule the death an accident, even though much of the evidence suggests suicide. Coroners and law enforcement investigators are aware that considerations and emotional stability in the family may be involved.

WHAT NOT TO DO:

1. Do not allow anyone to describe the suicide as a heroic act.
2. Do not fly the school flag at half-mast.
3. Do not observe a moment of silence in school.
4. Do not have a memorial service at school or an "In Memoriam" page in the yearbook.
5. Do not glorify the death in any way.

WHAT TO DO:

1. Decide, before you are asked, if you are willing to deliver a eulogy at the funeral. What you say at such a gathering can have a great impact, in positive or negative ways.
2. The death of a young person from any cause is saddening; death by suicide is tragic. Emphasize that there are other options than taking one's own life.

By the third day, try to get things back to normal. But be sensitive to the fact that certain students may have been profoundly affected by the death. These students need special help.

Full Blown Emergencies

Preventing possible disturbances, with open lines of communications to students, staff, parents, and community, is essential. The Executive Director is in complete charge of the school. If the Executive Director is not available, contact the Board Chair.

The following procedures should be considered only in case of full-blown emergencies. The administrative staff should assess the situation to determine its seriousness and its effect on the safety of students and staff before taking any action.

1. Notify the Executive Director and/or the Board Chair.
2. Notify the law enforcement at 911 if necessary.
3. Normal classroom operations are to be maintained as much as possible and all students should be encouraged to stay in the building.
4. The Chair of the facilities committee are responsible for building security.
5. The Executive Director decides if doors will be unlocked.
6. All other staff will remain in their assigned duties unless specifically reassigned by administrative staff.
7. If the media is involved, contact the Executive Director and Board Chair.

Closing of the School in Emergency Situation

Only the Executive Director can authorize the closing of a school.

If the decision is made to close a school:

1. Inform law enforcement.
2. Inform parents as quickly as possible through designated communications media.
3. Inform all students and staff and the board.
4. Staff will supervise dismissals.
5. Bus transportation, if needed.

Escaped Convicts/Manhunt

The state notifies Washington County Sheriff's Department which advises the schools on how to keep students and staff safe.

1. Contact Executive Director
2. Secure all outside doors.
3. Keep students inside the building. Do not let students use the playground or athletic field.
4. Work with law enforcement to determine if students should be detained or released for the day.
5. If it is near dismissal time, notify teachers of the situation via messenger or telephone.

FOR IMMEDIATE ACTION

Please secure all students in the classroom and lock doors until you receive the "all clear" message.

We have just been informed that an escaped convict is in the vicinity of our school. Law enforcement is now conducting a manhunt nearby.

You will be notified if additional action is required.

Evacuation and Designated Temporary Facilities

EVACUATION PARAMETERS

It is the responsibility of the Executive Director to determine the evacuation facilities to be used and make the necessary arrangements with the appropriate individuals for possible emergency use. Transportation may be provided, if necessary, between the school being evacuated and the final evacuation site. Most schools will not require such transportation if the final holding site is within walking distance of their school building. Also, if the weather permits, the school grounds will be used as a temporary holding site.

DESIGNATED TEMPORARY FACILITIES

Your Building Name: Marine Village School

Temporary Facility: Gymnasium (another area of the school building, athletic field, parking lot, buses)

Alternative Site: Christ Lutheran Church , 150 Fifth Street. 651-433-3222

Evacuation Instructions: Walk down the alleyway between 5th and 6th street to the Church.

(Assembly points, number of adults and students, order of groups taken)

Fire

On discovery of fire when school is in session, proceed according to the following plan:

1. If necessary, sound the fire alarm or call 911.
2. Evacuate the building according to a practiced plan.
3. Notify the Executive Director.
4. Staff will perform a head count once a safe distance has been reached to account for class members.

On discovery of fire when school is not in session, proceed according to the following plan:

1. Sound the fire alarm. Call 911.
2. Evacuate the building according to plan.
3. Notify the Executive Director, if possible.
4. Notify the Board Chair, if possible.

Possible False Alarms:

1. Follow the same procedure except when notifying the fire department; indicate one of the two situations:
 - a. "An alarm has been sounded at Marine Village School. We do not know if there is an actual fire. Please stand by."
 - b. "The fire alarm has sounded at Marine Village School. We know it was a false alarm. We do not need your services at this time but are simply reporting the alarm as required by the State Fire Marshal's Office."
 - c. Re-occupancy of the Building:
 - i. The buildings may not be reoccupied in the event of a drill or possible false alarm until an "all clear" is sounded by the Executive Director or designated representative (have the Fire Chief give the "all clear" signal if possible).
 - ii. If the fire alarm is still sounding, the building may not be reoccupied.
 - iii. In the event of an actual fire, the fire chief or fire official must give instructions as to re-occupancy.

Fire Drills:

1. A minimum of nine fire drills are required each year.

Debriefing Team Resource Materials

ROLE OF THE DEBRIEFING TEAM

In consultation with crisis coordinator:

1. Assist in the mobilization of the First Response Team.
2. Provide brief crisis response training/refresher.
3. Identify high risk groups in need of group crisis intervention sessions (victims/survivors, parents, students, emergency responders, etc.).
4. Hold intervention sessions for each group (1-to-2-hour sessions)
5. Facilitate debriefing sessions for the crisis response team.
6. Other duties assigned by the Executive Director

Debriefing Session Procedures

GOAL: To establish feelings of safety and security. Opening Statement: i.e., "I am sorry this tragedy happened to you."

Clarify Purpose of Debriefing:

1. an opportunity to share reactions and feelings about the event,
2. to discuss the impact, it is having on your life,
3. to receive accurate information about the event, and
4. to predict and prepare for possible future events.

Explain Ground Rules:

1. confidentiality of communication,
2. permission for all to express feelings,
3. permission to not speak to media

Ask the Questions:

1. Tell about your experience during the event
2. where were you when it happened?
3. who were you with?
4. what did you see, hear, smell, taste, or touch at the time?
5. what did you do? How did you react at the time?
6. What happened to you in the aftermath?
7. since the disaster, what are some of the memories that stand out in your mind?
8. what has happened in the last_ hours?
9. how have you reacted?
10. Think about what will happen in the next few days or weeks
11. what do you think will happen at your school/job in the next few days or weeks?
12. do you think that your family has been or will continue to be affected?
13. do you have any practical concerns about what will happen next?

Close the Session:

1. Thank the group for participating.
2. Repeat, "I am sorry that this tragedy happened to you."
3. Give participants appropriate handouts and community resources.
4. Indicate that the session is over, but the team will remain for questions.

Stress and Trauma

Your Day-to-Day Life, individuals exist in a normal state of "equilibrium" or balance.

That emotional balance involves everyday stress, both positive and negative - like being late to work, getting a promotion, having a flat tire, getting ready for a date, or putting the children to bed.

