

Fruitvale Elementary School  
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3200 Boston Avenue  
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# **School Year: 2025-2026**

# **Comprehensive School Safety Plan**

(Education Code Section 32280-32288)

CELIA BERMEO  
Principal

Rebecca Littlejohn, Director, Risk Management  
Vilma Bermudez, Emergency Preparedness Manager

## Introduction

Each school district and county office of education is responsible for the overall development of all school safety plans for its schools operating kindergarten or any of grades 1 to 12, inclusive. The ***OUSD Comprehensive District Safety and Climate Plan*** brings together all of the elements of school safety to help meet our goal of providing a safe environment, both physical and social/emotional, that is conducive to learning. The district safety plan is used as a framework to assist site administrators with the development of their ***School Safety Plan***. As a framework, we encourage site Administrators to enhance and expand their site safety plans that is specific to their site's safety needs.

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## Section 1: School Safety / Climate Team

The school site safety team or committee shall be composed of the following members: the principal or designee, one teacher who is a representative of the recognized certificated employee organization, one parent/guardian whose child attends the school, one classified employee who is a representative of the recognized classified employee organization, other members if desired. (Ed Code 32281)

Site Responsibilities:

1. Establish School Safety/Climate Team
2. Update your site map including evacuation routes
3. Create a School Site Safety Plan including:
  - Strategies for improving school safety/climate: goals, data, timeline, evaluation
  - Fire Drill Schedule - Once per month at the elementary and middle school levels, and two times per year at the high school level.
  - Earthquake Drill Schedule – 4 times a year at the elementary and middle school levels and 2 times a year at high school level.
  - Lockdown Drill - Twice per year (once a semester) at all school levels.
  - Update School Phone Tree
4. Update the templates in this section of the plan to reflect current areas of responsibilities at your site: (1) Incident Command Team, (2) Goals, Strategies and Activities for School Climate and Physical Environment
5. Work closely with the school site council. Remember the school site council has the responsibility of approving the final plan and must be involved in its development.
6. Submit your Site Safety Plan to the OUSD Office of Emergency Services for review and Board submission/approval.

● <b>Principal or Designee:</b>	CELIA BERMEO - Principal, Elem School Large
● <b>Teacher:</b>	LILIA MARTIN - TSA Classroom 10Mos
● <b>Classified:</b>	DENITZA POPOV - Attendance Specialist
● <b>Parent Representative:</b>	Virginia Gilbert - Parent

### Emergency Telephone Number Directory

	Name	Home	Work	Cell
● <b>Principal:</b>	CELIA BERMEO - Principal, Elem School Large	510-978-9099	510-879-5117	510-710-1302
● <b>Assistant Principal:</b>	NA			
● <b>Custodian:</b>	YULIANA ROBLES - Lead Custodian	510-328-9572	510-879-5117	
● <b>Secretary/Other:</b>	DENITZA POPOV - Attendance Specialist	510-535-2840	510-879-5117	



## Section 2: School Safety Plan Goals

The school safety committee shall make an assessment of the current status of school crime committed on campus and at school-related functions and of appropriate strategies and programs that will provide or maintain a high level of school safety. (Ed Code 32282)

To be considered:

- Office referrals
- Suspensions
- Expulsions
- Attendance
- Notice of Truancy Letters
- CHKS student and staff data results
- California Safe Schools Assessment
- Surveys
- Observations
- Student and Parent input
- Staff input; including School Safety Officers

**Based on data analysis**, the Safety/Climate Team identifies one or two safety related goals for the next school year as well as the strategies and/or programs that will be used to meet those goals. The objective is to provide meaningful goals in order to improve the campus climate. **At least one goal must be based on current school crime statistics.**

Must address the following areas:

- Discipline
- Voluntary Resolution Plan & Equity Issues
- Attendance
- Parent Involvement

### Please include your assessment outcomes here and data source(s) used:

Increase school-wide attendance by 50%. Reduce suspensions by 10%. Reduce expulsions by 50% Increase walkthroughs, observations, and give detailed feedback to staff. No incidents of crime on campus.

### Goal 1: To increase average daily attendance and decrease chronic absence to 5% by having weekly attendance meetings and monthly SART meetings and office hours.

- Strategy 1.1: Establish attendance team to review attendance data, monthly check ins by teachers and monthly principal check in meetings, SARTs, and SARBS.
- Strategy 1.2: Monthly Town Hall meetings in recognition of students for Perfect attendance, most improved and PBIS.

### Goal 2: To reduce office referrals by 10% and increase student engagement in class.

- Strategy 2.1: Implementation of Positive Behavior Interventions and Support (PBIS) tier 1 systems. Review MTSS strategies.
- Strategy 2.2: Implement Restorative Justice and Caring Schools community building circles daily in all classrooms. Establish the Fruitvale Way.

## Section 3: Safety Policies & Procedures

### District Policies and Procedures

#### 3.1 Child Abuse

**Sexual Assault (Child assaulted on or near school property):**

- ☐ Accompany victim to safe place at school and remain with her/him
- ☐ Protect evidence of sexual assault
- ☐ Notify Child Protective Services (CPS), Police without delay (Oakland Police Department Sexual Assault number: (510) 637-0298
- ☐ Notify police and school nurse or appropriate staff immediately

**Sexual Abuse (Suspicion of past sexual incidents):**

- ☐ Notify CPS and describe evidence, CPS will advise you of next steps, including if you should call the Oakland Police Department
- ☐ Notify school nurse or appropriate staff immediately. (Staff should not treat unless the victim's life is threatened)
- ☐ Leave notification of family to CPS or the Police

**Do not Destroy Evidence of Sexual Abuse:**

- ☐ Do not wash clothes or victim's body or underwear. Do not have victim undress.
- ☐ Do not allow victim to wash or wipe body
- ☐ Do not wipe away dirt, semen or dried blood
- ☐ Stay with the victim and reassure her/him of safety

**Suspected Physical Abuse or Significant Neglect:**

- ☐ Notify appropriate staff and CPS immediately.
- ☐ Notify CPS and describe evidence. CPS will advise you of next steps. Follow their directions.
- ☐ Notify immediate director/supervisor

**Child Protective Services (CPS) Crisis Line (510)259-1800**

***Remember: Failure to report a suspected incident of child abuse, within 48 hours can result in criminal prosecution. Protect the victim and protect yourself.***

### **3.2 Sexual Harassment**

The Governing Board prohibits sexual harassment of district employees and job applicants. The Board also prohibits retaliatory behavior or action against district employees or other persons who complain, testify or otherwise participate in the complaint process established pursuant to this policy and the administrative regulation. The Superintendent or designee shall take all actions necessary to ensure the prevention, investigation and correction of sexual harassment, including but not limited to:

1. Providing periodic training to all staff regarding the district's sexual harassment policy, particularly the procedures for filing complaints and employees' duty to use the district's complaint procedures in order to avoid harm.
2. Publicizing and disseminating the district's sexual harassment policy to staff.
3. Ensuring prompt, thorough and fair investigation of complaints.
4. Taking timely and appropriate corrective/remedial actions after completion of investigation. This may require interim separation of the complainant and the alleged harasser, and subsequent monitoring of developments.

Any district employee or job applicant who feels that he/she has been sexually harassed, or who has knowledge of any incident of sexual harassment by or against another employee, a job applicant or a student, shall immediately contact his/her supervisor, the principal, district administrator or Superintendent to obtain procedures for filing a complaint.

Complaints of sexual harassment shall be filed in accordance with AR 4031 - Complaints Concerning Discrimination in Employment.

An employee may bypass his/her supervisor in filing a complaint where the supervisor is the subject of the complaint.

A supervisor, principal or other district administrator who receives a harassment complaint shall promptly notify the Superintendent or designee.

All complaints and allegations of sexual harassment shall be kept confidential to the extent necessary to carry out the investigation or take other subsequent necessary action. (5 CCR4964)

Any district employee who engages or participates in sexual harassment, or who aids, abets, incites, compels or coerces another to commit sexual harassment against a district employee, job applicant or student, is in violation of this policy and is subject to disciplinary action, up to and including dismissal.

### 3.3 Bullying and Cyberbullying

The Governing Board recognizes the harmful effects of bullying on student learning and school attendance and desires to provide safe school environments that protect students from physical and emotional harm. District employees shall establish student safety as a high priority and shall not tolerate bullying of any student. (BP 5131.2)

No individual or group shall, through physical, written, verbal, or other means, harass, sexually harass, threaten, intimidate, retaliate, cyberbully, cause bodily injury to, or commit hate violence against any student or school personal.

Cyberbullying on campus to bully or harass other students or staff member is prohibited. Discipline will be imposed in accordance with Board policy and administrative regulations in the event that a student harasses, including by cyberbullying, another student or staff member.

Cyberbullying includes the creation or transmission of harassing communications, direct threats, or other harmful texts, sounds or images on the Internet, social media, or other technologies using a telephone, computer or any wireless communication device. Cyberbullying, also includes breaking into another person's electronic account and assuming that person's identity in order to damage that person's reputation. (cf. 5145.2 - Freedom of Speech/Expression)

Strategies for addressing bullying in district schools shall be developed with involvement of key stakeholders, including students, parents/guardians, and staff, and may be incorporated into the comprehensive safety plan, the local control and accountability plan, and other applicable district and school plans. (cf. 0450 - Comprehensive Safety Plan) (cf. 0460 - Local Control and Accountability Plan) (cf. 0420 - School Plans/Site Councils) (cf. 1220 - Citizen Advisory Committees)

As appropriate, the Superintendent or designee, may collaborate with law enforcement, courts, social services, mental health services, other agencies, and community organizations in the development and implementation of joint strategies to promote safety in schools and the community and to provide services for alleged victims and perpetrators of bullying (cf. 1020 - Youth Services)

#### Bullying Prevention

To the extent possible, district schools shall focus on the prevention of bullying by establishing clear rules for student conduct and implementing strategies to promote a positive, collaborative school climate. Students shall be informed, through student handbooks, and other appropriate means, of district and school rules related to bullying, mechanism available for reporting incidents or threats, and the consequences for engaging in bullying. (cf. 5137 - Positive School Climate)

As appropriate, the district shall provide students with instruction, in the classroom or other educational settings, that promotes effective communication and conflict resolution skills, social skills, character/values education, respect for cultural and individual difference, self-esteem development, assertiveness skills, and appropriate online behavior (cf. 5137 - Positive School Climate)

Staff shall receive related professional development, including information about early warning signs of harassing/intimidating behaviors and effective response. (cf. 4131 - Staff Development)

Based on an assessment of bullying incidents at school, the Superintendent or designee may increase supervision and security in areas where bullying most often occurs, such as classrooms, playgrounds, hallways, restrooms, and cafeterias.

#### Interventions

Students are encouraged to notify school staff when they are being bullied or suspect that another student is being victimized. In addition, the Superintendent or designee shall develop means for students to report threats or incidents confidentially and anonymously.

School staff who witness an act of bullying shall immediately intervene to stop the incident when it is safe to do so. (Education Code 234.1)

When appropriate based on the severity or pervasiveness of the bullying, the Superintendent or designee shall notify the parents/guardians of victims and perpetrators and may contact law enforcement.

#### Reporting and Filing of Complaints

Any student, parent/guardian, or other individual who believes that a student has been subjected to bullying or who has witnessed bullying may report the incident to a teacher, the principal, a compliance officer, or any other available school employee. Within one business day of receiving such a report, a staff member shall notify the principal of the report, whether or not a uniform complaint is filed. In addition, any school employee who observes an incident of bullying involving a student shall, within one business day, report his/her observation to the principal or a district compliance officer, where or not the alleged victim files a complaint.

**Within two business days of receiving a report of bullying, the principal shall notify the district compliance officer identified in AR 1312.3 - Uniform Complain Procedure.**

**When a report of bullying is submitted, the principal or district compliance officer shall inform the student or parent/guardian of the right to file a formal written complaint in accordance with AR 1312.3. The student who is the alleged victim of the bullying shall be given an opportunity to describe the incident, identify witnesses who may have relevant information, and provide other evidence of bullying.**

#### **Investigation and Resolution of Complaints**

**Any complaints of bullying shall be investigated and, if determined to be discriminatory, resolved in accordance with law and the district's uniform complaint procedure specified in AR 1312.3.**

**If during the investigation, it is determined that a complaint is about nondiscriminatory bullying, the principal or designee shall inform the complainant and shall take necessary actions to resolve the complaint.**

#### **Discipline**

**Corrective actions for a student who commits an act of bullying or any type may include counseling, behavioral intervention and education, and if behavior is severe or pervasive as defined in Education Code 48900, may include suspension or expulsion in accordance with district policies and regulations. (cf. 5138 - Conflict Resolution/Peer Mediation) (cf. 5144 - Discipline) (cf. 5144.1 - Suspension and Expulsion/Due Process) (cf. 5144.2 - Suspension and Expulsion/Due Process (Students with Disabilities)) (f. 6159.4 - Behavioral interventions for Special Education Students)**

**Any employee who permits or engages in bullying or retaliation related to bullying shall be subject to disciplinary action, up to and including dismissal. (cf. 4118/4218 - Dismissal/Suspension/Disciplinary Action) (cf. 41192.21/4219.21/4319.21 - Professional Standards)**

### **3.4 Suspension & Expulsion/Due Process**

The Governing Board has established policies and standards of behavior in order to promote learning and protect the safety and well-being of all students. When these policies and standards are violated, it may be necessary to suspend or expel a student from regular classroom instruction.

Suspended or expelled students shall be excluded from all school-related extracurricular activities during the period of suspension or expulsion.

Except where suspension for a first offense is warranted in accordance with law, suspension shall be imposed only when other means of correction fail to bring about proper conduct. (Education Code 48900.5)

Expulsion is an action taken by the Board for severe or prolonged breaches of discipline by a student. Except for single acts of a grave nature, expulsion is used only when there is a history of misconduct, when other forms of discipline, including suspension, have failed to bring about proper conduct, or when the student's presence causes a continuing danger to him/herself or others. (Education Code 48915)

The grounds for suspension and expulsion and the procedures for considering, recommending and/or implementing suspension and expulsion shall be specified in administrative regulation.

No students enrolled in grades transitional-kindergarten (TK) through third grade may be suspended for disrupting school activities or willfully defying the authority of school personnel ("disruption and willful defiance") and no student enrolled in grades TK through twelve (TK-12) shall be expelled for the the same. (Education Code 48900(k))

The District may not involuntarily transfer a student to another school based on a find of disruption of school activities or willful defiance of the authority of school personnel. (Education Code 48900(k))

## **Student Due Process**

The Board does not support a zero tolerance approach. The Board shall provide for the fair and equitable treatment of students facing suspension and expulsion by affording them their due process rights under the law. The Superintendent or designee shall comply with procedures for notices and appeals as specified in administrative regulation and law. (Education Code 48911, 48915, 48915.5)

## **On-Campus Suspension Program**

The Board recognizes that students who are suspended from school often have no supervision or guidance during the school hours when they are off campus and may fall behind in the coursework. The Board believes that, in many cases, it would be better to manage the student's behavior by keeping the student at school and providing him/her with supervision that is separated from the regular classroom.

The Superintendent or designee shall establish a supervised in-house suspension program which meets the requirements of law for suspended students who pose no imminent danger or threat at school and for whom an expulsion action has not been initiated.

The Superintendent or designee shall examine alternatives to off-campus suspension and may establish a suspension program which involves progressive discipline during the school day on campus; use of conferences between staff, parents/guardians and students; detention; student study teams or other assessment-related teams; and/or referral to school support services staff. The use of such alternatives does not preclude off-campus suspensions.

## **Required Parental Attendance**

The Board believes that parental involvement plays an important role in the resolution of classroom behavior problems. The Board expects that teachers will communicate with parents/guardians when behavior problems arise.

Whenever a student is removed from a class because he/she committed an obscene act, engaged in habitual profanity or vulgarity, disrupted school activities or otherwise willfully defied valid staff authority, the teacher of the class from which the student was removed may provide that the student's parent/guardian attend a portion of a school day in that class. After completing the classroom visit and before leaving school premises, the parent/guardian also shall meet with the principal or designee. (Education Code 48900.1)

The Board encourages teachers, before requiring parental attendance, to make reasonable efforts to have the parent/guardian visit the class voluntarily. The teacher also may inform the parent/guardian about available resources and parent education opportunities. Teachers should reserve the option of required parental attendance for cases in which they have determined that it is the best strategy to promote positive interaction between the student and the parent/guardian and to improve classroom behavior. The teacher shall apply this policy uniformly to all students within the classroom. This policy shall apply only to a parent/guardian who lives with the student. (Education Code 48900.1 )

Parental attendance may be requested on the day the student returns to class or within one week thereafter. The principal or designee shall contact any parents/guardians who do not respond to the request to attend school. The Board recognizes that parental compliance with this policy may be delayed, modified or prevented for reasons such as serious illness/injury/disability, absence from town, or inability to get release time from work.