Occasionally, stress will be severe enough to move an individual out of his or her normal state of equilibrium, and into a state of depression or anxiety, as examples.

But most people most of the time stay in a familiar range of equilibrium.

When Trauma Occurs

Trauma throws people so far out of their range of equilibrium that it is difficult for them to restore a sense of balance in life.

Trauma may be precipitated by stress: "acute" or "chronic."

Acute stress is usually caused by a sudden, arbitrary, often random event.

Chronic stress is one that occurs repeatedly - each time pushing the individual toward the edge of his state of equilibrium, or beyond.

Most trauma comes from acute, unexpected stressors such as violent crime, natural disasters, accidents or acts of war.

Some trauma is caused by quite predictable (but hated) stressors such as the chronic abuse of a child, spouse, or elderly abuse.

"Developmental crises" come from transitions in life, such as adolescence, marriage, parenthood, and retirement.

Though like acute stress, chronic and developmental crises have significant differences not covered in this review.

The Crisis Reaction

The normal human response to trauma follows a similar pattern called the crisis reaction. It occurs in all of us.

Physical Response

1. The physical response to trauma is based on our animal instincts. It includes:
2. Physical shock, disorientation, immobilization, and numbness: "Frozen Fright. "
3. "Fight-or-Flight" reaction (when the body begins to mobilize).
4. Adrenaline begins to pump through the body.
5. The body may relieve itself of excess materials by urinating, regurgitating, or defecating.
6. Physical senses - one or more may become more acute while others "shut down."
7. The heart rate increases, and one may hyperventilate, sweat, etc.
8. Exhaustion: physical arousal associated with fight-or-flight cannot be prolonged indefinitely. Eventually, it will result in exhaustion.

Emotional Reaction

Our emotional reactions are heightened by our physical responses.

1. Stage one: shock, disbelief, denial
2. Stage two: cataclysm of emotions - anger/rage, fear/terror, sorrow/grief, confusion/frustration,
3. self-blame/guilt
4. Stage three: reconstruction of equilibrium - emotional roller coaster that eventually becomes balanced, but never goes back to what it was before the crisis - a new sense of equilibrium will be developed.

Trauma and loss

Trauma is accompanied by a multitude of losses:

1. Loss of control over one's life
2. Loss of faith in one's God or other people
3. Loss of a sense of fairness or justice
4. Loss of personally-significant property, self or loved ones
5. Loss of a sense of immortality and invulnerability
6. Loss of future

Because of the losses, trauma response involves grief and bereavement. One can grieve over the loss of loved things as well as loved people.

Trauma and Regression

1. Trauma is often accompanied by regression - mentally and physically.
2. Individuals may do things that seem childish later. Examples include:
3. Singing nursery rhymes.
4. Assuming a fetal position or crawling instead of walking.
5. Calling a law enforcement officer or other authority figure "mommy" or "daddy" - or at least thinking of them that way.

Individuals may feel childish. Examples include:

1. Feeling "little."
2. Wanting "mommy" or "daddy" to come and take care of you.
3. Feeling "weak."
4. Feeling like you did when you were a child and something went terribly wrong.

Recovery from Immediate Trauma

Many people live through a trauma and can reconstruct their lives without outside help. Most people find some type of benign outside intervention useful in dealing with trauma.

Recovery from immediate trauma is often affected by:

1. Severity of crisis reaction
2. Ability to understand what happened
3. Stability of victim's/survivor's equilibrium after event
4. Supportive environment
5. Validation of experience

Recovery issues for survivors include:

1. Getting control of the event in the victim's/survivor's mind.
2. Working out an understanding of the event and, as needed, a redefinition of values.
3. Re-establishing a new equilibrium/life.
4. Re-establishing trust.
5. Re-establishing a future.
6. Re-establishing meaning.

Long-Term Crisis Reactions

Not all victims/survivors suffer from long-term stress reactions.

Many victims continue to re-experience crisis reactions over long periods of time.

Such crisis reactions are normally in response to "trigger events" that remind the victim of the trauma. They can bring back the intense emotion that occurred with the original trauma.

"Trigger events" will vary with different victims/survivors, but may include:

1. Identification of the assailant in, say, a law enforcement lineup.
2. Sensing (seeing, hearing, touching, smelling, tasting) something similar to something that one was acutely aware of during the trauma.
3. "Anniversaries" of the event.
4. The proximity of holidays or significant "life events."
5. Hearings, trials, appeals or other critical phases of the criminal justice process.
6. News reports about a similar event.

Long-term stress or crisis reactions may be made better or worse by the actions of others. When such reactions are sensed to be negative (whether or not they were intentional), the actions of others are called the "second assault" and the feelings are often described as a "second injury."

Sources of the second assault may include:

1. the criminal justice system
2. the media
3. family, friends, acquaintances
4. hospital and emergency room personnel
5. health and mental health professionals
6. social service workers
7. victim service workers
8. schools, teachers, educators
9. victim compensation system

10. clergy

The intensity of long-term stress reactions usually decreases over time, as does the frequency of the re-experienced crisis. However, the effects of a catastrophic trauma cannot be "cured. "

Even survivors of trauma who reconstruct new lives and who have achieved a degree of normality and happiness in their lives - and who can honestly say they prefer the new, "sadder-but-wiser" person they have become - will find that new life events will trigger the memories and reactions to the trauma in the future.

A simpler way to view long-term stress reactions is to think of them as crisis reactions that repeat themselves, in large part due to trigger events that remind the victim/survivor of the trauma.

Long-term stress or crisis reactions may be exacerbated or mitigated by the actions of others. When such reactions are exacerbated, the actions of others are called the second assault and the feelings are often described as a second injury.

Long-term crisis reactions tend to become less frequent and less severe as time passes, but in some victims, due to the severity of the trauma, they may last a lifetime.

Long-Term Traumatic Stress Reaction

When someone survives a catastrophe, they often experience stress reactions for years.

Long-term stress reactions are natural responses of people who have survived a traumatic event.

Long-term stress reactions are most often a result of imprinted sensory perceptions and reactions in the brain and body.

Long-term stress reactions are not always pathological, nor do they necessarily require intensive mental health interventions.

The most common types of long-term stress reactions include:

1. Post-Traumatic Character Changes
2. Post-Traumatic Stress Reactions
3. Post-Traumatic Stress Disorder (PTSD)
4. Re-experiencing the event both psychologically and with physiological reactivity.
5. Intrusive thoughts
6. Nightmares and distressing dreams
7. Flashbacks
8. Numbing, avoidance, and isolation
9. avoidance of thoughts or activities that remind one of the events
10. avoidance of previous habits or pleasurable activities that the individual engaged in before the event
11. estrangement and isolation
12. reduced affect or feelings of "emotional anesthesia"
13. partial amnesia
14. a sense of foreshortened future
15. Behavioral arousal
16. inability to concentrate
17. insomnia or interrupted sleep patterns
18. flashes of anger or irritability
19. startle reactions or hyper alertness
20. Duration of symptoms last for one or more months
21. The trauma reactions and symptoms impair functioning
22. Acute Stress Disorder (ASD)
23. Adjustment Disorder

24. Complex PTSD or Diagnosis of Extreme Stress Not Otherwise Specified (DESNOS)
25. Symptoms may occur in persons who have survived complex, prolonged or repeated traumas during which they have been subjected to coercive control. Such control may be imposed through violence or threat of violence, control of bodily functions, capricious enforcement of petty rules, intermittent rewards, isolation, degradation, or enforced participation in the violence.
26. Depression
27. Simple Phobias
28. Panic Disorder
29. Anxiety Disorder

It is not important to know all the symptoms for the stress reactions mentioned above. If you become concerned about your reactions or how long they last, it is useful to talk to a mental health professional who is a specialist in working with people who have experienced traumatic events.

Children's Reaction to Trauma

Caveats about Children

Regression

Double Loss

Live in Present

Growth

Change

Developmental Stages of the Child

Age: Birth - 2 Years

Language capability: preverbal.

Communication mode: physical activity.

Thought processes:

1. Distinguishes self from others and other things.
2. Growth emphasis: sensory perception and response.
3. Primary need: physical human contact for reassurance.
4. Primary relationship: with caretaker(s).

2 Years - 6 Years: Pre-School

Language capability: development of language/verbal expression.

Communication mode: expression of feelings primarily through play, but communication of needs often through words.

Thought processes:

1. pre-conceptual thinking but engages in primitive problem-solving
2. active imagination but grounded in reality - fantasies are about things similar to those they have experienced
3. minimal concept of time and space
4. inability to concentrate on any one thing for more than a few minutes
5. Growth emphasis: physical independence; dressing, feeding, and washing self.
6. Primary need: need for nurturing.
7. "Who will take care of me?"
8. wants structure and security
9. Primary relationship: with family.

6 Years - 10 Years: School Age

Language capability: language well developed.

Communication mode: still uses play for primary expression but supplements play with emotive language.

Thought processes:

1. uses problem-solving techniques but also trial and error approach to problems
2. understands time and space concepts
3. strong orientation to the present but has some sense of future and past
4. makes choices

Growth emphasis: toward independence in establishing new relationships.

1. Primary need: trust.
2. Primary relationship: still family but movement toward establishing strong peer relationships.

10 Years -12 Years: girls' pre-adolescence 12 Years -14 Years: boys' pre-adolescence

Language capability: language may be more advanced than concepts.

Communication mode:

1. "acting out" is a common form of expression; poetry developing.

Thought processes:

1. prone to extreme feelings and idealized emotions or lifestyles
2. judgmental about the world and self
3. thoughts become integrated with feelings and engender beliefs, biases, and prejudices

Growth emphasis:

1. towards emotional independence: involves mood swings back and forth from childlike states to imitations of adult life
2. growth of sexuality and concern with sexual identities
3. emotional turmoil heightened by physical changes
4. Primary need: support and self-esteem.'
5. Primary relationship: back and forth from family to peers.

12/14 Years -Adult

Language capability: uses and creates language to express self.

Communication mode: drama and physical activity is preferred recreation since it provides a socially accepted way of acting out feelings; poetry is still intense.

Thought processes:

1. understands "cause and effect"
2. can consider possibilities and explore options without experiencing them
3. judgmental about everything - sees things in black and white
4. can conceive of future activities but does not think of future in terms of self - the Peter Pan dream
5. prone to taking irresponsible risks and failing to think through the consequences of actions
6. reflection on symbols and possibilities
7. decentering
8. development of critical faculties
9. emotional turmoil may include periods of depression and euphoria
10. Growth emphasis: independence from adult world - particular target of conflict is usually parents
11. ego-orientation and self-centeredness
12. feels strong need for privacy and secrecy
13. body and sexual image are highly important
14. sense of immortality
15. creation of dance, style, world
16. Primary need: stability, limits and security.

Primary relationship:

1. peers.

Child Reactions to Trauma

Overview: Children's reaction to a trauma will involve not only the impact of the catastrophe on their lives (what they saw, heard, felt, smelled and so on), but a sense of crisis over their parents' reactions. The presence or absence of parents and terror over a frightening situation - one that has rendered the children's parents helpless - all contribute to children's distress.

"A central theme that emerges from exploration of children's responses to disaster situations is that, in a way that is not generally appreciated, they, too, experience fear of death and destruction... Particularly influential in the young child's experience are the presence or absence of parents and the terror of overwhelming physical forces that seem to render the 'all powerful' adult parents frightened and powerless."

Birth - 2 Years

High anxiety levels manifested in crying, biting, throwing objects, thumb sucking, and agitated behavior. While it is unlikely that the child will retain a strong mental memory of the trauma, the child may retain a physical memory.

2 Years - 6 Years: pre-school

Children may not have the same level of denial as do adults, so they take in the catastrophe more swiftly. Engage in reenactments and play about the traumatic event - sometimes to the distress of parents or other adults. Anxious attachment behaviors are exhibited toward caretakers - may include physically holding onto adults, not wanting to sleep alone, wanting to be held. May become mute, withdrawn and still. Manifest a short "sadness span" but repeat sadness periods over and over. Regress in physical independence - may refuse to dress, feed, or wash self; may forget toilet training; may wet bed. Sleep disturbances, particularly nightmares, are common. Any change in daily routines may be seen as threatening. Does not understand death (no one does) and its permanency - reaction to death may include anger and a feeling of rejection.

6 Years – 9 Years: school age

Play continues to be the primary method of expression. Often art, drawing, dance or music may be integrated in the play. The sense of loss and injury may intrude on the concentration of the child in school. Radical changes in behavior may result - the normally quiet child becoming active and noisy; the normally active child becoming lethargic. May fantasize about an event with a "savior" ending. Withdrawal of trust from adults. May become tentative in growth towards independence. Internal body dysfunctions are normal - headaches, stomach aches, dizziness. May have increasing difficulty in controlling their own behaviors. May regress to previous development stages.

10 Years -12 Years: girls' pre-adolescence 12 Years -14 Years: boys' pre-adolescence

Become more childlike in attitude. May be very angry at the unfairness of the disaster. May manifest euphoria and excitement at survival. See symbolic meaning to pre-disaster events as omens and assign symbolic reasons to post- disaster survival. Often suppress thoughts and feelings to avoid confronting the disaster. May be judgmental about their own behavior. May have a sense of a foreshortened future. May have a sense of meaninglessness or purposelessness of existence. Psychosomatic illnesses may manifest themselves.