District regulations and school-site rules for student discipline shall include procedures for implementing parental attendance requirements.

## **Decision Not to Enforce Expulsion Order**

On a case-by-case basis, the enforcement of an expulsion order may be suspended by the Board pursuant

to the requirements of law.

### **Grounds for Suspension and Expulsion**

**A student may be subject to suspension or expulsion when it is determined that he/she:**

**1. Caused, attempted to cause, or threatened to cause physical injury to another person or willfully used force or violence upon the person of another, except in self-defense. (Education Code 48900(a))**

**A student who aids or abets the infliction or attempted infliction of physical injury on another person, as defined in Penal Code 31, may be suspended, but not expelled. However, a student may be suspended or expelled pursuant to Education Code 48900(a) once he/she has been adjudged by a juvenile court to have committed, as an aider or abettor, a crime of physical violence in which the victim suffered great or serious bodily injury. (Education Code 48900(q))**

**2. Possessed, sold, or otherwise furnished any firearm, knife, explosive, or other dangerous object unless, in the case of possession of any object of this type, the student had obtained written permission to possess the item from a certificated school employee, with the principal or designee's concurrence. (Education Code 48900(b))**

**3. Unlawfully possessed, used, sold, or otherwise furnished, or was under the influence of, any controlled substance as defined in Health and Safety Code 11053-11058 alcoholic beverage, or intoxicant of any kind. (Education Code 48900(c))**

**4. Unlawfully offered, arranged, or negotiated to sell any controlled substance as defined in Health and Safety Code 11053-11058 alcoholic beverage or intoxicant of any kind, and then sold, delivered or otherwise furnished to any person another liquid, substance or material and represented same as controlled substance, alcohol beverage or intoxicant. (Education Code 48900(d))**

**5. Committed or attempted to commit robbery or extortion. (Education Code 48900(e))**

**6. Caused or attempted to cause damage to school property or private property. (Education Code 48900(f))**

**7. Stole or attempted to steal school property or private property. (Education Code 48900(g))**

**8. Possessed or used tobacco or any products containing tobacco or nicotine products, including but not limited to cigars, cigarettes, miniature cigars, clove cigarettes, smokeless tobacco, snuff, chew packets and betel. This restriction shall not prohibit a student from using or possessing his/her own prescription products. (Education Code 48900(h))**

**9. Committed an obscene act or engaged in habitual profanity or vulgarity. (Education Code 48900(i))**

**10. Unlawfully possessed or unlawfully offered, arranged, or negotiated to sell any drug paraphernalia, as defined in Health and Safety Code 11014.5. (Education Code 48900(j))**

**11. Disrupted school activities or otherwise willfully defied the valid authority of supervisors, teachers, administrators, other school officials, or other school personnel engaged in the performance of their duties. (Education Code 48900(k))**

**12. Knowingly received stolen school property or private property. (Education Code 48900(l))**

**13. Possessed an imitation firearm, i.e., a replica of a firearm that is so substantially similar in physical properties to an existing firearm as to lead a reasonable person to conclude that the replica is a firearm. (Education Code 48900(m))**

**14. Committed or attempted to commit a sexual assault as defined in Penal Code 261, 266c, 286, 288, 288a or 289, or committed a sexual battery as defined in Penal Code 243.4. (Education Code 48900(n))**



15. Harassed, threatened, or intimidated a student who is a complaining witness or witness in a school disciplinary proceeding for the purpose of preventing that student from being a witness and/or retaliating against that student for being a witness. (Education Code 48900(o))

16. Unlawfully offered, arranged to sell, negotiated to sell, or sold the prescription drug Soma. (Education Code 48900(p))

17. Engaged in, or attempted to engage in, hazing as defined in Education Code 32050. (Education Code 48900(q))

18. Made terrorist threats against school officials and/or school property. (Education Code 48900.7)

A student in grades 4-12 is also subject to suspension or recommendation for expulsion when it is determined that he/she:

19. Committed sexual harassment as defined in Section 212.5 (Education Code 48900.2)

20. Caused, attempted to cause, threatened to cause, or participated in an act of hate violence as defined in Section 233 (Education Code 48900.3)

21. Intentionally engaged in harassment, threats or intimidation against district personnel or students that is sufficiently severe or pervasive to have the actual and reasonably expected effect of materially disrupting classwork, creating substantial disorder, and invading the rights of school personnel or students by creating an intimidating or hostile educational environment (Education Code 48900.4)

#### **Nondiscrimination/Harassment**

A student may be suspended or expelled for any of the acts listed above if the act is related to school activity or school attendance occurring at any district school under the jurisdiction of the Superintendent or principal or within any other school district, including but not limited to the following circumstances: (Education Code 48900)

1. While on school grounds
2. While going to or coming from school
3. During the lunch period, whether on or off the school campus
4. During, going to, or coming from a school-sponsored activity

The Superintendent or principal may use his/her discretion to provide alternatives to suspension or expulsion for a student subject to discipline under this administrative regulation, including, but not limited to, counseling and an anger management program. (Education Code 48900(r))

Alternatives to suspension or expulsion shall be used with students who are truant, tardy, or otherwise absent from assigned school activities.

#### **Notifications to Law Enforcement Authorities**

Prior to the suspension or expulsion of any student, the principal or designee shall notify appropriate city or county law enforcement authorities of any student acts of assault which may have violated Penal Code 245. (Education Code 48902)

The principal or designee also shall notify appropriate city or county law enforcement authorities of any student acts which may involve the possession or sale of narcotics or of a controlled substance or possession of weapons or firearms in violation of Penal Code 626.9 and 626.10. (Education Code 48902)

Within one school day after a student's suspension or expulsion, the principal or designee shall notify appropriate city or county law enforcement authorities, by telephone or other appropriate means, of any student acts which may violate Education Code 48900(c) or (d), relating to the possession, use, offering or sale of controlled substances, alcohol or intoxicants of any kind. (Education Code 48902)

#### Outcome Data

The Superintendent or designee shall maintain the following data and report such data annually to the California Department of Education, using forms supplied by the California Department of Education: (Education Code 48900.8, 48916.1)

1. The number of students recommended for expulsion
2. The specific grounds for each recommended expulsion
3. Whether the student was subsequently expelled
4. Whether the expulsion order was suspended
5. The type of referral made after the expulsion
6. The disposition of the student after the end of the expulsion period

### 3.5 Dress and Grooming

The Governing Board believes that appropriate dress and grooming contribute to a productive learning environment. The Board expects students to give proper attention to personal cleanliness and to wear clothes that are suitable for the school activities in which they participate. Students' clothing must not present a health or safety hazard or a distraction which would interfere with the educational process.

The Board of Education seeks to provide educational experiences which assure that students are academically prepared, that they accept civic and social responsibilities and that they are qualified for future entry into the work place. The clothing and accessories worn by students and staff should reflect the serious goals of an academic environment.

Students and parents/guardians shall be informed about dress and grooming standards at the beginning of the school year and whenever these standards are revised. A student who violates these standards shall be subject to appropriate disciplinary action.

#### Gang-Related Apparel

In accordance with the California Constitution, all students and staff of public primary, elementary, junior high and senior high schools have a right to attend campuses which are safe, secure and peaceful. Where there is evidence of a gang presence that disrupts or threatens to disrupt the school's activities, the Board of Education authorizes the principal, staff and parents/guardians at the school to establish a reasonable dress code that prohibits students from wearing gang-related apparel.

Such a dress code may be included as part of the school safety plan and must be presented to the Board for approval. The Board shall approve the plan upon determining that it is necessary to protect the health and safety of the school's students.

#### Uniforms

In order to promote student safety and discourage theft, peer rivalry and/or gang activity, the principal, staff and parents/guardians at a school may establish a reasonable dress code requiring students to wear uniforms. Such a dress code may be included as part of the school safety plan and must be presented to the Board for approval. The Board shall approve the plan upon determining that it is necessary to protect the health and safety of the school's students.

If a school's plan to require uniforms is adopted, the Superintendent or designee shall establish procedures whereby parents/guardians may choose to have their children exempted from the school uniform policy. Students shall not be penalized academically, otherwise discriminated against or denied attendance to school if their parents/guardians so decide.

The Superintendent or designee shall ensure that resources are identified to assist economically disadvantaged students in obtaining uniforms.

### 3.6 Employee Security

The Superintendent or designee shall ensure that employees are informed, in accordance with law, regarding crimes and offenses by students who may pose a danger in the classroom.

When violence is directed against an employee by any individual and the employee so notifies the Superintendent or designee, the Superintendent or designee shall take steps to ensure that appropriate legal measures are instituted.

When the employee notifies the Superintendent or designee of a threat of bodily harm, the district shall take appropriate measures to enable the employee to request assistance if a threat occurs on school grounds.

The Superintendent or designee shall ensure that employees are trained in crisis prevention and intervention techniques in order to protect themselves and students. Staff development may include training in classroom management, effective communication techniques and crisis resolution.

The Board requires school employees to take immediate action upon being made aware that any person is in possession of an injurious object on school grounds or at a school-related or school-sponsored activity. The employee shall use his/her own judgment as to the dangerousness of the situation and, based upon this analysis, shall do one of the following:

1. Confiscate the object and deliver it to the principal immediately.
2. Immediately notify the principal, who shall take appropriate action.
3. Immediately notify the local law enforcement agency and the principal.

When informing the principal about the possession or seizure of a weapon or dangerous device, the employee shall report the name(s) of persons involved, witnesses, location, and the circumstances of any seizure. Pursuant to Education Code 49334, school employees who notify law enforcement regarding students or adults who are in possession of injurious objects while on school grounds or under the jurisdiction of school personnel are immune from prosecution.

#### Notification to Teachers about potentially dangerous student

Notification to teacher; pupil who has engaged in acts constituting grounds for suspension or expulsion; civil or criminal liability; misdemeanor; fine; confidential information; application of section. Ed. Code 49079.

a) A school district shall inform the teacher of each pupil who has engaged in, or is reasonably suspected to have engaged in, any of the acts described in any of the subdivisions, except subdivision (h), of Section 48900. The district shall provide the information to the teacher based upon any records that the district maintains in its ordinary course of business, or receives from a law enforcement agency, regarding a pupil described in this section.

b) No school district, or school district officer or employee, shall be civilly or criminally liable for providing information under this section unless it is proven that the information was false and that the district or district officer or employee knew that the information was false, or was made with a reckless disregard for the truth or falsity of the information provided.

c) An officer or employee of a school district who knowingly fails to provide information about a pupil who has engaged in, or who is reasonably suspected to have engaged in, the acts referred to in subdivision (a), is guilty of a misdemeanor, which is punishable by confinement in the county jail for a period not to exceed six months, or by a fine not to exceed one thousand dollars (\$1,000), or both.

A school district must inform any teacher, counselor or administrator in a supervisory or disciplinary position when, based on records maintained by the district or received from law enforcement, it has information that, during the three previous school years, a pupil has engaged in, or is reasonably suspected to have engaged in, the following criminal or disruptive conduct at school, while going to or from school, or during a school sponsored activity:

- a) Causing, attempting, or threatening physical injury to another;
- b) Possessing, selling, or otherwise furnishing, a firearm, knife, or other dangerous object;
- c) Possessing, using or selling illegal drugs, alcohol, or drug paraphernalia;
- d) Committing or attempting to commit robbery or extortion;
- e) Damaging or attempting to damage school property;
- f) Stealing or attempting to steal school or private property;
- g) Committing an obscene act or engaging in habitual profanity or vulgarity;
- h) Possessing, offering, arranging or negotiating to sell, any drug paraphernalia;
- i) Disrupting school activities or otherwise willfully defying the valid authority of supervisors, teachers, administrators, school officials, or other school personnel engaged in the performance of their duties;
- j) Knowingly receiving stolen school or private property.

### **3.7 Opioid Antagonist Administration**

A school district shall make naloxone hydrochloride or another opioid antagonist available for emergency medical aid to any person suffering, or reasonably believed to be suffering, from an opioid overdose. (Ed. Code 49414.3)

School staff who may be required to administer naloxone or an opioid antagonist shall receive training from a qualified medical personnel.

### **3.8 Suicide Prevention**

The district recognizes that suicide is the leading cause of death among youth and that school personnel that regularly interact with students are often in the position to recognize the warning signs of suicide and to offer appropriate referral and/or assistance. In effort to reduce suicidal behavior, and its impact on students and families, the Superintendent or designee shall develop measures and strategies for suicide, prevention, and postvention.

Such measures and strategies shall include but are not limited to:

1. Staff development on suicide awareness and prevention and mental health referrals for teachers, administrators, school staff and other District employees who interact with students shall be made available in person or via online modules.
2. Instruction to students in problem-solving and coping skills to promote students' mental, emotional and social health and well-being, as well as instruction in recognizing and appropriately responding to warning signs of suicidal intent in others shall be delivered in developmentally appropriate language and approach.
3. Methods for promoting a positive school climate that enhances students' feelings of connectedness with the school and that is characterized by caring staff and positive relationships among students.
4. The provision of information to parents/guardians regarding risk-factors warning the signs of suicide, the severity of the suicide problem among youth, the District's suicide prevention curriculum, basic steps for helping suicidal youth, and/or school and community resources that can help youth in crisis. The policy on suicide prevention shall be posted on the OUSD website and accessible to parents/guardians and students in all grades.

**5. Encouragement for students to notify appropriate school personnel or other adults when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student's suicidal intentions. School personnel will respond within the scope of their credential or license.**

**6. Crisis intervention procedures for addressing suicide threats or attempts.**

**7. Counseling and other postvention strategies for helping students, staff and others cope in the aftermath of a student's suicide.**

**As appropriate, these measures and strategies shall specifically address the needs of students who are at high risk of suicide, including, but not limited to, students who are bereaved by suicide; students with disabilities, mental illness, or substance use disorders, students who are experiencing homelessness or who are in out-of-home settings such as foster care; and students who are lesbian, gay, bisexual, transgender or questioning youth. (Ed. Code Section 215)**

### 3.9 School Site Emergency

**PURPOSE:** every classroom should have a yellow stormcase iM2500 emergency roll kit. The equipment provided should only be used **in the event of a disaster emergency**, do not open the sealed box inside the kit. The contents are adequate to sustain a classroom of 25 students until more help arrives. **CONTENTS INCLUDE:**

- ☐ 60 Individually Wrapped WaterPackets.
- ☐ 2 - 2400 Calorie Food Bars - these items have a five-year shelf life.
- ☐ Users are instructed not to distribute food or water for the first 6-8 hours unless medically necessary. Water may also be used for first aid purposes.
- ☐ Basic First Aid Kit General supplies are provided with a First Aid Guidebook.
- ☐ 6-Mylar Blankets - (1) blanket is included in the Sanitation Kit to be used as a privacy screen. (5) separately packed 52" x 84" blanket - use for first aid, to cover broken windows, slow smoke or dust seeping through air vents, or group students together to provide warmth.
- ☐ Two 10-Hour Light Sticks In the event of a power outage or if students are entrapped through the night, the light sticks will provide enough light for the teacher in charge to keep the group secure.
- ☐ One Sanitation kit including:
  - 6 - Trash bag liners
  - 1 - Bio Hazard Bag
  - 6 - Cleansing Wipes
- ☐ Packet of Fluid Solidifier -this packet is wrapped individually and contains instructions.
- ☐ One collapsible toilet, sturdy enough to support 250 pounds. Teachers may not have restroom facilities available. This unit is equipped with a toilet and should be assembled in the event of longterm entrapments or lockdowns. Complete instructions are provided.

### 3.10 Emergency Phone

#### Monthly Emergency Phone Testing

Monthly emergency phone testing is on the **first Tuesday of every month** at 9:00am. On the **PUSH TO TALK FEATURE ON YOUR PHONE**, in the **EMERGENCY GROUP**, you will hear "This is your monthly emergency phone drill, please **DO NOT** respond, your site will be called individually." Please email [vilma.bermudez@ousd.org](mailto:vilma.bermudez@ousd.org) if you need assistance with your phone settings.

When your school name is called, please respond with the following script:

"This is {YOUR SITE NAME} responding."