12/14 Years -18 Years

Adolescents most resemble adult post-traumatic stress reactions. May feel anger, shame, betrayal and act out their frustration through rebellious acts in school. May opt to move into the adult world as soon as possible - to get away from the sense of disaster and to establish control over their environment. Judgmental about their own behavior and the behavior of others. Their survival may contribute to their sense of immortality. They are often suspicious and guarded in their reaction to others in the aftermath. Eating and sleeping disorders are common. Depression and anomie may plague the adolescent. May lose impulse control and become a threat to other family members and him/herself. Alcohol and drug abuse may be a problem as a result of the perceived meaninglessness of the world. Fear that the disaster or tragedy will repeat itself adds to the sense of a foreshortened future. May have psychosomatic illnesses.

Some Coping Strategies for Children

Rebuild and reaffirm attachments and relationships. Love and care in the family is a primary need. Extra time should be spent with children to let them know that someone will take care of them and, if parents are survivors, letting them know that their parents have resumed their former role as protector and nurturer is important. Physical closeness is needed.

It is important to talk to children about the tragedy - to address the irrationality and suddenness of disaster. Children need to be allowed to ventilate their feelings, as do adults, and they have a similar need to have those feelings validated. Reenactments and play about the catastrophe should be encouraged. It may be useful to provide them with special time to paint, draw, or write about the event. Adults or older children may help pre- school children reenact the event since pre-school children may not be able to imagine alternative "endings" to the disaster and hence may feel particularly helpless.

Parents should be prepared to tolerate regressive behaviors and accept the manifestation of aggression and anger especially in the early phases after the tragedy.

Parents should be prepared for children to talk sporadically about the event - spending small segments of time concentrating on particular aspects of the tragedy.

Children want as much factual information as possible and should be allowed to discuss their own theories about what happened in order for them to begin to master the trauma or to reassert control over their environment.

Since children are often reluctant to initiate conversations about trauma, it may be helpful to ask them what they think other children felt or thought about the event.

Reaffirming the future and talking in "hopeful" terms about future events can help a child rebuild trust and faith in his own future and the world. Often, parental despair interferes with a child's ability to recover.

Issues of death should be addressed concretely.

Emergency Contacts/First Response Team

PURPOSE

The First Response Team is established to respond to emergencies that may occur involving students, staff or visitors to our schools. This may include situations where health or life are threatened.

TEAM COMPOSITION

Team size may vary. Suggested members include building principal/supervisor, the school secretary, an administrator, security, psychologist, teacher, paraprofessional, counselor and health professional. (A list of First Response Teams follows.)

GENERAL GUIDELINES

1. Principal/designee is called to the area where help is needed.
2. Principal/designee will survey the scene and send someone to alert the First Response Team.
3. Secretary will make an all-call throughout the building, sending the First Response Team to a specific area.
4. Secretary will call 911, if appropriate.
5. Principal/designee will be the emergency response coordinator.
6. One team member will be asked to notify:
 7. Superintendent
 8. Deputy Superintendent
 9. Communications Coordinator

ROLE OF THE FIRST RESPONSE TEAM

Building principal/supervisor: The crisis coordinator and the immediate media spokesperson.

Security: Respond to initial utility needs, lock doors as directed, secure affected areas as directed, and refer all questions to the crisis coordinator.

Medical: Provide immediate first aid, serve as liaison with community medical responders, access necessary medical records and make recommendations for medically fragile staff/students, and other duties as assigned by the crisis coordinator.

Clerical: Handle initial phone calls into the building, make outgoing calls as directed by the crisis coordinator, access student records as appropriate, provide crisis coordinator with any observed patterns of questions and comments coming into the school, and distribute crisis updates as directed by the crisis coordinator.

Debriefing Team: In consultation with crisis coordinator - Provide brief crisis response training/ refresher, identify high-risk groups in need of intervention sessions (victims/survivors, parents, students, emergency responders), hold intervention sessions for each group (one- or two-hour sessions), facilitate debriefing sessions for First Response Team, and other duties as assigned by the crisis coordinator.

FIRST RESPONSE TEAM EVALUATION

1. List major problems encountered.
2. Identify reasons for each of these problems/obstacles.
3. Identify those steps or systems that worked well.
4. What should be done differently in the future?
5. Identify major issues connected with the actual crisis and/or the ability to respond well to the emergency.
6. Identify the responsible party and deadline for each action item outlined in the previous steps.

Hazardous Materials Incident

Incident Inside the Building

In the event of a hazardous materials incident, building occupants will notify the principal.

Notify the fire department at 911. The principal will determine the need to evacuate the building. That determination will be based on information from the hazardous material's Material Safety Data Sheet (MSDS) and/or recommendations from local fire department personnel.

If it is necessary to evacuate the building, avoid areas involved in the incident when exiting.

If evacuation is not ordered, be aware of changing health conditions of students and staff, particularly respiratory problems. If burns or blisters are encountered during hazardous material contact:

1. Have someone call for an ambulance - 911.
2. For chemical burns to skin or eyes, flush burn with large amounts of water (15 to 20 minutes).
3. If only one eye has been affected, flush from the nose outward to prevent contaminating the other eye.
4. Have the victim take off any contaminated clothing.
5. Apply sterile dressing.
6. If extensive, have the victim lie down with legs elevated EXCEPT FOR FACIAL BURNS.
7. For extensive facial burns, sit or prop the victim up. Observe breathing difficulty.
8. Do not immerse in or apply ice water. Apply cold packs to hands, face or feet if necessary.
9. Bandage loosely with dry, clean dressing.
10. Don't put ointment or pressure on the burn.
11. Don't break blisters or remove pieces of cloth stuck to burn.
12. Notify the superintendent.
13. Notify the lead associate for buildings and grounds.
14. Contact the health and safety manager if a hazardous material has leaked on school property outside the building or gone into the sewer.

The emergency officials will declare the building safe for reentry.

Each building should have a complete list of all hazardous materials that are used and/or stored in the building. This list should include where the materials are in the building and what action should be taken if they are spilled. Copies of this list should be stored in the school office and operations office. The Executive Director may want to include a copy of the list for their building in this handbook. The list should also be made available to the fire department in case of fire involving these materials, and it should be updated on a regular basis.

Incident Outside Building

In a hazardous materials incident, local law enforcement or emergency officials will notify the Executive Director.

Local law enforcement and/or fire department personnel will inform the Executive Director and/or school administrators regarding the need to evacuate the building. Under some circumstances, it may be best to leave students in school and keep all doors and windows closed, turning off all outside ventilation systems. A determination may also need to be made whether or not to cancel school and send students home.

If it is necessary to evacuate the area, move crosswind, never directly with or against the wind, which may be carrying toxic fumes. It may be necessary to alter the evacuation plan to avoid any toxic fumes.

If evacuation is not ordered, be aware of changing health conditions of students and staff, particularly respiratory problems. Building staff will administer first aid as necessary.

Notify the chair of the Facilities Committee.

Contact the Executive Director if a hazardous material has leaked onto school property outside the building or gone into the sewer.

Law enforcement/fire department/emergency officials may direct school administrators and/or Executive Director to follow additional procedures.

**DO NOT RETURN TO BUILDING UNTIL EMERGENCY RESPONSE OFFICIALS
HAVE DECLARED THE AREA SAFE**

National Emergency or Catastrophe

In the event of a national emergency or catastrophe, staff members should be guided by the following:

Warning of an impending national emergency will be broadcast via civil defense systems and commercial radio and television. In the event of a catastrophe, information will be broadcast on commercial radio or television as well as relayed by the Executive Director.

The proper authorities through the emergency broadcast system (EBS) will release official emergency public information. The Executive Director should identify the BBS radio station that the school will monitor.

Relocation of staff and students to a designated shelter area in the building may be necessary.

Designated Temporary Evacuation Facilities at alternate sites have been identified. If necessary, students and staff can be relocated to these sites.

Medical Emergencies

KEEP CALM AND SURVEY THE SCENE FOR SAFETY USE UNIVERSAL PRECAUTIONS

Universal Precautions

1. The treatment of all blood and body fluids as if they were infected with a bloodborne disease.
2. Wear latex or vinyl gloves.
3. After administering care, do not touch your mouth, nose, or eyes, or eat or drink until you have thoroughly washed your hands.
4. Do a primary survey of the scene and person. Look for a medical alert bracelet or necklace.
5. Check airway, breathing, and circulation-ABCs. Begin CPR if indicated.
6. Check for bleeding, start first aid.
7. DO NOT leave the injured person unattended.
8. Determine the need for immediate medical attention and CALL911.
9. If during the school day, initiate a CRISIS TEAM.
10. DO NOT move the injured person, always suspect head/neck trauma.
11. Keep the person warm, cover with a blanket.
12. DO NOT give liquids to an unconscious person.
13. Be supportive.
14. Keep the crowd away, have others help.
15. Notify the school health office of an injury to any student, staff, or visitor on school grounds as soon as possible.
16. Look for a "Medical Alert" bracelet or necklace which will contain specific information pertaining to the individual.
17. Emergency care for serious accidents and/or illness.
18. Render immediate first aid care.
19. Do not move a seriously injured person unless it is necessary for safety reasons.
20. Obtain help from the Executive Director or other staff.
21. Call for medical assistance if needed - Dial 911.

NOTE: If injury or illness appears to be serious, call 911 and do not be concerned about protocol of contacting parents until after emergency care has arrived or even until a person has been transported to a trauma center. Notify parents or guardians, if possible. If emergency vehicles are called, report the incident to the Executive Director no later than the next school day.

Bee Sting

1. Give antidote injection if a person has such equipment with them.
2. Contact the Executive Director, staff or parents as quickly as possible to determine if a person is allergic to bee stings.
3. If a person is allergic, follow instructions of the Executive Director, teacher or parent.
4. If advice is not available, CALL 911 for help.
5. Speed of action is crucial.

NOTE: Do not wait for a "convenient" time to deal with a bee sting. Immediate action is required if a student is stung while in a vehicle. Call for help on the radio and follow instructions as to when and where to meet an emergency vehicle for assistance. Other passengers will have to wait until the emergency has been resolved.

Bleeding

Wear latex or vinyl gloves before gently blotting the wound to inspect for debris. If bleeding is severe, apply pressure on the wound. Apply a dry cold pack to the area around the wound.

Continue pressure until bleeding stops. Elevate wounds above the level of the heart to help reduce bleeding. Treat for shock.

Cessation of Breathing/Choking Incidents

If the victim can cough, speak and breathe, do not interfere. If the victim cannot speak or cough, uses the distress signal, or appears cyanotic (blue) from poor air exchange, proceed with the following:
Stand behind the victim with one foot beside the victim to support him/her.

Wrap your arms around the victim's waist.

Make a fist, place the thumb side of your fist against the victim's abdomen, slightly above the navel and below the xiphoid (breastbone).

Grasp your fist with the other hand. Press your fist into the victim's abdomen, with a quick inward and upward thrust.

Repeat this action until the obstruction is cleared or the victim becomes unconscious. If the victim becomes unconscious, continue to attempt to clear the airway with abdominal thrusts. Call 911.
Once the airway is open, if the unconscious patient is not breathing, CPR will need to be given.

Convulsions/Epileptic Seizures

Protect victims from injury but do not restrain. Support and protect the patient's head, being careful not to be hit or kicked. Following the seizure or if the patient vomits, turn their entire body onto their side. Do not force the mouth open. Do not force a blunt object between the victim's teeth. Do not give fluids. If breathing stops, give artificial respiration if trained in these techniques.

Try to time how long the seizure lasts. If it lasts five minutes without stopping, call 911.

After the seizure has ceased, let the patient rest in the nurse's office.

Call parents.

If this is the person's first seizure, advise them to get immediate medical attention.

Call 911 under any of the following conditions:

The student has one seizure immediately after another.

The student's seizure lasts longer than 5 minutes.

The student has been injured seriously.

Drowning

Call 911. Inform 911 operator that a drowning has occurred. Instruct them to send emergency personnel to the location.

Send a responsible student to the office for assistance. Administer appropriate first aid and/or CPR. First aid kits are in the office, classrooms or gymnasium.

Send a responsible student to meet the emergency personnel at the designated entrance to the building.

Notify the Executive Director as to the seriousness of the accident. The Executive Director will notify the board chair.

Eye Injury - Chemical Burns

Flush the eye with a gentle stream of lukewarm water while holding the eye open. If only one eye is affected, turn the head so the injured eye is down. If both eyes are affected, tilt the head back and pour water onto the bridge of the nose. Flushing should continue for at least 20 minutes. For acid/alkali burns, it may be necessary to remove jewelry and clothing which may be contaminated by the runoff. Ears may also become contaminated.

Eye Injury - Penetrating Injuries of the Eye

Do not remove the object or wash the eye. Cover both eyes loosely. Stabilize the object. Keep the victim quiet on his/her back.

Insulin Reactions

(NOTE: A student will not have a reaction if not on insulin therapy.)

A reaction can be in the form of disorientation, mood change, clammy skin, etc. - give the person sugar, Life Savers candy, milk, sandwich, or any other food available.

A reaction may culminate in convulsions and coma. Call 911 immediately if convulsions or coma occur. This must be done FAST. Put a sugar cube or Life Savers candy between cheek and teeth. Lay the person on their side so that saliva does not choke air passage. Use "Glucose" if available (Glucose may be purchased at any drug store).

Treat a person with convulsions as if they are diabetic and not epileptic unless the medical alert bracelet or necklace informs otherwise.

BRAIN DAMAGE AND/OR DEATH MAY OCCUR IF NOT TREATED QUICKLY. Coma is caused by the lack of sugar supplied to the brain and such lack will cause brain damage quicker than the shortage of oxygen.