***If you miss the emergency phone drill, DO NOT call the emergency group, please call "Emergency Services"***

***through the PUSH TO TALK feature on your emergency phone.***

# **MANDATORY SAFETY PROTOCOLS**

**PLEASE READ** - there is no discretion to deviate from these protocols.

A call to 911 (or 510-777-3211) shall be made for any “in progress crime” where the safety of the school site is at risk. School sites should refer to BP 5145.13 and BP 5145.14 regarding student and law enforcement contacts.

Additionally, it is mandatory to notify the Culture and Climate Unit at 510-874-7777 for all of the following incident types:

- Any incident involving guns, knives, or weapons
- Any recovery of weapons
- Injuries to students or staff
- Theft or loss of District property
- Disturbances or disruptions of the learning environment
- Individual or group demonstrations
- Assaults which cause physical injury to any person on a school site
- Gang related activity
- Any recovery of drugs
- Missing persons
- Mandatory reporting incidents
- Abductions, attempted abductions, including parental abductions & custody disputes
- Intoxicated students, staff, or other adults on school sites
- Any person who poses a threat to the safety of the campus, students, or staff
- All fires
- Any major property damage
- Gang, ethnic, hate, racial, vulgar, or objectionable graffiti found on District property
- Anytime there is a perceived need for Emergency Services

Below are step-by-step instructions for the most commonly asked questions regarding safety on campus. You will also find these protocols outlined in every Comprehensive School Site Safety Plan. Please ensure that all OUSD staff receives a copy of these safety protocols.

**Thank you for your part in fostering a safe environment for all students and staff at OUSD!**

## **1 - Protocol for Lockdowns**

**Principal or designee shall take the following steps, in the stated order:**

**Step 1: Contact OUSD Dispatch number (510-874-7777 ), if immediate threat contact 911**

**Step 2: Implement a School-Initiated Lock Down, "This is a Lockdown/Barricade."**

**Step 3: Contact the Network Superintendent's Office with details by email and phone**

**Network Superintendent Office shall:**

- **Forward "Incident Report" to Emergency Preparedness Manager and Superintendent's Office;**
- **Provide the Principal with follow-up steps if needed**

**[End of Lockdowns ]**



## 2 – Protocol for Secure School

**In the Event of a Secure School, the Principal or Designee Will Carry Out All or Some of the Following:**

- Law enforcement notifies school of police activities in the area OR you have firsthand account of threat to student and/or staff safety.
- Make announcement **“Secure School! Secure the perimeter.”**
- Designated staff will secure all perimeter access points.
- Teachers/staff will continue with class instructions or business inside the building.
- Contact law enforcement to assess the situation, who will advise of “All Clear.”

### **After Emergency:**

- **IMPORTANT:** On-scene law enforcement personnel will deactivate Lockdown by verbally providing “All Clear” and not by a phone call or any other method. Teachers will not release students until “All Clear” is provided from an on-scene law enforcement personnel.
- Students may return to regular schedule.
- If student release is necessary, follow Parent Release Protocols as outlined in the school site safety plan.
- District Office may provide psychological services to assist in the counseling of staff and students.
- Be prepared to provide input in After Action Report to Principal or designee.

**Please Note:** in violent or extremely dangerous situations, law enforcement may evacuate staff and students room by room. In this case, teachers and staff can expect to be escorted from their room by armed law enforcement or whose weapons may be drawn when the classroom door is opened. This may cause anxiety and fear among students, so do your best to calm the students prior to a law enforcement evacuation.

[end of Secure School]

### 3 - Protocol for Student Injuries

**Principal or designee shall:**

**(For minor injuries only)**

- Administer first aid, contact school nurse;
- Contact parent/guardian as necessary.

**(For major injuries: broken limbs, head trauma, dizziness, or life-threatening incidents)**

- Determine if 911 needs to be called
- If 911 call is NOT necessary, contact school nurse & parent or guardian immediately
- If parent/guardian is not available, leave a detailed voice message and call emergency contacts on the Emergency Card
- If injury is caused by structure or the physical grounds (e.g. pothole), have custodian to mark off or cover the area and place a work order in the system
- Complete the “Incident Report” form; document your initial action steps and FAX or PDF a copy directly to the Legal Department or and to the Network Superintendent’s Office

**Network Superintendent Office shall:**

- Forward “Incident Report” to Risk Management and Superintendent’s Office;
- Provide the Principal with follow-up steps if needed

[end of student injuries]

## 4- Protocol for Threats of Physical Harm on a School Site

### **Principal or designee shall take the following steps, in the stated order:**

Step 1: If immediate threat If immediate threat contact 911; if not an immediate threat, enlist support from the Culture & Climate Unit at dispatch number 510-874-7777

Step 2: Implement a School-Initiated Lockdown-Barricade/Secure School if the situation warrants it

Step 3: Contact the Network Superintendent's Office with details by email and phone.

### **Network Superintendent Office shall take the following steps, in the stated order:**

Step 1: Contact police if necessary.

Step 2: Contact Communications Department.

Step 3: Legal Office (Initiate a Restraining Order, where indicated)

Step 4: Alert school of next steps or follow-up via email/phone

Step 5: If a District employee is involved, Contact Tara Gard, Human Resources (Investigate & Issue Employee Discipline)

[end of threats of physical harm]

## 5 - Protocol for Suspected Child Abuse, Endangerment, or Sex Crimes

**ALL District employees shall take the following steps, in the stated order:**

- Step 1: Ensure child's physical, social, and emotional safety needs are met
- Step 2: Document student statement on CPS report form
- Step 3: Call CPS ([510-259-1800](tel:510-259-1800)) immediately with the written report completed and file the report with CPS within 36 hours
- Step 4: Notify Principal or Principal's Designee
- Step 5: Contact Regional or Network Mental Health Program Manager
- Step 6: If the suspect is an employee, contractor, or volunteer - contact the Network Office with details of the incident, name of employee, contractor, or volunteer.

**NOTE:DO NOT** prolong the notification time to CPS and Law Enforcement. This **MUST** be done prior to any other OUSD notifications

**Network Superintendent Office shall take the following steps, in the stated order:**

- Step 1: Notify Superintendent's Office and Legal Department
- Step 2: Contact Communications Department at (510) 879-8200
- Step 3: Contact HRSS (if employee, contractor, or volunteer is involved)

**CPS shall:**

- Coordinate with the Law Enforcement response to the incident.

**Law Enforcement shall:**

- Follow OPD guidelines and regulations for investigating child abuse, sex crimes and/or endangerment

[end of suspected child abuse]

## 6 - Protocol for Allegation of Weapons on Campus

### **Principal or designee shall take the following steps, in the stated order:**

**Step 1:** If someone in possession of a weapon is posing an immediate threat, or if there is an explosive device, call 911.)

**Step 2:** If applicable, follow the directions of OPD.

**Step 3:** Contact your Network Superintendent's Office with all the details of the incident and/or allegations.

**Step 4:** If a student is verified to have firearm, firearm muzzle, firearm silencer, bomb, grenade, rocket, missile, or mine, a written referral that includes the student's name must be made to law enforcement/criminal justice authority.

**Step 5:** If firearms are recovered call OPD Non-Emergency Line (510-777-3333) in order to promptly remove from campus.

Please note, that if a student or non-student is in possession of weapons on or within 1,000 feet of a school site (does not apply to imitation firearms), this information must be included in a quarterly written notification to the City Police or County Sheriff (this is an aggregate report that need not include student names).

### **Principal shall:**

- Begin the proper Discipline Hearing Process (DHP)
- Complete the "Incident Report" form; document your initial action steps and FAX or PDF a copy directly to the Legal Department and to the Network Superintendent's Office

### **Network Superintendent Office shall take the following steps, in the stated order:**

**Step 1:** Contact Communications Director

**Step 2:** Contact Regional Mental Health Program Manager

**Step 3:** Contact Risk Management and Superintendent's Office

**Step 4:** Alert school of next steps or follow-up via email/phone

[end of allegations of weapons]

## Section 4: Emergency Disaster Procedures and Drills

### Earthquake Procedures

#### In the classroom or office

At the first indication of ground movement, you should **DROP** to the ground. It will soon be impossible to stand upright during the earthquake. Getting to the ground will prevent being thrown to the ground.

You should seek protective **COVER** under or near desks, tables, or chairs in a kneeling or sitting position. You should **HOLD** onto the table or chair legs. Holding onto the legs will prevent it from moving away from you during the quake. Protect your eyes from flying glass and debris with your arm covering your eyes.

You should remain in the DROP position until ground movement ends. Be prepared to DROP, COVER and HOLD during aftershocks.

After ground movement ends, check for injuries and safely evacuate the building. Move to a safe, open area, away from power lines and other overhead hazards.

#### Earthquake procedures in other parts of the building

At the first indication of ground movement, you should DROP to the ground. Take COVER under any available desk, table, or bench. If in a hallway, drop next to an inside wall in a kneeling position and cover the back of the neck with your hands.

After ground movement ends, check for injuries and safely evacuate the building. Move to a safe, open area, away from power lines and other overhead hazards.

#### Earthquake procedures while outside

At the first indication of ground movement, move away from overhead hazards such as power lines, trees, and buildings. DROP to the ground and COVER the back of the neck with your hands. Be aware of aftershocks. Do not re-enter buildings until it is determined safe to do so.

While in a vehicle, you should pull over to the side of the road and stop. If you are on a bridge, overpass, or under power lines, continue on until you are away from the overhead dangers. Wait until the ground movement stops and check for injuries. Be aware of aftershocks, downed wires, or roads blocked by debris.

## Fire Procedures

- ☐ Evacuate the buildings immediately for any fire or suspected fire.
- ☐ Sound alarm if it has not already been done.
- ☐ **Call 9-1-1**, identify problem, school building address and location of fire (if known).

Never attempt to fight a fire larger than a wastebasket size. Even a small fire can generate enough smoke to cause serious injury. Never attempt to fight a fire by yourself. Call for help. Always stay between the fire and the exit.

### Fire Extinguisher Instructions:

- P** Pull safety pin from the handle
- A** Aim at the base of the fire
- S** Squeeze the trigger handle
- S** Sweep from side to side

If your clothes (or someone else's) catch fire, **STOP, DROP AND ROLL!**

- ☐ Upon arrival, the Fire Department will assume command.
- ☐ Principal will be accountable for teachers and school district staff. Teachers will be accountable for students.
- ☐ Notify Superintendent's Office.

## Emergency Lockdown

If it is determined that the safety and health of students and staff are in jeopardy, an announcement will be made to alert of potential danger. The Shelter-In-Place alert shall be given by the District.

**All schools will use the following announcement format “This is Lockdown-Barricade.” A messenger must be sent to outdoor fields and tracks. Upon hearing this announcement, the following steps must be implemented:**

- ☐ Teachers should quickly check halls and get students into classrooms or if safe to do so, evacuate away from incident.
- ☐ Lock doors, close blinds.
- ☐ Teachers will keep all students in the classroom until an all clear has been sounded.
- ☐ Teachers will maintain (as best they can) a calm atmosphere in the classroom, keeping alert to emotional needs of students.
- ☐ Staff without students will report to the office for instruction or as otherwise directed.
- ☐ Head secretary will operate the phones and radio. Please use site communication system (radio, Crisis Go, etc) to keep staff informed.
- ☐ Staff will not evacuate or leave their assigned area unless authorized by Principal or Emergency Services.
- ☐ When the emergency is over, a coded "all clear" will be announced.
- ☐ The Crisis Response Team will meet to determine needs of school.
- ☐ Each staff member will document exactly what occurred in their area of responsibility. This will be done as soon as possible.

## Secure School

In the Event of a Secure School, the Principal or Designee Will Carry Out All or Some of the Following:

- ☐ Law enforcement notifies school of police activities in the area OR you have firsthand account of threat to student and/or staff safety.
- ☐ Make announcement “Secure School! Secure the perimeter.”
- ☐ Designated staff will secure all perimeter access points.
- ☐ Teachers/staff will continue with class instructions or business inside the building.
- ☐ Contact OPD to assess the situation. OPD will advise of “All Clear.”

## After Emergency:

- ☐ **IMPORTANT:** On-scene law enforcement personnel will deactivate Lockdown-Barricade and Secure School by verbally providing “All Clear” and not by a phone call or any other method. Teachers will not release students until “All Clear” is provided from an on-scene law enforcement personnel.
- ☐ Students may return to regular schedule.
- ☐ If student release is necessary, follow Parent Release Protocols as outlined in the school site safety plan.
- ☐ District Office may provide psychological services to assist in the counseling of staff and students.
- ☐ Be prepared to provide input in After Action Report to Principal or designee.

**Please Note:** in violent or extremely dangerous situations, law enforcement may evacuate staff and students room by room. In this case, teachers and staff can expect to be escorted from their room by armed law enforcement or whose weapons may be drawn when the classroom door is opened. This may cause anxiety and fear among students, so do your best to calm the students prior to arrival of Law enforcement.



## Shelter-in-Place

When instructed or when an alerting system triggers to shelter-in-place, please:

- ☐ **SHELTER.** Go inside the nearest building or classroom and remain there. You are looking for enclosed protection from the outside.
  - Students should also be advised to do the following when possible:
  - Select rooms on higher floor levels and avoid basements.
  - Select an internal room or a room with as few windows as possible.
  - Choose a room with bathroom facilities and water. You may need to shelter in place for an extended period of time.
- ☐ **SHUT.** Close all doors and windows. The tighter and more complete the seal the better. Close as many windows and doors between the outside and your shelter-in-place room as possible. Close curtains and then stay away from the windows.
- ☐ **LISTEN.** Remain quiet to hear critical instructions from school officials.

## School Sites as Mass Care Shelters

Use of School Buildings: California law, as stated by the "Katz Bill", requires public and private school districts and school authorities to make their facilities available as public shelter sites in a declared disaster. This makes school facilities, especially larger high school buildings, a logical first choice for shelter operations in an event where there has been widespread destruction. However, use schools as public shelters only when other resources are unavailable. First, schools may already be sheltering their own student population. Second, a community needs to resume normal activities as soon as possible after a disaster. Therefore, in short time the shelter population will need to be moved from the school, so that students can ultimately return to classes.

Oakland Unified School District has a Memorandum of Understanding with the City of Oakland to use OUSD school sites as mass care shelters in the case of an emergency or a catastrophe.

## Section 4: Emergency Lockdown

This is a Lockdown/Barricade

## Section 4: Fire and Earthquake Drill Schedule

### Fire and Earthquake Drill Schedule

Month	Date	Time	Fire/Earthquake
August	8/29/2025	9:00 AM	Fire
September	9/12/2025	9:00 AM	Both
October	10/17/2025	9:00 AM	Both
November	11/14/2025	9:00 AM	Fire
December	12/12/2025	9:00 AM	Both
January	1/23/2026	9:00 AM	Both
February	2/20/2026	9:00 AM	Fire
March	3/20/2026	9:00 AM	Both
April	4/17/2026	9:00 AM	Fire
May	5/22/2026	9:00 AM	Both

### Lockdown Drill Schedule

	Date	Time
Fall	9/26/2025	9:00 AM
Spring	4/10/2026	9:00 AM

## Emergency Evacuation: Principal's checklist

- ☐ Determine appropriate evacuation areas that have been pre-designated.
- ☐ Activate alarm/PA system or send messenger, if safe to do so.
- ☐ Telephone emergency service personnel:
  - **9-911**
  - **Superintendent's office**
  - **Utilities**

### Activate key personnel to:

- ☐ Attend to the injured.
- ☐ Assure complete evacuation and student/staff are accounted for.
- ☐ Ensure special needs students are evacuated accordingly.
- ☐ Secure school for specific emergency.
- ☐ Clear road/fire lanes for emergency vehicles (pre-assigned).
- ☐ Assure that injured students/staff are reported to medical services for care and transportation to hospital/emergency medical center.
- ☐ Be contact person for emergency services, District, utility and/or news media personnel and provide needed aid (pre-assigned).
- ☐ Direct employees to aid those from the emergency services, District, utilities and other authorities. Avoid entering damaged areas unless specifically asked.
- ☐ Assure the facility is thoroughly inspected by the custodian, fire officials and District Operation personnel before re-entry is allowed.
- ☐ Seek Superintendent or designee approval for school closure if damage cannot be immediately restored or repaired.
- ☐ If possible, have students/staff re-enter parts of the school that are declared safe.
- ☐ Make sure all students/staff are accounted for once outside.