Neck or Spinal Cord Injury (suspected)

1. Maintain an open airway, but do not tilt the head. Check for shock.
2. Do not move the victim.
3. Do not transport victims.
4. Call 911.

Food Poisoning

1. Administer first aid, using trained personnel in the building (i.e. health room staff).
2. Notify the Executive Director.
3. Call 911 or make an appropriate medical referral.
4. Call parent or guardian.
5. Notify the Nutrition Service Department, if necessary.
6. The Executive Director and staff will follow the directives of medical authorities.
7. Poisoning / Food Poisoning
8. Call the Poison Control Center at 1-800-764-7661 or 911.

Shock

1. Watch for cold, clammy skin; pale, bluish face; profuse sweating; weak, rapid pulse.

2. Have the person lie down.
3. Maintain body temperature.
4. Cover only enough to keep the victim from losing body heat.
5. Reassure and calm the victim.

Staff or students experiencing any of these medical emergencies should be evaluated further for medical care. The emergency medical service, 911, should be called. Notify parent/guardian of the student, or next of kin of a staff member.

Severe Weather

Severe Thunderstorm Watch

1. A severe thunderstorm watch is when weather conditions are favorable for the formation of severe thunderstorms including high winds, hail, heavy rain, lightning, and tornadoes.
2. Severe thunderstorms have been sighted or indicated on radar.
3. Stay tuned to your local radio station or TV for the latest advisory information.
4. Be prepared to take shelter

Severe Thunderstorm Warning

1. Initiate school warning system and listen for sirens.
2. Orient students before the spring tornado season regarding:
 - a. low areas where flooding might occur
 - b. dangers associated with loose or downed electrical wires
 - c. danger from lightning
3. Take appropriate shelter away from windows which could be broken by windblown objects if severe thunderstorms with high winds are experienced.
4. If at dismissal time, hold students until danger has passed or the student is picked up by a responsible adult.

Tornado Watch

1. A tornado watch is when weather conditions are favorable for a tornado to occur. No tornado has been sighted.
2. Continue with normal activities. The Executive Director and/or office staff should tune in to your local radio station to hear weather announcements.
3. If at dismissal time the weather is threatening, although no tornado warning has been received, consider holding pupils until major storm activity has passed. The Transportation Department shall notify the bus dispatcher if dismissal is delayed.

Tornado Warning

1. A 5-minute steady blast on the civil defense siren would indicate severe weather and that persons should seek cover.
2. Principal/program supervisor will announce tornado alerts by intercom or another prearranged signal to the faculty. NOTE: Under no circumstances should the fire alarm be sounded! (We do not want the students and staff to go outside.) Announce that a tornado has been spotted and all persons should proceed immediately to the designated SEVERE WEATHER SHELTER areas.
3. Staff should proceed with all students to pre-designated SEVERE WEATHER SHELTER areas per building plan as directed by principal/program supervisor.
4. Do not congregate in rooms with large, high ceilings such as the auditorium or gymnasiums. Stay away from windows. Do not take cover in halls which have exit doors directly opposite each other because such hallways create wind tunnels. The best areas to take cover in are smaller interior rooms with block walls.
5. Designated evacuation areas for each room should be posted.
6. Teachers must be the last persons to leave rooms that are to be evacuated.
7. If possible, persons should sit on the floor with their head between knees and cover face and eyes with hands.

8. If tornado warning occurs at dismissal time, hold students until danger has passed. Buses will not run while students are in shelter. Call the Department of Transportation to learn of bus rescheduling.

Blizzards/Winter Storms

1. The approaching winter storm or blizzard conditions will be announced by radio or by TV.
2. The Executive Director will advise teachers and staff of possible early closure or cancellation.
3. The Executive Director will notify the Department of Transportation to prepare for cancellation of service.
4. Marine Village School will follow Stillwater Public school closings.
5. At time of dismissal, staff should advise students to:
6. Go directly home.
7. Dress properly for the weather.
8. Be aware of low visibility and that it may be difficult to see or be seen.
9. The after school care will open and begin calling parents to arrange for early pickup of students.
10. School personnel should be aware if individuals must be sent to a residence other than their home.
11. Should a winter storm be too severe to release students, the school staff should be prepared to supervise until released. Also, should it be necessary, the school kitchens will be opened to provide food for students and staff.

In the absence of the Executive Director, the decision to close school will be made by the School Board chair or designated staff.

Notice will be given to local radio and TV when schools are not in session or upon an emergency closing.

Closure of school will be posted on the Marine Village School website in a timely manner.

Families will be notified via email and text message in the event of school delay or closing due to inclement weather.

Utility Emergencies

Those staff with classes should remain with their students. Other staff should offer to help where needed.

Gas Line Break

1. Clear the immediate area (evacuate building if deemed necessary).
2. Do not operate electrical switches, electrically powered equipment, telephones, or use flames in the immediate area.
3. Call Fire Department from an off-site location- 911.
4. Call Xcel Energy 1-800-895-4999 or use the website.
5. Call Executive Director. _
6. Call the chair of the facilities committee.

Electric Power Failure

1. NOTE: When electrical power goes out, each building has at least one power-fail phone. It is located at
2. Call Xcel energy 1-800-895-4999 or use the website to report a power outage.
3. Call Fire department, if appropriate.
4. Call the Executive Director.
5. Call the chair of the facilities committee.

Water Main Break

1. Call the chair of the facilities committee.
2. Shut off water.
3. Call the Executive Director.

Sudden Damage to Facility

1. If dangerous, evacuate occupants to a shelter area.
2. Call 911.
3. Call the Executive Director.
4. Notify Board chair.

If an emergency situation continues, the Executive Director, may decide to cancel school.

Vandalism or Break-in

When an act of vandalism or a break-in has been discovered:

Do not enter the building; go to the nearest phone and call the law enforcement - 911.

If you have entered the building and you find there has been a break-in, do not touch anything. Leave everything alone and call the law enforcement and wait for them to give you the orders to clean up or to make repairs.

Notify the Executive Director.

Notify the Board Chair

Notify the Facilities Committee Chair.

The facilities Committee Chair, working in conjunction with the Executive Director, should secure the building after the law enforcement or sheriff's office has completed their preliminary investigation and then should complete the cleanup and repair the damage as necessary. The Executive Director should compile an inventory of damage or stolen items and additional information relative to damage or loss must be reported to the school board.

The Executive Director should summarize the event. The School Board and Executive Director will develop repair and replacement cost estimates relative to building damage.

Communications During Crisis

Communication during a crisis is a real challenge for several reasons: you may not know all the details, emotions are high, and your top concern is student and staff safety.

Despite this, effective communication during crisis is necessary because it can:

1. Keep children and staff safer,
2. Guide people away from danger,
3. Reduce worry, and
4. Reconfirm the public's trust in the school.

Your Role

The Executive Director is the initial spokesperson. You will respond quickly to those first questions from parents, neighbors, community, or the news media. Should you not be available, your pre-selected "second" will immediately assume this role. This section will provide information and guidance to help you perform this critical role. Please also refer to the social media policy.

THE GOAL

The overall goal is to communicate care and confidence to a number of audiences - a large challenge when confusion reigns, emotions are high and information is scattered. Yet, that is the goal. The aim is to communicate effectively to the people who care: parents, staff, neighbors, district communities, businesses, other agencies, and the news media.

The key term here is "effective communications." During a crisis, as in many other situations, 'effective' means:

1. reach the public quickly
2. with accurate, honest and concise messages
3. communication that addresses audience concerns

Crisis Communication Plan

Response time is a major factor in crisis communications. Slow response can be interpreted as stonewalling, evasion, and fear. The longer it takes for us to provide accurate information, the more the public and media will speculate. Speculations tend to grow with time and become increasingly difficult to dispel.

On the other hand, timely response can help dissipate emotion, confusion, worry and doubt. Quick response also helps communicate an impression of calm, caring and control - qualities critical to the immediate situation, and to the longer-term reputation of the school.

The Strategy

The school's strategy for getting this done is simple: to use designated spokespersons and clear, honest messages to communicate with key audiences.

It's about teamwork: You will work with your school's crisis response team in order to address crises as they arise. This same team also provides you with information needed for your communications.

GENERAL TACTICS

There are things you can do and say, should you find yourself face-to-face with a concerned parent, neighbor, or reporter:

1. Take the time to respond, only if you are in a safe place.
2. If you have some accurate information about the crisis, provide this, and key messages, right away.
3. If you do not have information:
4. Let the caller know that you will contact them very shortly with information. Get their phone number.
5. Immediately find out what you can about the situation.
6. Separate the known from the unknown. The Washington County Sherriff's department will help you separate fact from speculation. You will communicate only that information about which you are very confident.
7. Jot this information down in bullet fashion.
8. Provide this information, plus messages, to your caller.
9. Contact the Board Chair.

They will help manage the messages and vehicles for on-going communication.

KEY Messages

The impression we want to leave with any audience is one of caring, safety and control. To achieve this, our key messages are:

1. Our top concern is the health and safety of our students and staff.
2. At this time, I can report that (everyone is safe, there are three hostages, five children have been injured, there has been one death, law enforcement are now investigating, firefighters are on hand, etc.). {This is information provided by your on-site crisis response team.}
3. We are working (with agency/utility) to resolve this situation.

These are your only messages. Notice there are only three. This is because most people - including reporters - have a hard time remembering more than three. Keep to them, and they will serve you well. In times of crisis, it is often amazing to observe that a questioner may have to be given a simple message several times before it is heard and understood.

Repeat your key messages again and again during each and every conversation or interview. Your objective is to be quoted. Though you may feel like a 'broken record,' the message will be absorbed much better.

A FEW WORDS ABOUT THE NEWS MEDIA

The media are in the business of gathering news and quickly packaging it for broadcast. They are professionals with unyielding deadlines who operate under increasing market pressure. Ultimately, they are in the business to make advertising dollars. Within this highly competitive environment, they can sometimes use their cameras, microphones and tape recorders to intimidate. They can try to use abrasive manners to unnerve you, or friendly attitudes to urge confidential information from you. Please remember: regardless of their demeanor, reporters are neither friend nor foe. Their deadlines will not pressure us to provide information until we are sure it is accurate.

The Board Chair will help you handle media calls and interviews on- or off-site. Depending on the type and duration of a crisis, the Board Chair will direct media away from the building, either to a designated spot at a safe, but visible distance from your building, or to a media center at a remote location. The Board Chair will also work with local agencies and services to facilitate communications.

Reporters are not your audience. They are a conduit to your real audiences: parents and students, teachers, other districts, and the community. Only use the language and attitude you want your audiences to hear and see.

This said, the media provide an excellent and immediate channel to important audiences. Television and radio news can alert motorists away from a school, calm worried parents, point citizens to a hot line phone number, and solicit information from the public. The Marine Village School can, and will, use them to the benefit of our children, their families and the community at large

About Media Interviews. The media interview is not a conversation. It is a very stylized form of communication in which you and the reporter have very distinct roles. The reporter's job is to get information. Your job is to provide key messages to important audiences. Reporters know this. They will be aggressive about getting tough questions answered. You must be just as determined to focus on key messages. That's why it pays to prepare for media interviews. Preparations are abbreviated during crisis situations:

1. Understand as much as you can about the current situation.
2. Jot down your key messages in bullet form. If you have the time, bounce them off the Board Chair or a trusted colleague.
3. Let the reporter know you can give them only 5-10 minutes.
4. Take the initiative and deliver your key messages even before any questions are asked.
5. Respond to each question directly, honestly and briefly.
6. Follow each and every response with at least one of your key messages.

Here are some additional do's and don'ts:

1. Never repeat the reporter's question.
2. If you are unsure about what is being asked, have the reporter repeat or clarify the question.
3. Answer questions using common, conversational language, and at a calm pace.
4. Adjust your body and attitude to the situation at hand. You should look serious and saddened if the situation is tragic.
5. It is OK to say, "I don't know" when information is not readily available. You must not guess, hypothesize, or wonder out loud during an interview. You must never describe a worst-case outcome. Instead, state your hopes, expectations, and/or goals.
6. There is no magic moment at which an interview starts or stops.

Remember:

1. Video cameras are often taping long before they are pointed at you.
2. Videos are often kept running long after the formal question and answer period seems to have ended.
3. A reporter may be recording an interview in his head, even when there isn't a notebook in his/her hand.
4. Today's lenses and microphones can pick up pictures and sounds from half a block away.
5. There is no "off the record." Every friendly chat or confidential whisper can show up in the news.
6. You do not have to allow reporters onto school grounds.
7. Reporters should not be immediately granted access to students during a crisis. (The Board Chair will work with you to arrange for reporter/student interviews at some time during this situation.)
8. Reporters can conduct interviews, take pictures and shoot video from public streets and side-walks unless directed otherwise by law enforcement officers or firefighters.
9. Newspaper stories are a very important way to provide detailed information during an ongoing crisis or after a crisis is over. The messages people read in their local and metro newspapers can help re-establish calm and confidence for the long-term.

DIRECT COMMUNICATIONS

The news media is one way to reach our key audiences. Other vehicles will be used as well, such as face-to-face meetings, letters home, newsletters, telephone calls, telephone hot lines, etc. Just which are used will depend on the audience, urgency, and the type and length of the crisis.

The Executive Director and School Board Chair will work together with other staff and administration to determine ongoing communications.

Meetings: It may become important to hold a public meeting to deliver important messages, and to answer questions, face-to-face. These meetings may be called for parents and students only, or held for the benefit of neighbors and other concerned citizens. The meetings may be open or closed to the press.