### If it is necessary to evacuate to another school or relief center, the Principal will:

- ☐ Contact the Superintendent or designee.
- ☐ Cooperate with emergency authorities in enlisting students/staff with cars to help transport evacuees.
- ☐ Direct the evacuation, assure all students/staff are accounted for as they depart and arrive.

## **Emergency Student Release Procedures**

1. The Oakland Unified School District will keep and care for all students in an emergency situation (such as loss of electrical power, wind/rain storms, earthquakes, etc.) until the end of the school day or longer if the emergency dictates.
2. Should conditions exist that make transportation impossible, students will be kept at school until the parent, guardian or an authorized adult comes to check the student out of school. In such conditions it is expected that parents/authorized adults will come as soon as possible to pick up their student(s).
3. If electrical power has not been disrupted, only high school parents/legal guardians may have their student(s) released, as per normal absence/release procedures.
4. In all situations, the superintendent may make other decisions dependent on the type of emergency. During any community-wide emergency, please listen to the radio for pertinent information.
5. Those who arrive during an emergency to check a student out of school will go through the designated release procedures: typically the school will record the time, student's name, and the name of adult to whom the student is being released and address or destination.

***If the emergency situation does not extend beyond normal school hours, students will be released as usual at the end of the school day.***

## Emergency Evacuation: Employees checklist

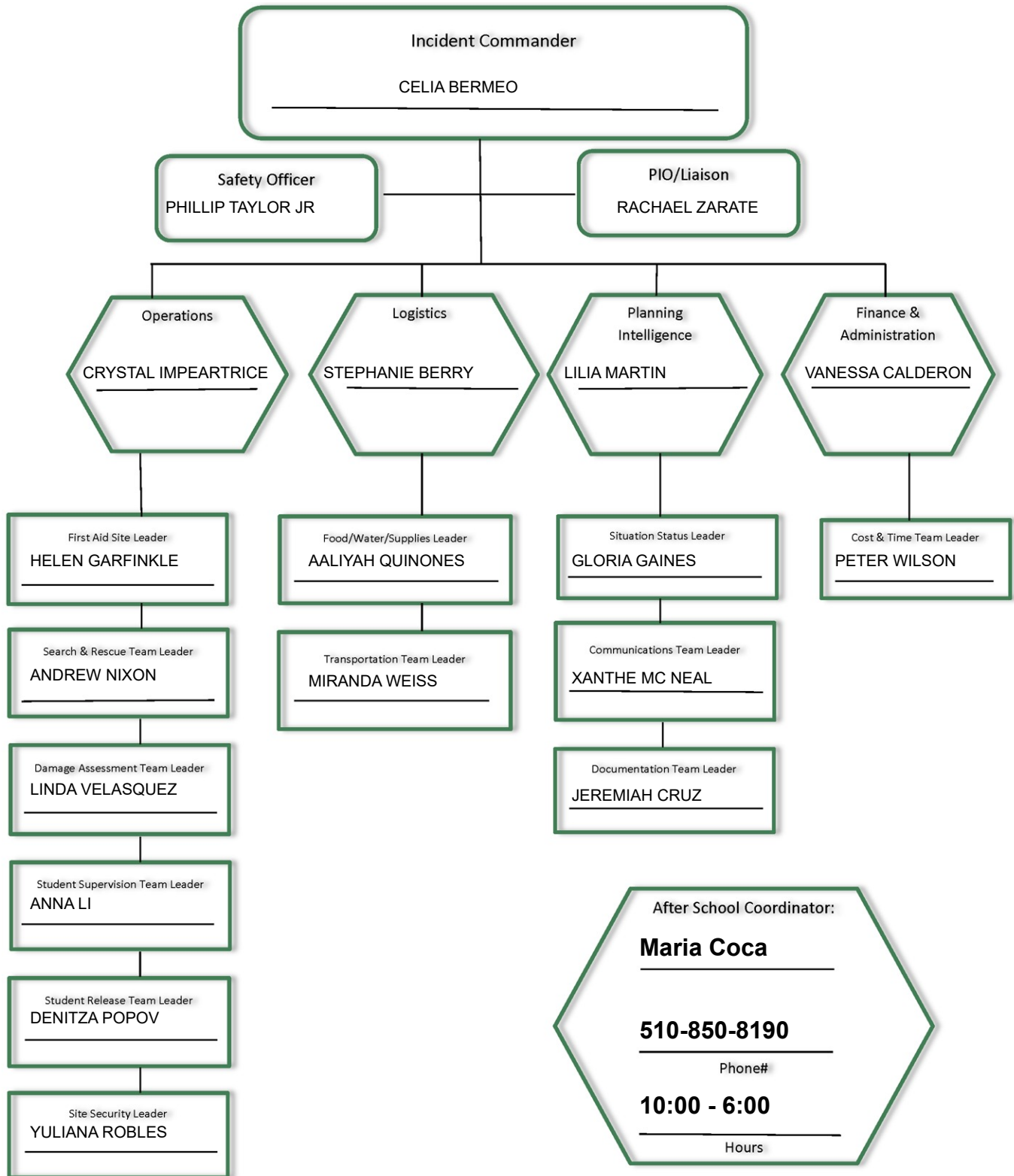
- ☐ Upon emergency alert, secure work area as advised and depart/report to assigned area.
- ☐ Perform duties as pre-assigned by the Principal in cooperation with emergency services personnel.
- ☐ DO NOT re-enter the building without permission or request of emergency service authorities.
- ☐ Remain in the general assembly areas and calm students if not assigned another duty.
- ☐ If dismissed, inform Principal of departure.
- ☐ When signaled to re-enter safe areas of the school, quickly do so.
- ☐ Upon safe re-entry, report anything amiss to the Principal.

## Emergency Evacuation: Teachers checklist

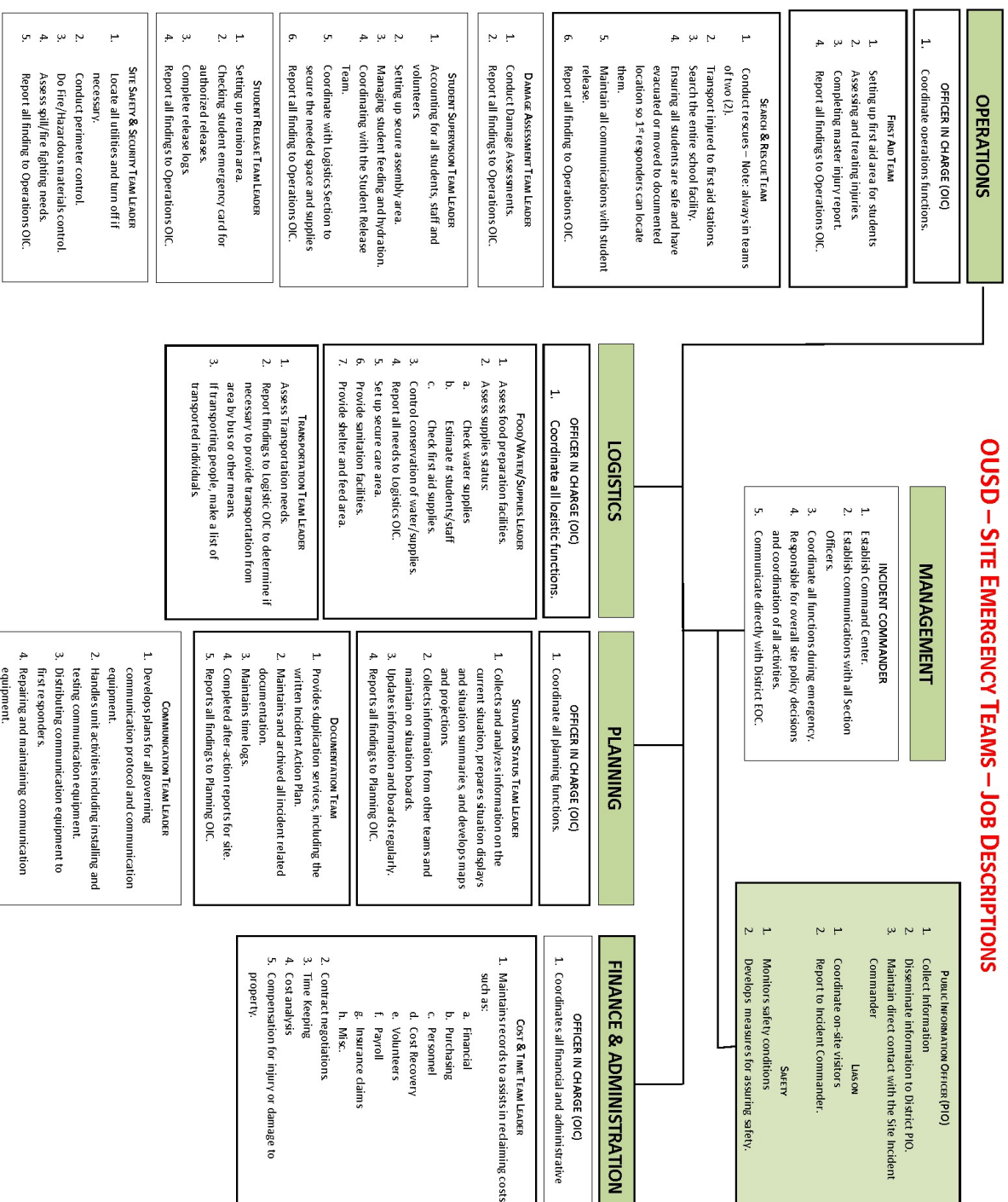
- ☐ Upon alert, assemble students for evacuation using designated routes and account for all students
- ☐ Secure room as advised
- ☐ Upon arrival at the assembly area, account for all students.
- ☐ Secure medical treatment for injured students.
- ☐ Report any students missing or left behind because of serious injuries.
- ☐ Stay with and calm students.
- ☐ If closure is ordered with no re-entry, when advised, release walkers and car/passengers (unless drivers are needed to evacuate students from the site) accounting for those who have left. Stay with bus riders until buses arrive.
- ☐ If signaled to re-enter school, assure students do so quickly and calmly. Account for all students.
- ☐ Check room and report anything amiss to the Principal.
- ☐ Debrief students to calm fears about the evacuation.

## Section 5: Chain of Command

### Fruitvale Elementary School



## OUSD – SITE EMERGENCY TEAMS – JOB DESCRIPTIONS





## Section 6: Safe Ingress and Egress

Your OUSD Emergency Phone Number

Beyond planning for daily ingress/egress routes and emergency evacuation routes, schools must plan for assisting students, staff and visitors with disabilities. Under the ADA (Americans with Disabilities Act of 1990), individuals who are deaf/hard of hearing, blind/partially sighted, mobility impaired and/or cognitively/emotionally impaired must be assisted.

**A. Plan for people with disabilities (ADA)** ☐ **N/A** (Note: If you do not have any special needs populations at your school, please click NA box.)

Please include the following information: 1) How many students with disabilities are there? 2) Where are they located? 3) Description of disabilities. 4) Any other relevant info

We have 2 Mild/Moderate SDC classes and 1 counseling Enriched class on campus. 1 K/1 SDC with 13 students in Room 2, 1 2/3 SDC with 13 students in Room 12, and 1 3/5 Counseling Enriched with 13 students in Room 17. Resource program with 24 students.

### Special Needs Population In Detail.

List the specific number of each special needs type on site.

Special Needs Type	Abbreviation	Total
Intellectually Disabled	ID	<input type="text" value="4"/>
Hard of Hearing	HH	<input type="text" value="2"/>
Deaf	DEA	<input type="text" value="0"/>
Speech & Language Impairment	SLI	<input type="text" value="14"/>
Visually Impaired	VI	<input type="text" value="0"/>
Emotionally Disturbed	ED	<input type="text" value="3"/>
Orthopedically Impaired	OI	<input type="text" value="0"/>
Other Health Impaired	OHI	<input type="text" value="9"/>
Specific Learning Disability	SLD	<input type="text" value="6"/>
Deaf / Blind	DB	<input type="text" value="0"/>
Multipally Disabled	MD	<input type="text" value="0"/>
Traumatic Brain Injury	TBI	<input type="text" value="0"/>
Autism	ATSM	<input type="text" value="23"/>
Est Medical Disability	EMD	<input type="text" value="0"/>

### Determine proper signage and equipment.

(What equipment and signage is on-site to help people with disabilities?)

Disabled Persons Signs, elevators, ramps, portable with ramps, handicap parking.

### Training staff to assist individuals with disabilities.

At least 1 name / title combination must be complete.

Name: Stephanie Berry	Title: Teacher
Name: Renee Schmitz	Title: Teacher
Name: Zuri Clarke-Jones	Title: Para Educator
Name: Maddy Murphy	Title: Para Educator
Name: Maisha English-Smith	Title: Classroom Aide

## Section 6: On Campus Evacuation - Rally Point Map

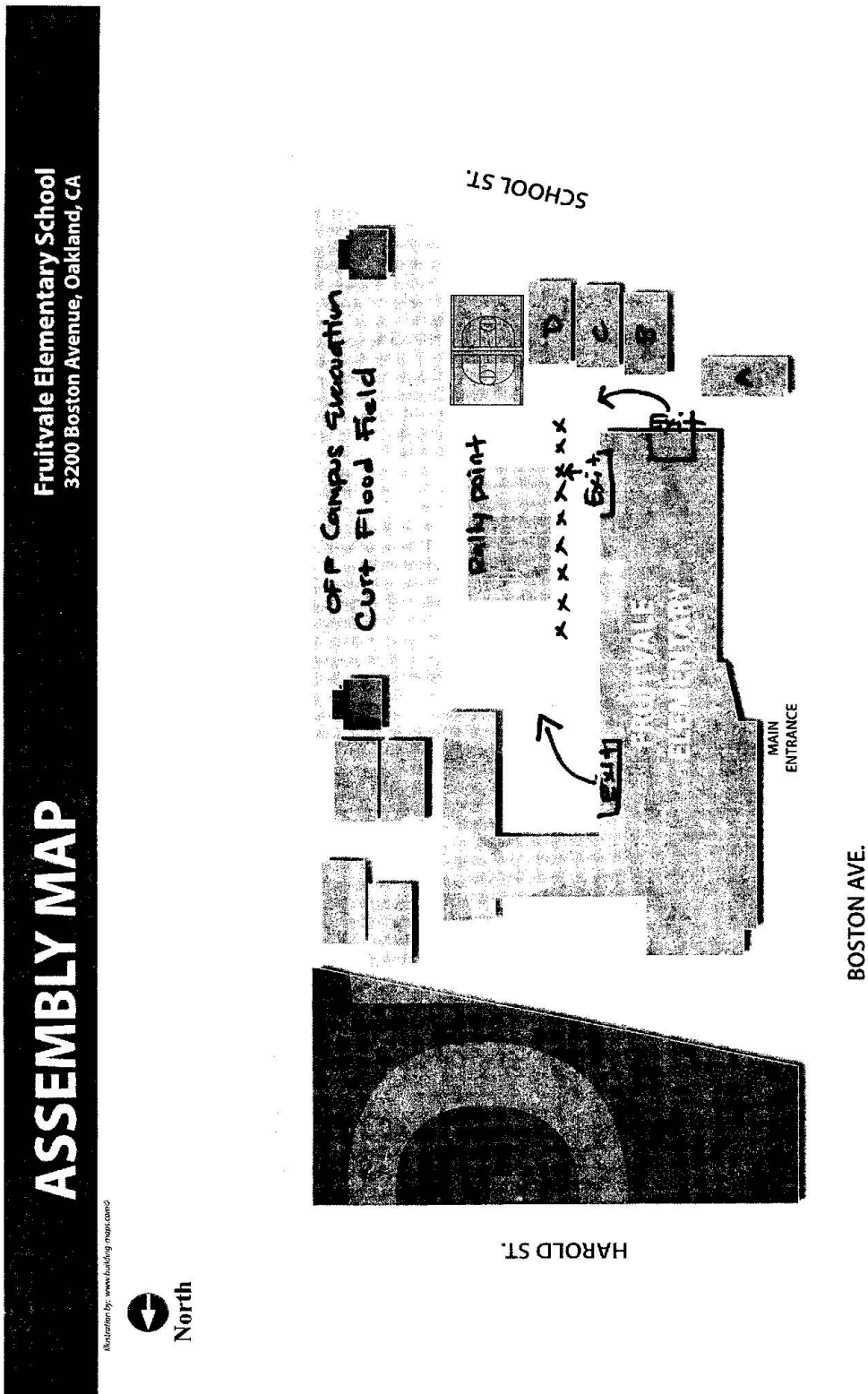
Schools must identify and clearly mark "rally point location" on campus map with evacuation routes (indicated with arrows) pointing to the assembly location.

### On-Campus Assembly/Rally Point Location

Describe on-campus evacuation/assembly/rally point location.

Playground.

☒ Upload Copy of Map ☐ Use Last Years Map



Section 6: Off Campus Evacuation - Rally Point Map

Schools must identify the location of potential evacuation sites based on the potential circumstances that may cause movement/relocation of the school population in the event of an emergency.

Off-Campus Evacuation/Assembly/Rally Point Location

a-1. Description/Name of location: Curt Flood Field, Right behind school

Establish a memorandum of agreement with the evacuation site.  
Name of person or organization memorandum was established with:

City of Oakland

C. Date of Agreement: 5/30/2013

a-2. Please enter the Street Address of the Off-Site Campus Evacuation/Rally Point Location. Please don't enter the city, state, or zip code.

A. School Street Address:

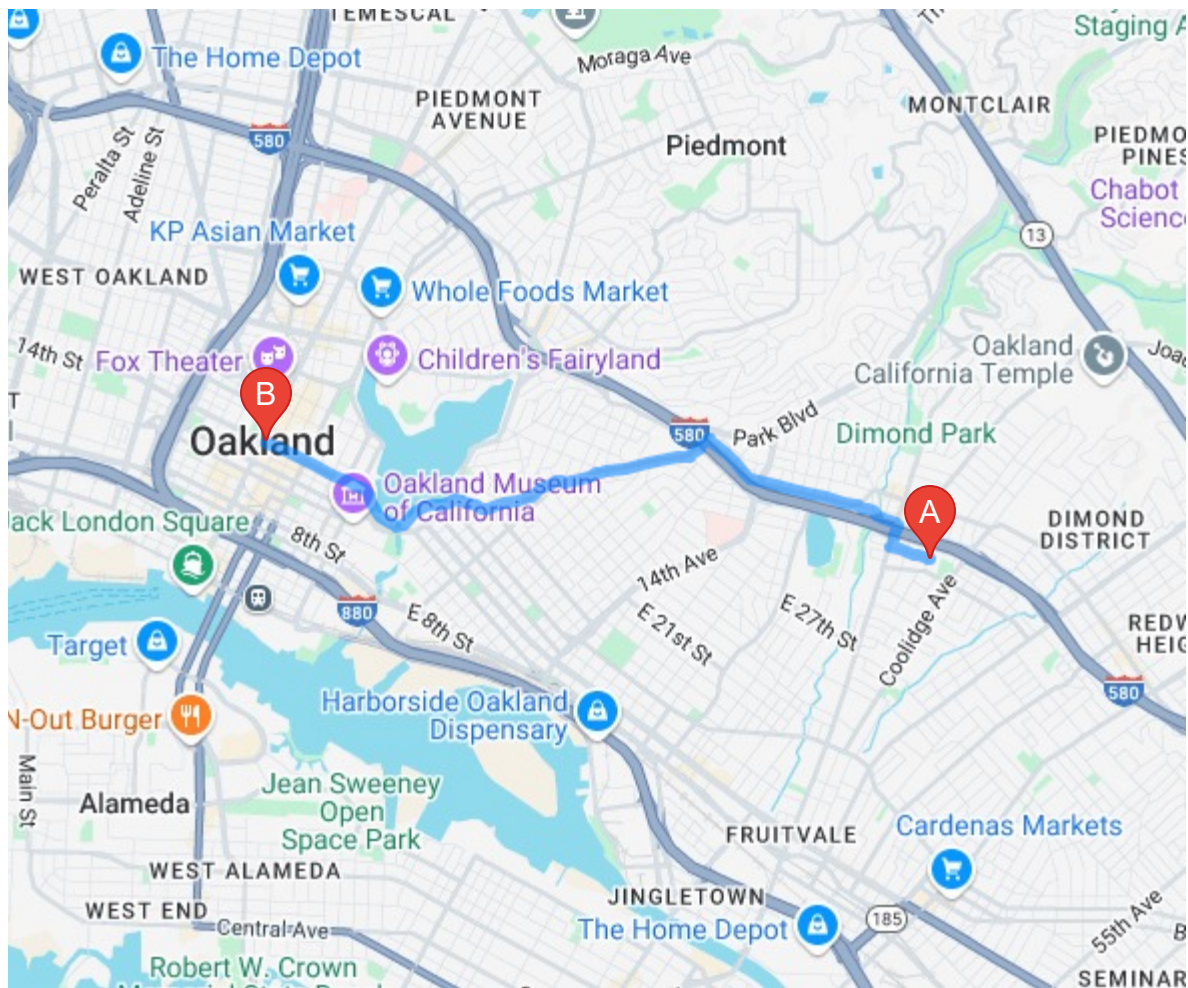
3200 Boston Avenue

, Oakland, CA

B. Evacuation/Rally Point Street Address:

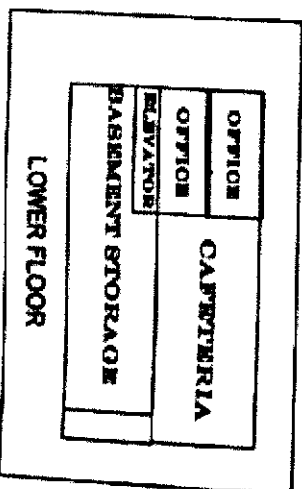
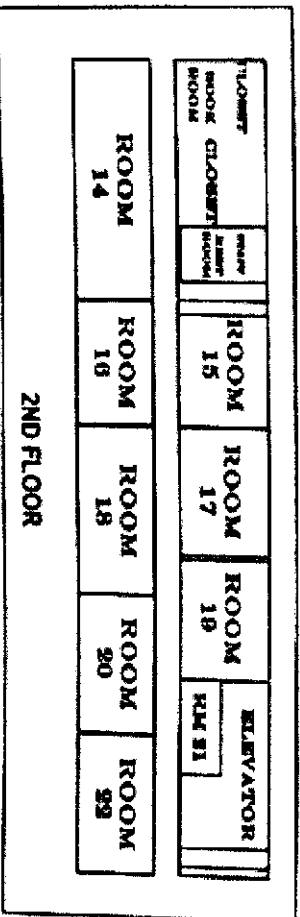
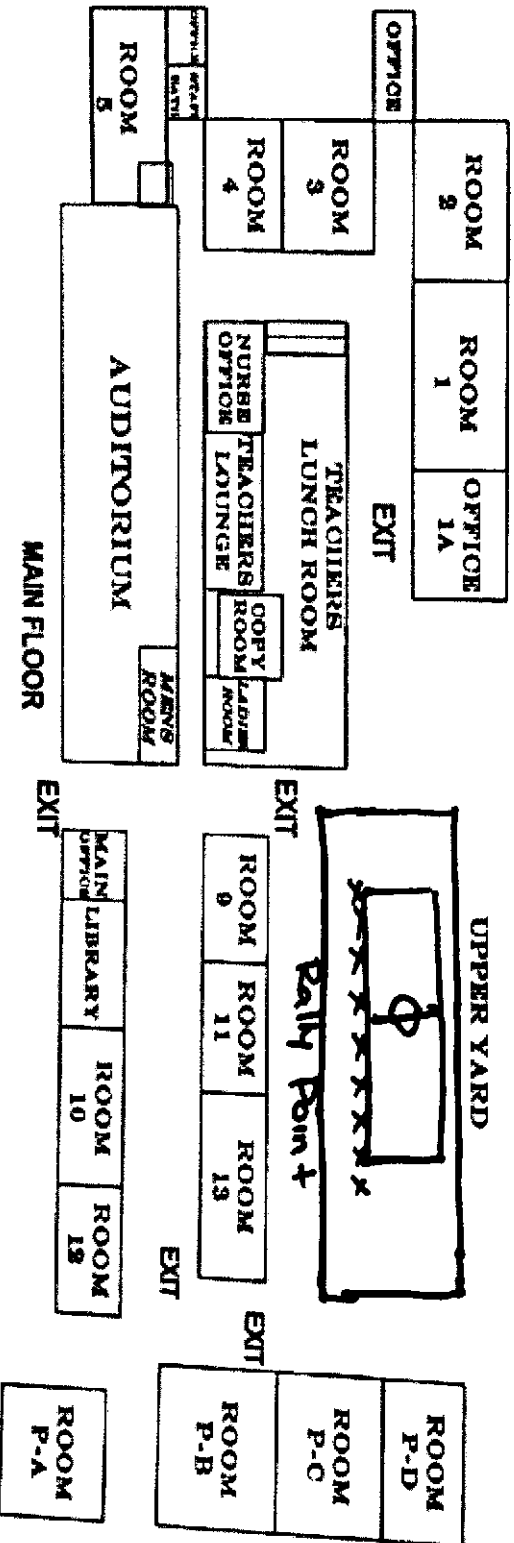
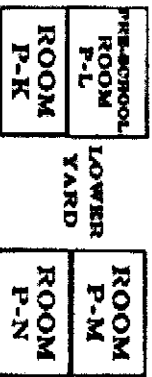
Coolidge Ave and School

, Oakland, CA



FRUITVALE ELEMENTARY SCHOOL  
 OAKLAND UNIFIED SCHOOL DISTRICT  
 3200 BOSTON AVENUE - OAKLAND, CA 94602-2899 - (510) 879-1170

*off Camp's evacuation  
 Curt Flood Field*



## Section 7: OUSD Emergency Response and Notification Protocol

### OUSD School Crisis Response Protocol 2022-23 (draft)

#### SCHOOL CRISIS

School crises arise from an unpredictable traumatic event that affects the psychological well-being of those in the school community. Following a crisis, teams must consider not only the different aspects of response, including safety and communication, but also the psychological reactions to the event and the degree to which individuals are affected in the educational setting.

#### EXAMPLES OF SCHOOL CRISES

- A serious accident on or near school grounds.
- A shooting or other violent incident in close proximity to the school grounds.
- The death or homicide of a student, staff or a family member of a student or staff.
- The suicide of a student, staff or a family member of a student or staff.
- The terminal illness of a student or staff member.
- A bomb threat.

#### CRISIS RESPONSE

The goal of crisis response is to help students and staff cope effectively with the distress that results from the crisis, and help individuals and the school community heal and return to equilibrium following the crisis.

THIS PROTOCOL IS FOR **POST** CRISIS RESPONSE.

During an actual crisis - refer to your *Comprehensive School Site Safety Plan*.

District Crisis Responders	Step 1	Step 2	Step 3	Step 4
<b>Principals contacts:</b>	911 (if appropriate) Secures campus (as needed)  Informs Site Safety Team	OUSD Intake Manager at 874-7777  Network Superintendent	Contacts family of impacted students or staff to verify information and offer support  Drafts letter to school community (staff and parents) with District Communications Director  Distributes letter and calls an emergency staff meeting the following school day	Reviews letter and action plan with Teachers/Staff at an emergency informational meeting

Updated 9.1.2021 by B. McClung & M. Karigaca, Community Schools & Student Services Dept.



## Section 7: OUSD Emergency Response and Notification Protocol

### OUSD School Crisis Response Protocol 2022-23 (draft)

District Crisis Responders	Step 1	Step 2	Step 3	Step 4
<b>OUSD Intake Manager (Kim Bui 874.7777)</b>	Director of Safety  Coordinator of Safety  Coordinator of Culture Keepers	Completes Intake Log		
<b>Network Superintendent contacts:</b>	Principal	Network Partner (deploys to site)	Network Behavioral Health Program Manager (deploys to site)	Chief Academic Officer (Sondra Aguilera)
<b>Director of Safety (Misha) Contacts:</b>	Behavioral Health Team	CSSS Lead Team	Deploys to site	
<b>OUSD Communications Director (John Sasaki) contacts:</b>	Legal Superintendent	Risk Management (as needed)	Determines scope of communication (internal and external)  With Principal drafts all communications related to crisis	Manages all communication with external media/reporters
<b>Behavioral Health Director contacts:</b>	Network Behavioral Health Partner	Director of Psychological Services, SPED	Communications Director	City County CBO Partners (as appropriate)
<b>Coordinator of Safety Contacts:</b>	Central Culture and Climate Ambassadors	Site Based Culture and Climate Ambassadors	Coordinator of Culture Keepers	Deploys to site (if appropriate)

Updated 9.1.2021 by B. McClung & M. Karigaca, Community Schools & Student Services Dept.

## Section 7: OUSD Emergency Response and Notification Protocol

### OUSD School Crisis Response Protocol 2022-23 (draft)

District Crisis Responders	Step I	Step 2	Step 3	Step 4
Network Behavioral Health Program Manager contacts:	Site Principal	Site based mental health providers including SPED	Deploys to site and organizes site Crisis Response Team	Coordinates crisis response and follow-up debriefing with Site Crisis Response Team
Site Crisis Response Team duties:	Verifies information about the event; identifies impacted students and staff	Informs teachers and students of the traumatic event and available support	Organizes a space and delivers psychological first aid to students and staff (including expanded learning staff)	Documents supports provided and plans for ongoing support throughout the week

Live Document can be found at: [OUSD School Crisis Response Protocol \(draft\)](#)

## Section 8: Other Programs/Services on Campus

**After School Coordinator Name:**Mari Coca **Phone:**510-850-8190

**After School Coordinator Name:**Javoni Redden **Phone:**510-820-9404

**Hours of Operation:** M, T, Thurs, Fri. 2:45 to 6:00pm Wed. 1:25-6:00

**# of Staff:** 12

**# of students:** 93

**# of Staff:** 12

**# of special needs students:** 0

**# of special needs coordinators:** 0

**Primary on-campus evacuation location:** Playground

**Secondary off-campus evacuation location:** Curt Flood Field

**Notification sent to Parents?** Yes Flyer, calls

**Emergency Staff Notification Method:** Mass Text

**Student reunification policy established?** Yes

**After School Safety team established?** Yes

**After School Safety Team Name:**Mari Coca **Phone:**

**After School Safety Team Name:**Nagat Mohamed **Phone:**

**After School Safety Team Name:**Zuri Clark Jones **Phone:**



**CURRENT AFTER SCHOOL PROGRAM SCHOOL SITE SAFETY PLAN 2025-2026****AFTER SCHOOL PROGRAMS**

It is important to have a comprehensive safety plan that covers all programs on your school site during regular school hours (8:00a.m.-3:00p.m.) as well as after school hours (3:00p.m. -6:00p.m.). Please work with your Principal on the safety planning details to include students in after school programs.

After School Coordinator Name/Contact 1:	Name:Maria Coca Phone:5108508191
After School Coordinator Name/Contact 2:	Name: JaVoni Redden Phone:5108209404
Hours of Operation:	Mon-Fri: 2:45-6:00 pm Wed: 1:30-6:00 pm :
Number of Staff:	13
Number of Students:	130
Number of Special Needs Students:	6
Number of Special Needs Coordinators:	0

Primary on-campus evacuation location:	Soccer Turf
Secondary off-campus evacuation location:	Curt Flood Field
Notification sent to parents	Parent Square, Phone Call
Emergency Staff Notification Method:	Walkies, cell phones, Intercom

Student Reunification policy established?	
Has "after school staff on safety team" completed the mandatory ICS100/200 training?	Yes/ No (if no, please follow these two links to complete online: IS-100.S Ca Introduction to the Incident Command Systems for Schools: <a href="http://training.fema.gov/EMIweb/IS/IS100SCA.asp">http://training.fema.gov/EMIweb/IS/IS100SCA.asp</a> IS-200.b (ICS200) ICS for Single Resources and Initial Action Incidents <a href="http://training.fema.gov/emiweb/IS/IS200b.asp">http://training.fema.gov/emiweb/IS/IS200b.asp</a>
After School Safety Team established?	YES
List safety team members name:	Safety team member 1: Maria Coca_____ Safety team member 2: JaVoni Redden_____ Safety team member 3:Patricia Arevalo_____ Safety team member 4:Vanessa Quintilla_____ Safety team member 5: Nagat Mohamed_____

CURRENT AFTER SCHOOL PROGRAM SCHOOL SITE SAFETY PLAN 2025-2026

Enter Site Name: Fruitvale Elementary

Command

Role	Reports To	Assigned To
Incident Commander	Not Applicable	Maria Coca
Public Information Officer/Liaison	Incident Commander	John Sasaki

Operations

Role	Reports To	Assigned To
Operations Section Chief	Incident Commander	Patricia Munoz
First Aid Lead	Operations Section Chief	Caleigh Russel
Search and Rescue Lead		Patricia Munoz
Damage Assessment Lead		Caleigh Russel
Student Supervision Lead		JaVoni Redden
Student Release Lead		JaVoni Redden
Site Safety and Security Lead		JaVoni Redden

Logistics

Role	Reports To	Assigned To
Logistics Section Chief	Incident Commander	Zuri Jones clark
Food/Water/Shelter/Supplies Lead	Logistics Section Chief	Zuri Jones Clark
Transportation Lead		Nagat Mohhamed

Planning

Role	Reports To	Assigned To
Planning Section Chief	Incident Commander	Zachary Smith
Situation Status Lead	Planning Section Chief	Zachary Smith
Documentation Lead		Zachary Smith

Finance and Administration

Role	Reports To	Assigned To
Finance and Administration Section Chief	Incident Commander	ms Denzita
Cost and Time Lead	Finance and Administration Section Chief	ms Denzita

## CURRENT AFTER SCHOOL PROGRAM SCHOOL SITE SAFETY PLAN 2025-2026

### Fire and Earthquake Drill Schedule – After School Program

The After School Coordinator shall hold at least two fire and two earthquake drills every school year.