The School Board Chair will help you arrange these meetings on or off school grounds. They will also help to communicate notice of the meeting to your target audiences.

Letters Home: A letter sent directly to the home can be a powerful way to communicate. Any letter should be considered a public document that can find its way to the local press. The school board chair will help develop the letter and work with the operations manager to have it delivered promptly.

Telephone: Next to television, the telephone is one of the most powerful communications tools available to us because everyone has one and everyone is absolutely comfortable using it at any moment of the day or night.

The telephone is the channel most parents will use to get information about the safety of their child(ren). Therefore, in times of crisis, we can immediately expect two things:

The operations manager will have to field calls.
Your phone lines will quickly clog.

The operations manager becomes the school's first response in a difficult situation. Here is what the operations manager can say:

I am/am not aware of any difficulty.
Our Executive Director is the only person with information.
I'll have him/her call you.
Your child's safety is our top concern, too.

As more calls come in, busy signals become the problem because they may prompt the now-frantic parent to drive to the school to secure their child's safety. The result: lots of anxious parents crowding roads to a school in crisis. Text messaging may be useful but should only be used with permission and direction of the Executive Director and/or the school board chair.

We will work with the school to handle telephone calls coming from the outside to inquire about the crisis at hand. We are working to develop a system whereby calls to the school will be rolled over to other phone handlers.

On the other hand, the telephone also provides solutions:

A text message and/or email can dissipate worry and lessen the number of calls.

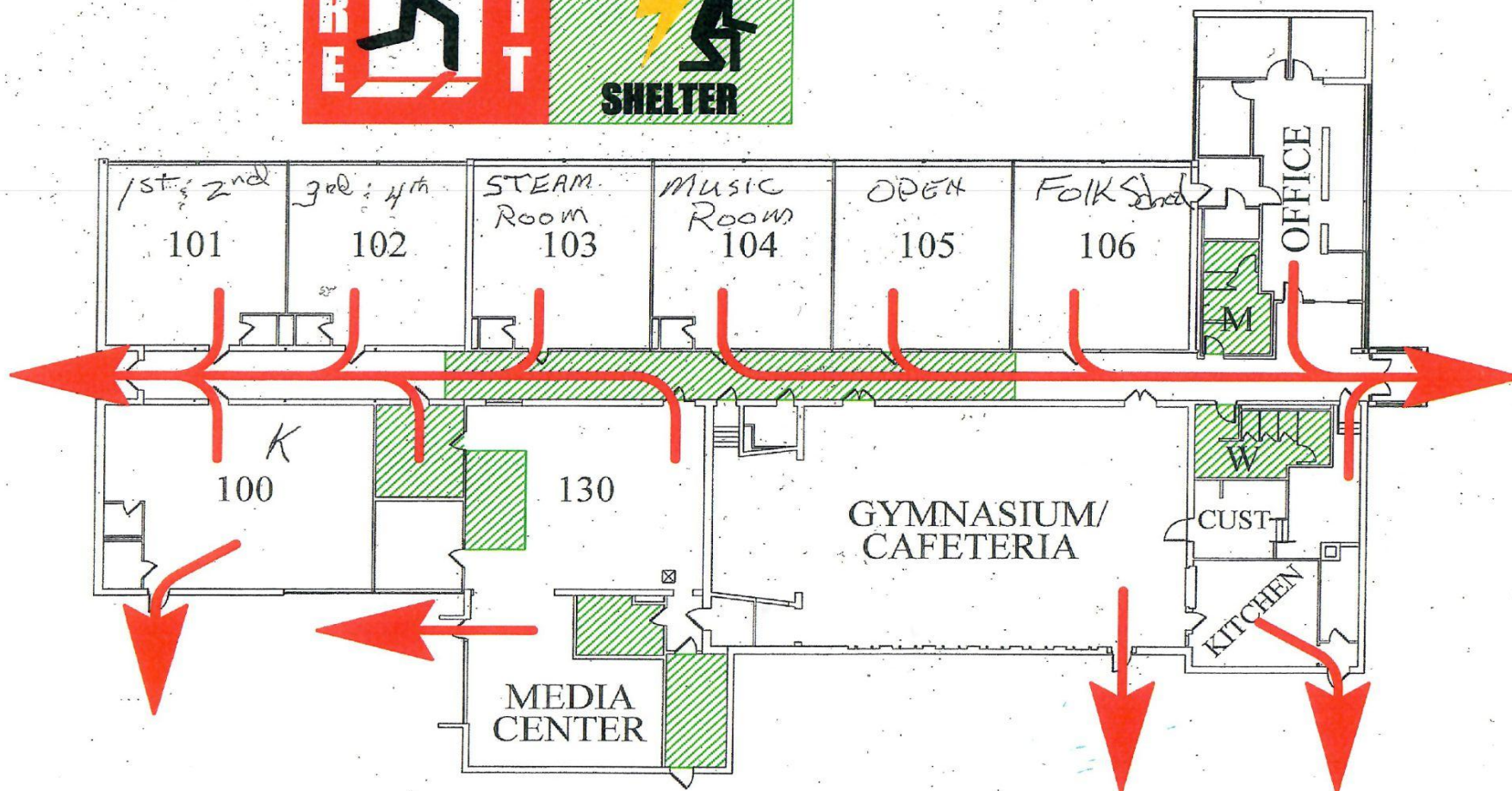
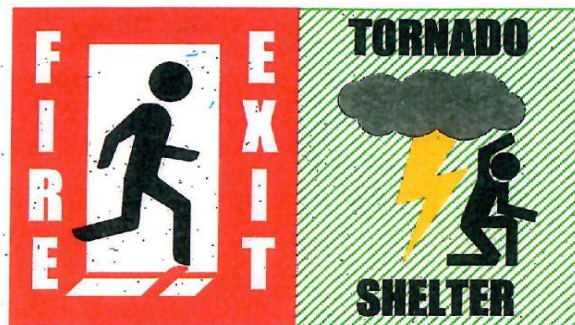
A hot line can quickly shift parents to a helpful message.

A quick call to the local media can provide information to a wide audience of parents, neighbors, and the larger community.

Newsletters: Newsletters are a great way to give students, parents and teachers a detailed explanation of a crisis situation. Crisis information can be included in a school's existing newsletter.

In case of a large crisis, a special news sheet can be generated to update audiences on a regular basis. The School Board chair will work with you to develop and distribute these communications.

E-Mail: This can be a powerful tool for reaching all staff with information fast. The School's web page will be used as a bulletin board for updates that can be shared with students, parents and the community.



DATE:

BUS NUMBER:

PERSON FILLING OUT THIS REPORT:

| Student Name | Grade | Who to Contact/Phone | Student's Seat Position on Bus | How Student Feels/Injury Complaints |
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