Sites are strongly encouraged to conduct both Earthquake and Fire drills on the same day when possible.

MONTH	Type of Drill	DATE	TIME
September	Fire drill	9/19/2025	3pm
October	Earth Quake drill	10/3/2025	3pm
November	Fire drill	11/14/2025	3pm
December	Earth quake drill	12/12/2025	3pm
January	Fire drill	1/16/2026	3pm
February	Earth quake drill	2/13//2026	3pm
March	Fire drill	3/24/2026	3pm
April	Earth quake drill	4/10/2026	3pm
May	Fire drill	5/8/2026	3pm

☐ NOTE: Please check this box if your site will be conducting both Earthquake and Fire drills on the same day.

### LOCKDOWN/SECURE SCHOOL Drill Schedule – After School Program

The After School Coordinator shall hold two lockdown drills every school year at elementary, middle and high school levels.

SEMESTER	DATE	TIME
Fall	9/26/2025	3pm
Spring	3/20/2026	3pm

# **EMERGENCY PLAN FOR STUDENTS WITH SPECIAL NEEDS**

OAKLAND UNIFIED  
SCHOOL DISTRICT

*July 2016*



**OAKLAND UNIFIED  
SCHOOL DISTRICT**

*Community Schools, Thriving Students*

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# **Emergency Plan for Students with Special Needs**

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## **Emergency Management Plan**

The Emergency Management Plan consists of several components including the Model Plan, Appendices with Checklists, Forms, Sample Memos and Agreements, and Annexes. The Emergency Annex for Students with Special Needs is an incident management strategy that serves to augment the Oakland Unified School District Emergency Management Plan. In order to ensure efficient and effective emergency management, the Model Plan must be implemented in its entirety.

### **I. PURPOSE OF THE PLAN**

The information contained in this document will assist school administrators, teachers, special education staff, parents, and students in planning for the support that may be required for students with special needs in the event of an emergency. For the purposes of this annex, students with special needs are those who cannot comfortably or safely access and use the standard resources offered in disaster preparedness, relief and recovery, whether their disability is chronic or temporary.

This plan includes procedures ensuring the full participation of students and staff with special needs and disabilities through the planning and implementation of mitigation, preparedness, response and recovery strategies as part of the overall management of school emergencies and disasters. Current thought identifies this population as those with access and functional needs (AFN).

#### **A. Presidential Mandate**

On July 22, 2004, President George W. Bush signed Executive Order 13347, Individuals with Disabilities in Emergency Preparedness, which added to existing legislation policy to ensure that the safety and security of individuals with disabilities are appropriately supported and requires public entities to include the unique needs of individuals with disabilities in their emergency preparedness planning.

## **B. Planning Needs and Assumptions**

For individuals with special needs, physical environments become a great deal more hostile and difficult to deal with during and after an emergency. The ability to get to accessible exits and personal items may be reduced. Communication may be impeded at a time when clear and rapid communication is crucial to safety and survival.

To comply with statutes involving students with special needs, individuals responsible for evacuation and emergency operation plans, notification protocols, shelter identification, emergency medical care and other emergency response and recovery programs must:

- **have sound working knowledge** of the accessibility and nondiscrimination requirements applicable under Federal disability rights laws;
- **know the special needs demographics** of the students attending classes on site;
- **involve students** with different types of disabilities, staff, and teachers in identifying the communication and transportation needs, accommodations, support systems, equipment, services, and supplies that they will need during an emergency;
- **consider emergency accommodations** for those with temporary disabilities;
- **identify existing resources** within the school and local community that meet the special needs of these students;
- **develop new community partners** and resources, as needed;
- **inform parents** about the efforts to keep their child safe at school;
- **identify medical needs** and make an appropriate plan;
- **determine transportation needs**, special vans and buses for students;
- **identify any necessary tools** such as personal response plans, evacuation equipment or visual aids;
- **include local responders** and establish a relationship with individual students with disabilities and their teachers.



## **II. STATUTES FOR SERVICES IN SCHOOL**

Federal law mandates that every child will receive a free and appropriate public education (FAPE) in the least restrictive environment. Children who experience difficulties in school due to physical or psychiatric disorders, emotional or behavioral problems and/or learning disorders or disabilities are entitled to receive special services or accommodations through the public schools. To support their ability to learn in school and participate in the benefits of any district program or activity, including emergency preparedness and school safety plans, three Federal laws apply to children with special needs:

- Americans with Disabilities Act of 1990 (amended 2008)
- Individuals with Disabilities Education Act of 1975 (amended 2006)
- Section 504 of the Rehabilitation Act of 1973 (revised 1978)

### **A. Americans with Disabilities Act of 1990**

The Americans with Disabilities Act (ADA) of 1990, including amendments which became effective in 2009, provides “a clear and comprehensive national mandate for the elimination of discrimination against individuals with disabilities.” The ADA prohibits the exclusion of any qualified individual with a disability, by reason of such disability, from participation in or benefits of educational services, programs or activities.

### **B. Individuals with Disabilities Education Act (IDEA)**

The Individuals with Disabilities Education Act (IDEA) is a 1975 federal law, amended by the Office of Special Education Programs in 2006, which ensures services to children with special needs throughout the nation.

IDEA specifies 13 primary categories under the lead definition of a “child with a disability.” (See Table 1, Categories of Disability Under IDEALaw.) These federal definitions guide how states define who is eligible for a free, appropriate public education under special education law. The IDEA requires the school to provide an individualized educational program (IEP) that is designed to meet the child's unique needs and provide the child with educational benefit.

#### **Individual Education Program (IEP)**

IDEA requires that planning for the educational success of these students is done on an individual, case-by-case basis through the development of an Individual Education Program (IEP). The IEP is a written statement developed for each child with a disability that outlines measurable annual goals for each child's academic achievement and functional performance and specifies accommodations and modifications to be provided for the student.

Students with special needs who are self-sufficient under normal circumstances may have to rely on others in an emergency. They may require additional assistance during and after an incident in functional areas, including, but not limited to: communication, transportation, supervision, medical care and reestablishing independence. While not explicitly stated, a component of the IEP for related services must consider the particular needs of the child to ensure his or her safety during an emergency that includes evacuation from a classroom and building.

### **C. Section 504 of the Rehabilitation Act of 1973**

In 1978, the U.S. Department of Education (DOE) issued regulations to implement Section 504 of the Rehabilitation Act of 1973. These regulations applied to institutions receiving federal funds. Section 504, as revised, states in part: “No otherwise qualified individuals with disabilities in the United States . . . shall, solely by reason of the disability be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.”

Under Section 504, any student who has a physical or mental impairment that substantially limits one or more major life activities\*, has a record of such an impairment and is regarded as having such an impairment is considered disabled. Typically, children covered under Section 504 either have impairments that do not fit within the eligibility categories of IDEA or that may not be as apparent as those covered under IDEA.

The Individualized School Healthcare Plan (ISHP) articulates the healthcare accommodations required for each student qualified for service under the Section 504 regulation. The ISHP assists in the safe and accurate delivery of healthcare services in school. It is specifically a nursing care plan, developed by the school nurse with parent input. A copy of this plan is included in the school disaster plan and attached to the IEP.

\* Major life activities are those basic activities that the average person in the general population can perform with little or no difficulty, such as caring for one’s self, performing manual tasks, walking seeing, hearing, speaking, breathing, learning, working, sitting, standing, lifting, reaching, thinking, concentrating, interacting with others and reading.

**Table 1. Categories of Disability under IDEA Law**

<b>Federal Disability Term</b>	<b>Alternative Term</b>	<b>Brief Description/ Factors that Elevate Risk in Emergencies</b>	<b>Factors that Reduce Risk in Emergencies</b>
Autism	Autism spectrum disorder (ASD)	Characterized by extraordinary difficulty in social responsiveness; often resistant to environmental change or change in daily routine and experience anxiety over interruption; unusual responses to sensory experiences. May be non-verbal or use argumentative communication.	Structure, routine, normalcy and familiarity with activity
Deaf-blindness		A simultaneous significant hearing and vision loss. Limits the speed of movements.	Guidance from a sighted person
Deafness	Hearing impairment, hard of hearing	A complete or partial loss of hearing that adversely affects a child's educational performance. May not respond to auditory cues.	Written instructions, sign language, specialized communication for direction in an emergency
Emotional disturbance	Behavior disorder, emotional disability	Has limited ability to understand environmental events, situations, or procedures. Needs are categorized as mild, moderate or severe. May disobey or resist direction.	Regulated sensory input
Intellectual disability	Intellectual disability, cognitive impairment	Significant limitations in intellectual ability and adaptive behavior. This disability occurs in a range of severity.	Regulated sensory input
Multiple disabilities		The simultaneous presence of two or more impairments, the combination of which causes such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. Does not include deaf-blindness.	
Orthopedic impairment	Physical disability	A significant physical limitation that impairs complete motor activities, strength, vitality or an alertness to environmental stimuli.	Adaptive physical equipment: cane, walker, wheelchair. May require alternative, accessible evacuation route
Other health impairment		A disease or disorder so significant that it negatively affects learning; examples include cancer, sickle- cell anemia, and diabetes.	Continuity of medication management regime
Specific learning disability	Learning disability	A disorder related to processing information that leads to difficulties in reading, writing and computing.	
Speech or language	Communication disorder, stuttering	A disorder related to accurately producing or	Sign language, hand signals, specialized

impairment		sounds of language to communicate.	communication for response in an emergency
Traumatic brain injury	TBI	An acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both that may affect cognition, behavior, social skills and speech.	
Visual impairment	Low vision, blindness	A partial or complete loss of vision	Guidance from a sighted person

Source: U.S. Department of Education: IDEA at  
<http://idea.ed.gov/explore/view/p/,root,regs,300,A,300%252E8,c>,

In addition to students with disabilities specified under IDEA law, the school site administrator or designee must identify individuals with a temporary impediment such as a broken leg or hidden impairments such as asthma, panic attacks, significant allergies or heart conditions. Students with such documented medical conditions may not have an IEP in place that would highlight the need for continuing a special medical regime, particularly during a crisis or disaster.

### III. MITIGATION AND PREVENTION

Mitigation is the action districts and schools take to identify barriers students with special needs may face during an emergency and eliminate or reduce their adverse effects. A hazards and vulnerability assessment of the site will help in preparing the emergency plan and identifying improvements for safety.

#### A. Teacher Survey - Students Needing Special Assistance

At the beginning of each year, teachers should provide to the main office the name(s) of students/staff that will require special assistance in the event of an emergency. The type of assistance needed as a result of an injury is also required (e.g., broken leg during the year, etc.).

- **Review** how an emergency may impact the daily routine of students with special needs.
- **Know who is on your school site:** Identify students and staff on the site with special needs and disabilities. The school principal must be aware of all students with special needs using school facilities and services.
- **Identify the students** who are severely handicapped and who might need extra support in emergency crises.
- **Make a list** of the students on the school site who are on medication and their medication schedule.

- **Maintain a list of all resources** regularly relied upon and determine how a disaster might affect the use of them. Examples include use of mobility aids, communication devices and electrically-dependent equipment.
- **Identify all the stakeholders** who should be considered in the plan (i.e., family, friends, service providers, personal attendants, physicians and others).
- **Determine what short term accommodations** to provide for students with temporary disabilities (e.g., broken legs, panic attacks, etc.).
- **Assess** potential hazards. Review evacuation equipment.

## **B. Mitigation Strategies**

- **Learn about the types of hazards** that may impact the school (e.g., earthquakes, floods, wildfires, etc.) and assure that emergency response procedures address each one.
- **Identify a pre-evacuation site** that is accessible to students with disabilities.
- **Plan a primary and secondary evacuation route** from each location the student is in during the course of the day.
- **Arrange sufficient transportation** ahead of time to accommodate the entire special needs/staff population.
- **Develop a schedule** of daily activities and classes that identifies where a special needs student may be located each period of the day.
- **Consider classroom location** in placement of students with disabilities. Evaluate the handicap accessibility of nearby exits and proximity to the school nurse.
- **Conduct a test of the family notification system** to assure that contact information is up-to-date to help decrease parent anxiety during a disaster.
- **Complete the annual Site Safety Plan** to ensure that your site has written information regarding the plan in the event of an emergency. During completion of the annual Site Safety Plan, alert the District if the Site requires safety supplies (e.g., wheelchairs, signage, portable ramps, etc.)

## **IV. PREPAREDNESS**

Preparedness focuses on what steps need to be taken to facilitate a rapid, coordinated, effective response when an emergency occurs to keep the students safe. Collaboration with first responders in preparedness strategies and ongoing communications is essential and facilitates the safe integration of students with disabilities into emergency procedures.

### **A. General Strategies**

Use the forms in APPENDIX A to collect information [see III.A] about individuals with special needs on site (e.g., students with a disability, nature of disability, implications for the student concerning full participation in school emergency planning, etc.). Include teachers, schedules, classrooms, potential needs during an emergency, relevant strategies enabling student to participate successfully with peers in general school activities.

- **Build on current accommodations**, modifications and services.
- **Develop a policy** and consent form for the release of medical information. The Americans with Disabilities Act (ADA) allows medical information to be given to people responsible for assisting in evacuating disabled individuals.
- **Consult parents or guardians** concerning care considerations if the special needs student is isolated at school for a short term or long-term basis. Inform parents about efforts to keep their child safe at school.
- **Incorporate pre-negotiated contracts** for services that may be needed in case of an emergency (e.g., transportation, food, etc.).
- **Obtain necessary equipment and supplies**, create evacuation maps and facilities information.
- **Inform and train staff** about emergency response protocols. Encourage teachers to discuss emergency procedures with parents as part of IEP meeting or other review.

### **B. Buddy System**

Pairing students up with special needs students for emergency response (the “buddy system”) can help with critical backup when a skilled assistant is unavailable or separated from the class. Buddies need to be willing and able to assist students in an evacuation by accompanying the individual to a safer enclosure or waiting for emergency responders. The buddy must be acceptable to the student with a special need. Also, teachers in adjacent classrooms can be pre-assigned joint responsibility for both classes if one of the teachers is busy with an injured student.

### **To have an effective buddy system:**

- Give the student the opportunity to select his or her own buddy.
- Identify a buddy who is appropriate (e.g. strong, responsible, etc.).
- Designate a backup buddy.
- Train for the specific need of the special needs student.
- Hold practice sessions to assure that buddies can handle their tasks.
- Train the buddies on how to communicate with the students and how to safely evacuate.

Buddies must be able to make contact quickly with the special needs student when the need arises. The following situations may interfere with this critical communication. Use the suggested strategy as an alternative.

- The buddy is in the building, but away from the customary work area.  
*Have a trained backup buddy in place.*
- The buddy cannot locate the person with a special need because the person is absent.  
*Keep an updated roster of who is at school each day. Assign a temporary buddy when the primary buddy is absent.*
- The buddy has left the class/program, and a new one has yet to be identified.  
*Make an effort to find a replacement as soon as possible. Assign a temporary buddy until there is a permanent buddy.*
- The buddy forgets or is frightened and abandons the special needs person.  
*Check on each special needs student to assure he/she is accounted for during an evacuation. Practice drills will help diffuse real-time fright.*

## **C. Medication Management**

Most students with special needs have very individualized medication schedules that cannot be interrupted without serious consequences. Medicines or medical devices may not be available in emergency shelters. Make alternative arrangements to meet these needs. Consider how medicines can be stored in an emergency. Heat waves and power outages can affect the potency and integrity of some medications. Include an ice chest and cold packs among the school emergency supplies. If there is a power outage, the ice packs can extend the safe temperature range of medications requiring cold storage until the power is restored.

- **Ask caregivers to supply a 72-hour supply** of medication in a Ziploc bag with instructions; a refrigerated kit is also advised for medication if needed with instructions.
- **Gather all medications** before evacuation.
- **Transport special medications**, supplies and equipment with the special needs student.
- **Carry contact and medical information** for all students and provide individual medical information on a laminated card with a lanyard to be worn around the neck. See **Appendix C** for an example of the Emergency Medical Card.

## **D. Access to Communication**

Communication access enables effective interaction with people who are deaf or blind or who have speech, vision or hearing limitations. Make written materials available in alternative formats (e.g., Braille, large print, disks, and audio cassettes, etc.) and provide hearing-assistive technologies such as amplified phones. Include auxiliary aids and services such as sign language interpreters. Alarm systems for fires and other emergencies will benefit most people if they incorporate both audible and visual elements. The hearing impaired students may be best alerted by flashing light alarms. **An emergency is not the time to learn how to work a rarely-used assistive device. The most effective communication systems are those used daily.**

- Give **clear, succinct** verbal instructions.
- **Use gestures** to communicate important information.
- **Pictorial representations**, where appropriate, can provide quick and easily understood instruction to many individuals with limited English proficiency, and some individuals with cognitive disabilities.
- **Guide students** with low vision or blindness.
- **Utilize electronic variable messaging boards**, short message systems (SMS), teletypewriters (TTY) or telecommunications display devices (TDD), if you have them.
- **Identify staff** with foreign language skills, if needed.
- **Practice basic American Sign Language** with aides, buddies, volunteers and evacuation for emergency words and instructions such as:

- |                          |                       |                    |
|--------------------------|-----------------------|--------------------|
| • <i>important,</i>      | • <i>emergency</i>    | • <i>keep calm</i> |
| • <i>must leave now</i>  | • <i>fire</i>         | • <i>fire exit</i> |
| • <i>elevator closed</i> | • <i>stairs there</i> | • <i>okay</i>      |



## E. Time Management

Following a crisis, children with special needs are likely to respond to any form of stress with more extreme reactions. **Allow extra time** for them to make necessary preparations in an emergency.

Some students with special needs will need more time to comprehend the emergency. The earlier the notification, the better the chances are for a successful evacuation. Consider the triggers and cues for these students and anticipate their reactions. Prepare students for changes in routine. Some students may need to be more protected or isolated to minimize distractions and sources of agitation during the height of a crisis. Adult supervision may need to be more intense for a while.

Allow time for discussion of the traumatic events in a safe and familiar setting. Provide choices in activities to the extent feasible to give these students some sense of control over even a small part of their lives.

## F. Preparedness Supplies

**Classroom Supplies.** A classroom that is used for teaching students with special needs should store disability-related supplies, assistive equipment and tools that may be required in an emergency. Parents should provide for students with dietary restrictions. Among the basic supplies to have in the classroom are:

- ☐ Batteries in different sizes, for adaptive equipment
- ☐ Lockdown kit, including portable toilet, privacy screen, toilet paper, toilet bowl liners disinfectant, and plastic bag for disposal
- ☐ Water pouches for drinking
- ☐ Water for hygiene purposes
- ☐ Copies of all students' Emergency Information Forms (secured)
- ☐ Backup copies of medical prescriptions (secured)
- ☐ Hand tools (e.g., screwdriver, wrench, pliers, etc.)
- ☐ Heavy work gloves
- ☐ Whisk broom
- ☐ Tarp
- ☐ Solar/crank/battery radio
- ☐ Cell phone and phone charger
- ☐ Flashlight and extra batteries or crank flashlight
- ☐ First aid kit
- ☐ Small ice chest for refrigerated medications
- ☐ Evacuation assistive equipment
- ☐ Protein bars (without nuts or nut oil)
- ☐ Canned fruit
- ☐ Carbohydrate-free foods for meals (e.g. canned meat, nuts, jerky, etc.)\*
- ☐ Feminine hygiene supplies
- ☐ Household chlorine bleach to kill bacteria or antibacterial soap
- ☐ Facial tissues
- ☐ Whistle/noisemaker

\* for diabetic students

**Go Kits.** Portable preparedness supplies individualized for each student's needs, called "Go Kits", are an integral part of preparedness planning. Ask parents and caretakers to provide Go Kits at the beginning of the school year. Plan for a child with special dietary needs. Designate which staff members are responsible for reminding parents to replenish their child's kit and notify the school of changes. Each Go Kit should include, as a minimum:

- ☐ Lightweight uncomplicated backpack
- ☐ Emergency Information Form – see *Appendix B* for example
- ☐ Medication for up to 36 hours
- ☐ Emergency Medical Card, laminated and attached to a lanyard to be worn during an emergency. See *Appendix C* for example. Card should include:
  - contact information
  - medical requirements
  - allergies and sensitivities
  - adaptive equipment used
  - assistance needs and limitations

## **G. Drills**

Drill practice is very important; it increases skills and instills confidence in each individual's ability to cope during an emergency. Educational techniques such as role-playing or the use of audio visual aids can also be helpful.

- Hold regular drills so that students become familiar with the procedures.
- Know how to get to all the exits.
- Practice using evacuation and assistive devices.
- Give clear, concise instructions
- Practice dealing with different circumstances and unforeseen situations, such as blocked paths or exits or buddies that cannot be located.

## **H. Key Practices for Certain Impairments**

Emergency planning for students with special needs should be as individual as the students. Some students may be at increased risk during an emergency and will need extra assistance or special attention. If possible confer with students and parents regarding their preference for emergency situations. Assess capabilities, limitations and needs and to determine what type of evacuation assistance will be required in an emergency for each student.

Children with disabilities generally have specific "triggers"—words, images, sounds—that signal danger or disruption to their feelings of safety and security. If adults miss these cues, children may escalate their behavior to a point where they completely lose control. *It is essential that parents/caregivers and teachers work together to share information about triggers and cues.* This is best

done on a regular basis, such as during the IEP meeting or a periodic review meeting, rather than in response to a crisis.

**There is no one-size-fits-all approach. However, there are key practices that should be considered for certain impairments.**

- 1. Cognitive/Developmental:** Some students may not comprehend the nature of the emergency and could become disoriented or confused about the proper way to react. Students with hypertension, dyslexia or learning disabilities will have difficulty reading complicated directions for evacuation or response plans. Simple diagrams or pictures will give non-reading or overstressed students sufficient information to get to safety. Train your staff how to assist those who become upset. Check that evacuation routes have directional signs that are easy to follow. Practice evacuation route(s) with students regularly. Use simple diagrams or pictures to give non-reading or overstressed students sufficient information to get to safety. **Preparedness kits should include:**
  - comfort items
  - pen and paper
  - visual communication instructions
- 2. Hearing:** Provide sign language training to some staff for students who may not be able to hear emergency warnings. Have teachers practice basic hand signals with hearing impaired students for emergency communications. Alerting devices, such as strobe lights and vibrating pagers, can be used to supplement audible alarms and are useful for students with hearing impairments. Install both audible and visual smoke alarms in the classroom and building. **Preparedness kits should include:**
  - pen and paper
  - flashlight to communicate in the dark
  - extra hearing aid batteries
  - batteries for TTY and light phone signaler
- 3. Mobility:** Limited mobility may impair egress and access to locations. Arrange and secure furniture and other items to provide barrier-free paths of travel. Disaster debris may obstruct evacuation. Store a lightweight manual wheelchair, if available. Train the staff the proper way to move an individual in a wheelchair. Mobility impaired students should practice moving their wheel chairs or having them moved into doorways, locking their wheels and covering their heads with a book or with their arms or hands. **Preparedness kits for those who use wheelchairs should include:**
  - heavy gloves for making way over glass or debris
  - extra battery for electric wheelchairs recommended but may not be practical
  - patch kit for punctured wheels
  - flashlight and whistle
- 4. Respiratory:** Students with respiratory impairments may have difficulty breathing when walking distances or descending stairs. Smoke, dust, fumes, chemicals, and other odors often exacerbate such limitations. For these students, include emergency evacuation masks and respirators in classrooms. Have oxygen and respiratory equipment readily available. Students and staff

should practice putting on and removing this equipment as part of an emergency drill. **Preparedness kits should include:**

- medical schedule and dosages
- medical mask, if student can wear one
- any medical equipment needed for 72 hours
- note paper and pen

- 5. Medically Fragile:** Many illnesses can be aggravated by stress. In the event of a disaster that requires students to be at school for an extended period of time, medication may need to be administered to students with a healthcare plan. Schools should consider who will administer these medications in the event a nurse is not available during a disaster. Keep medications, authority to administer the medication forms, and healthcare plans in the vicinity of the medically fragile student.

It is the parent's responsibility to maintain medical supplies, notify the school of changes and provide new doctor's orders. It is the nurse's responsibility to remind the parent to provide medications and update orders when notified.

- 6. Speech/Auditory:** Determine in advance the best way for the student to communicate with others during an emergency. Provide written emergency and evacuation instructions on a card, carried at all times and placed in an easy to see location. **Preparedness kits should include:**

- extra batteries for communication equipment
- note paper and pen
- comfort items

- 7. Visual:** Those with visual impairments may have to depend on others to lead them to safety during a disaster and may be reluctant to leave familiar surroundings. Employ Braille signage or audible directions for students who are blind or have low vision. Emergency back-up lighting systems, especially in stairwells and other dark areas, will benefit those students with limited visual acuity. Mark emergency supplies with large print or Braille. Students should know where the nearest telephones and alarm boxes are located and how to describe their location. **Preparedness kits should include:**

- extra folding white cane
- heavy gloves for feeling the way over glass or debris
- colored poncho worn for visibility
- comfort items

## **I. Developing a Special Needs Evacuation Plan**

Creation of an Evacuation Plan should cover the evacuation, transportation and medical needs of students who will require extreme special handling in an emergency. In most cases, additional safeguards must be established regarding roles, responsibilities and procedures for students with physical, sensory, emotional and health disabilities.

## **1. Review all paths of travel and potential obstacles.**

- Know your school grounds, paths, exits and potential obstacles.
- Determine the primary and secondary paths of exit to be used during emergencies. Individuals with mobility impairments will need a smooth, solid, level walking surface; an exit that avoids barriers such as stairs, narrow doors, and elevators; and guardrails that protect open sides of the path.
- Compile and distribute evacuation route information to be used during emergency operations.
- Include alternative evacuation route information, should the primary route be inaccessible due to damage or danger.

## **2. Install appropriate signage and visual alarms.**

- Place evacuation information indicating primary and secondary exits in all offices, classrooms, multipurpose rooms, lunchrooms, hallways/corridors, lobbies, bathrooms and cafeterias. For passages and doorways that might be mistaken for an exit, place visible signs that proclaim, “NOT AN EXIT”.
- Place emergency notification devices appropriate for each student.
- Post signage with the name and location of each area so that the students will know exactly where they are. In order to comply with ADA Accessibility Guidelines for Buildings and Facilities requirements, the signage should be:
  - approximately 60 inches above the floor;
  - in a location that is not obscured in normal operation such as a swinging door;
  - in all primary function areas

## **3. Identify the students and staff with special needs and they type of assistance they will require in an emergency.**

- Allow visitors to self-identify on a sign-in log if they have special evacuation needs.
- Discuss evacuation issues with the staff members and caretakers of students with special needs. Include individuals, who may be temporarily disabled (e.g., a student with a broken leg, etc.).

## **4. Train staff in general evacuation procedures.**

- Review the areas of rescue, primary exits, evacuation techniques, and the locations and operation of emergency equipment.
- Provide in-depth training to those designated to evacuate students with special needs.

- Train the staff in proper lifting techniques when lifting a person for evacuation. Anyone can assist a student with a visual impairment.
- Check on each special needs student to assure he/she is accounted for during an evacuation.

**5. Review the plan with emergency response personnel, including local police, fire and emergency medical technicians.**

- Identify “areas of rescue” in your school for students to wait for evacuation assistance from emergency personnel.
- Before school begins in the fall, walk around the site with first responders so that they are familiar with the primary exits and all areas of rescue. These areas must meet specifications for fire resistance and ventilation.
- Ask the responders to conduct a special drill explaining how they will support the students and staff with special needs during an emergency.

**6. Complete all contracts and Statements of Understanding with key emergency support providers**

- Ensure that sufficient transportation capacity exists with transportation providers, partner agencies, and suppliers to effectively meet the demand in an emergency.
- Identify transportation contracts through the district in case of an emergency. Emergency response for special needs requires special vans and special equipment. Specify who will do what to address these transportation needs.
- Develop a list of school-owned vehicles, staff vehicles and parent vehicles that are available and make prior arrangements for their use in the event of an emergency.

**7. Review the evacuation plan with students and staff to be familiar with the process and identify any problems.**

- Practice implementation of special duck and cover actions by students with able-bodied partners.
- Students should be aware that evacuation by themselves may be difficult or impossible because of obstacles in their path or because electricity-dependent machines may not function (i.e., elevator).
- Special pre-planned assistance must be provided and reviewed regularly. Classrooms should have emergency activity kits with items familiar to the students.

- Include students with special needs in the selection of emergency evacuation devices.
- Mobility-impaired students should practice getting in doorways, locking wheel chair wheels and covering their head with a book, arms or hands.
- Train all aides who are assigned to students with special needs in evacuation procedures.
- Provide procedures for receiving students with special needs at the pre-designated evacuation site.
- Remind parents and caregivers that they are responsible for updating emergency information with the schools.

## **IV. RESPONSE**

The Response phase is the immediate reaction to an emergency to save lives and protect property. Proactive efforts in the Mitigation-Prevention and Preparedness phases will impact the quality of response. Responses will vary depending upon the severity and intensity of the event.

### **A. Leadership by District of Service**

In an emergency, the site administrator has responsibility for the safety of all children on the site.

### **B. Assess the Situation**

- Determine the immediacy of the emergency.
- Remove anyone with respiratory complications from smoke and vapors immediately.
- If not in immediate danger, stay in place until staff personnel determine the nature of the situation.
- If trapped, get the attention of others by calling out or striking object together to make noise.

### **C. Announce the Emergency**

- 1. To Alert Deaf and Hearing Impaired** – The primary goal is to effectively communicate the nature of the situation and direct them to the appropriate route of evacuation. Students with hearing impairments will most likely be able to follow the same exit route as those who can hear. Communicate with a notepad and pen, with simple, concise speech or with sign language. Regardless of the method of communication used, convey two key messages:
  - there is an emergency
  - how to exit
- 2. To Alert Blind or Visually Impaired** – Someone who is blind or visually impaired will generally be able to evacuate the same route as sighted students, but may need some assistance. Describe the nature the emergency and offer to guide him/her to the nearest emergency exit and evacuation assembly area.
  - Touch the person on the elbow gently.



- Identify yourself and quickly explain the situation.
- Ask if the individual has any preferences regarding how to be guided.
- Clearly describe where you are going and any approaching obstacles or protruding objects which will require a change in your walking path or pattern.
- Be protective of your space as there may be many people using the same route to evacuate.

**3. To Alert Cognitively or Emotionally Impaired** – It is likely that students with cognitive or emotional impairments will be able to use the same evacuation routes as the other students. The challenge is to keep them calm as you exit. If there is a buddy or companion assistant, quickly describe the situation and how to involve him or her in the evacuation. Let the student know what is happening. Keep him/her reassured.

#### **D. Lockdown/Shelter-in-Place Strategies**

- Set up screens/curtains for those needing privacy for emotional issues and personal hygiene.
- Use Go Kits for immediate necessities.
- Keep students away from windows and doors.
- Use the buddy system to provide comfort and reassurance.

#### **E. Implement Evacuation**

- Carry all medication, supplies, equipment and dietary needs with student, including the 72-hour disaster kit that has been prepared ahead of time for individual student needs.
- Ask the student how he/she would like to be assisted.
- Use the buddy system.
- Inform emergency personnel of intended destination and type of assistance needed. If unable to contact emergency personnel, ask others to make the notification for assistance.
- Move to designated evacuation area. The path should be unobstructed.
- Be careful of falling debris as you leave the building.
- Provide priority assistance to wheelchair users with electrical respirators. Evacuate mobility devices with the person if possible.

## To Evacuate Persons Using Wheelchairs

If the person wants to be moved in his/her chair, keep the following considerations in mind:



- Turn off the wheelchair's power before lifting.
- Turn the wheelchair so it is lowered down the stairs backwards (person facing up the stairs), so the occupant cannot slip forward out of the chair and down the stairs.
- Powered wheelchairs have very heavy batteries; an evacuation chair for stairs may be needed with the powered chair to be retrieved later.
- If a seatbelt is available, use it. If the person needs to be removed from his/her wheelchair for an evacuation, ask the following:
  - how he/she prefers to be moved from the chair;
  - whether pain or harm will result from moving extremities;
  - if any equipment is needed for immediate safety of life-support, e.g. backup generator for respirator.

## F. Transport Students

Transportation is a well-established component of emergency response plans, and requires planning and detailed focus for children with access and functional needs. Special transport is not provided for students with Section 504 eligibility.

- **Maintain a transportation resources** list by type and availability, including vehicle accessibility and capacity information.
- **Develop procedures for the acquisition of additional accessible transportation equipment**, securement devices, supplies, and resources before a disaster.
- **Provide staff training**, including a review of procedures for transporting persons with a variety of assistance needs, as well as the transport of service animals.
- **Identify strategies for tracking individuals** who are evacuated. Information should include the passenger's name, point of origin, departure time, final destination, and arrival time.
- **Maintain a master list of drivers** by status and availability.
- **Provide drivers with an operational roster** to complete and maintain, at minimum, with the following information:
  - Name of driver
  - Driver's telephone number
  - Time departed staging area
  - Time arrived at sheltering location

- Vehicle number
- Sheltering location
- Trip mileage
- **Determine the appropriate transportation response** for persons unable to reach a pick up/drop off location or staging area on their own.  
     What entity will handle such needs, and what types of vehicles/equipment will be required?  
     Check with the school district regarding the transportation contracts and agreements.
- **Account for all students** before transportation occurs and after arrival at the destination.
- **Transport all passengers** to the pre-designated evacuation destination by the safest route. Use alternative routes only as necessary.
- **Use buses.** Consider other modes of transportation only if buses are unable to get to the school quickly or are not available. Refer to the list of school-owned vehicles, staff vehicles and parent vehicles that are available.

#### **G. Reassess Needs**

Request additional support, if needed.

#### **H. Other Considerations for Special Needs Populations**

- **Store** extra batteries for electric wheelchairs and hearing aids.
- **Lead** evacuees to a safe place with other teachers and staff.
- **Remain** with the special needs student after the evacuation.
- **Recognize** that the fine details are unique to each student;

## **IV.**

## **RECOVERY**

The Recovery phase is designed to assist students, teachers, staff and visitors to restore educational operations in school. Recovery is an ongoing process that includes not only the mental, emotional and physical healing process of students, teachers and staff, but also restoration of the physical assets of the school (buildings and grounds) to a safe and habitable environment.

### **A. Restoration**

- **Account** for all the students, teachers, and staff.
- **Meet the medical needs.**
- **Conduct daily debriefing** for staff, responders, and others assisting in recovery.
- **Provide stress management support** during class time.
- **Discuss recovery**, what to do with students if they must remain on site for 2-3 days.
- **Communicate with parents**, guardians and the local community.
- **Conduct after-action briefing** to capture key lessons learned and recommendations for improvements to the school plan.

### **B. Supportive Services**

- **Needs Assessment** – quickly identify needs and the support necessary to meet them.
- **Information** – provide important information on community resources that connects school families who need help with available services and assistance.
- **Language** – ensure that critical information is conveyed in a language appropriate for non-English speaking families that the standard media may not reach.
- **Transportation** – support the mobility needs with accessible transportation resources to disaster service areas.
- **Replacement Equipment** – support students with special needs with the guidance to acquire replacement of vital personal equipment (e.g., crutches, hearing aides, wheelchairs,

## C. Reassurance

Experiencing a disaster can be overwhelming. Stress often exacerbates existing medical conditions and may alter thought and behavior. Reassurance is the key to helping children through a traumatic time. Support individuals with access and functional needs by providing verbal reassurance and information to help orient them to new surroundings and new routines.

- **Make sure physical needs are addressed** and medical assistance is provided, as needed.
- **Reconnect students** with family and other support systems as early as possible.
- **Address concerns** about safety. Talk to each child at his or her developmental age, not chronological age. Use language the child understands.
- **Provide information through pictures** and allow children time to see, hear, talk and draw.
- **Expect some regression** (increase in problem behaviors).
- **Deal with inappropriate behaviors** calmly and consistently—Keep emotional equilibrium.
- **Minimize the disruption.** If the normal routine is unavoidably altered, create a new one.
- **Offer concrete/immediate solutions** to abstract problems. Use clear examples. Repeat responses patiently.

After the danger has passed, the school will be anxious to return to normal. Both people and resources are needed to speed recovery. The talents of individual with disabilities should not be underestimated. Every member of a community can provide some support.

## APPENDIX A

School Emergency Evacuation Planning Checklist		
	YES	NO
Do you have a roster of your students with special needs?		
Have you identified students with special needs on site from other school districts?		
Have you identified the medical needs of your students with special needs and their medication schedule?		
Have you walked the evacuation paths and exits looking for potential obstacles?		
Has an evacuation site been identified that is accessible to students and staff with special needs?		
Is the primary evacuation path marked to clearly show the route?		
Is there sufficient oxygen for 72 hours?		
Have you identified any necessary tools such as personal response plans, evacuation equipment or visual aids for students with special needs?		
Have you identified communication needs with students who have limited English proficiency?		
Have you considered emergency accommodations for those with temporary disabilities?		
Have you identified an evacuation site that is accessible to students and staff with special needs?		
Have you identified a secondary evacuation site?		
Has a "buddy system" been developed for each student?		
Have you identified all of your communication needs for your students with special needs?		
Have you trained the staff on proper lifting techniques?		
Have staff, students and families been encouraged to provide 72 hour medications?		
Has evacuation route information been compiled and distributed to staff?		

## APPENDIX B


### Emergency Information Form for Students with Special Needs

Last name: \_\_\_\_\_

Date form completed	Revised	Initials
By Whom	Revised	Initials

<b>Name:</b>		<b>Birth date:</b>	<b>Nickname:</b>
<b>Home Address:</b>		<b>Home/Work Phone:</b>	
<b>Parent/Guardian:</b>	<b>Emergency Contact Names &amp; Relationship:</b>		
<b>Signature/Consent*:</b>			
<b>Primary Language:</b>	<b>Phone Number(s):</b>		
<b>Physicians:</b>			
<b>Primary Care Physician:</b>	<b>Emergency Phone:</b>		
	<b>Fax:</b>		
<b>Current Specialty Physician:</b> <b>Specialty:</b>	<b>Emergency Phone:</b>		
	<b>Fax:</b>		
<b>Current Specialty Physician:</b> <b>Specialty:</b>	<b>Emergency Phone:</b>		
	<b>Fax:</b>		

\*Consent for release of this form to health care providers

 American College of  
Emergency Physicians\*

American Academy  
of Pediatrics



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## Diagnoses/Past Procedures/Physical Exam *(Continued)*

<b>Medications/Dosages:</b>		
1.		
2.		
3.		<b>Prostheses/Appliances/ Technology Devices:</b>
4.		
5.		

<b>Management Data:</b>	
<b>Allergies: Medications/Foods to be avoided</b>	<b>and why:</b>
1.	
2.	
3.	
<b>Procedures to be avoided</b>	<b>and why:</b>
1.	
2.	
3.	

<b>Common Presenting Problems/Findings With Specific Suggested Managements</b>		
Problem	Suggested Diagnostic Studies	Treatment Considerations

<b>Comments on child, family, or other specific medical issues:</b>	
<b>Physician/Provider Signature:</b>	<b>Print Name:</b>



## APPENDIX C

**Laminate this card and affix it to a lanyard  
for the special needs student to wear during an emergency.**

Emergency Medical Information Card	
Student Name:	Photo:
School: Grade :  School Phone:	
Medical Condition:	
Parent/Guardian:	Home Phone:
Home Address:	Work Phone: Cell Phone:
Parent/Guardian:	Home Phone:
Parents are responsible for updating the student's emergency information and medications.	

 **FRONT**

 cut or fold here

**BACK**



Emergency Medical Information Card	
Student Name:	Birth date:
Blood Type:	Allergies:
Physical Limitations:	
Communication Difficulties:	
Adaptive Equipment::	
Primary Care Physician:	Emergency Phone:
Specialty Physician:	Emergency Phone:
Insurance Company :	Policy Number:
Medications	Dosages/Frequency

## APPENDIX D

### 72 Hour Disaster Medication Authorization To Administer Medication

#### **STUDENT MEDICATION** – Legal Reference: Education Code Section 49423

"...any pupil who is required to take, during the regular school day, medication prescribed for him/her by a physician, may be assisted by the school nurse or other designated school person, if the school district received (1.) a written statement from such a physician detailing the name of the medication, the method, amount, and time schedules by which such medication is to be taken, and (2.) a written statement from the parent or guardian of the pupil indicating the desire that the school district assist the pupil in the matter set for in the physician's statement." No other medication is to be administered by school personnel. This includes all medication available without a prescription. **Medication is to be sent in the original container labeled with the name of the student, name of prescribing physician, name of medication and instructions. This form must be completed and included. It is the parent's responsibility to update this form as needed.**

Student \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_ Date \_\_\_\_\_

Parent \_\_\_\_\_ Phone(s) \_\_\_\_\_

Health Care Provider \_\_\_\_\_ Phone \_\_\_\_\_

1.	Medication(s)	Dose	Frequency	Duration	Possible Side Effects
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

2. Additional Information and/or Precautions regarding medications or student's condition:

3. I am the parent/guardian of the above student and I have lawful custody of said child. I hereby give consent to appropriate District personnel to administer or assist in administering medication(s) and/or treatment as specified by his/her health care provider. Furthermore, I hereby give consent to the District to receive from, or send to, the health care provider any information concerning my child's medical condition.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

4. \*\*Complete this section for medications which student may self-administer:

#### AUTHORIZATION FOR SELF-ADMINISTRATION:

A. **Student:** I certify that I have read and understand the instructions regarding the self-administration of my medications(s). I agree to take these above described medications in compliance with my health care provider's recommendations.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

B. **Parent/Guardian:** My child has been instructed in the proper dosage and administration of the above medication and has demonstrated the ability to self-administer it. We/I (Parent/Guardian) request that s/he be permitted to self-administer it as directed by our health care provider in compliance with District policy and procedures.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

5. **HEALTH CARE PROVIDER:** I am a physician actively licensed by the state of California. Attached hereto is a prescription for the medication/treatment specified above.  
( ) Initial here if student has been properly trained and is able to self-administer

PHYSICIAN SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

Please Print/Stamp Physician  
Name, Address, Phone here:

Original – File  
Copy – School Nurse & Teacher

7/04

## 72 Horas Medicamentos en caso de Desastre AUTORIZACIÓN PARA ADMINISTRAR MEDICINAS



**MEDICINAS PARA ALUMNOS** Referencia Legal: Código Educacional Sección 49423

«...cualquier alumno que debe tomar medicina recetada por su médico durante el día escolar, puede obtener la ayuda de la enfermera escolar u otro personal escolar designado, si el distrito escolar ha recibido (1) declaración escrita del médico detallando el nombre de la medicina, método, dosis y horario de administración de tal medicamento, y (2) una declaración escrita del padre o guardian del alumno indicando su consentimiento para que el distrito escolar asista al estudiante a tomar la medicina de acuerdo con las instrucciones del médico.» Ningún otro medicamento puede ser administrado por el personal escolar. Esto incluye medicamentos disponibles sin receta.

**Las medicinas se deben mandar a la escuela en el envase original claramente marcado con el nombre del estudiante, nombre del médico quien lo autoriza, nombre de la medicina e instrucciones. Favor de completar y adjuntar este formulario también. Favor de notar que es la responsabilidad de los padres de estar seguros que la información en este formulario esté al corriente.**

Estudiante \_\_\_\_\_ Grado \_\_\_\_\_ Maestro/a \_\_\_\_\_ Fecha \_\_\_\_\_

Padre/Madre \_\_\_\_\_ Teléfono \_\_\_\_\_ o \_\_\_\_\_

(La sección de abajo debe ser completado por el médico)

**\*\* Health Care Provider** \_\_\_\_\_ **Telephone** \_\_\_\_\_

1. Medications	Dose	Frequency	Duration	Possible Side Effects
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2. **Additional Information and/or Precautions** regarding medication or student's condition:

3. Soy el/la Padre/Guardian del estudiante nombrado arriba y tengo custodia legal de él/ella. Por medio de esto doy mi permiso al personal apropiado del Distrito en administrar o ayudar en la administración de medicamentos y/ o tratamiento como es especificado por su médico. Además, doy consentimiento al distrito para recibir de o mandar a este proveedor de salud cualquiera información acerca de la condición de salud de mi hijo/a..

Firma de Padre/Madre/Guardian: \_\_\_\_\_ Fecha \_\_\_\_\_

**4. Si el estudiante puede administrar medicamentos por sí mismo, hay que llenar este contrato:**

### **AUTORIZACIÓN PARA AUTO-ADMINISTRACIÓN:**

- A. **Estudiante:** Certifico que he leído las instrucciones acerca de la autoadministración de mi(s) medicina(s). Estoy de acuerdo con tomar estas medicinas nombradas arriba según las recomendaciones del médico.

Firma del Estudiante: \_\_\_\_\_ Fecha \_\_\_\_\_

- B. **Padre/Madre/Guardian:** Mi hijo/a ha sido instruido en la administración y dosis correcta de las medicinas(s) nombrada(s) arriba y ha demostrado la habilidad de autoadministrarsela(s). Nosotros/Yo (Padre/Guardian) pedimos que el/ella tenga permiso de administrarse la(s) medicina(s) a sí mismo según las instrucciones de nuestro médico y las reglas del Distrito.

Firma de Padre/Madre/Guardian: \_\_\_\_\_ Fecha \_\_\_\_\_

4. **\*\*Health Care Provider:** I am a physician actively licensed by the State of California. Attached hereto is a prescription for the medication/treatment specified above.

[ ] \* initial here if student has been properly trained and is able to self-administer

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_

## **APPENDIX E**

### **Online Resources**

**American Red Cross, *People with Disabilities***

<http://www.redcross.org/prepare/location/home-family/disabilities>

**Americans with Disabilities Act of 1990, as amended**

<http://www.ada.gov/pubs/ada.htm>

***An Investigation of Best Practices for Evacuating and Sheltering Individuals with Special Needs and Disabilities***, National Clearinghouse for Educational Facilities, Washington, DC (Oct 2008)

[http://www.ncef.org/pubs/evacuating\\_special\\_needs.pdf](http://www.ncef.org/pubs/evacuating_special_needs.pdf)

**California Governor's Office of Emergency Services, *Meeting the Needs of Vulnerable People in Times of Disaster*** (May 2000)

<http://www.caloes.ca.gov/AccessFunctionalNeedsSite/Documents/Vulnerable%20Populations.pdf#search=Meeting%2520the%2520Needs%2520of%2520Vulnerable%2520People>

**Center for Disability Issues in Health Profession, *Evacuation Preparedness Guide***

[http://webhost.westernu.edu/hfcdhp/wp-content/uploads/Emergency\\_Evacuation.pdf](http://webhost.westernu.edu/hfcdhp/wp-content/uploads/Emergency_Evacuation.pdf)

**Federal Emergency Management Agency, *Preparing for Disaster for People with Disabilities and Special Needs***

[http://www.fema.gov/pdf/library/pfd\\_all.pdf](http://www.fema.gov/pdf/library/pfd_all.pdf)

**Department of Homeland Security, Executive Order 13347, *Individuals with Disabilities in Emergency Preparedness*** (July 26, 2004)

[https://www.dhs.gov/xlibrary/assets/CRCL\\_IWDEP\\_AnnualReport\\_2005.pdf](https://www.dhs.gov/xlibrary/assets/CRCL_IWDEP_AnnualReport_2005.pdf)

**National Association of School Psychologists, *Coping with Crisis – Helping Children with Special Needs***

<https://www.nasponline.org/resources-and-publications/resources/school-safety-and-crisis/war-and-terrorism/helping-children-cope-with-terrorism>

**National Fire Protection Association, *Personal Emergency Evacuation Planning Tool for School Students with Disabilities***

[http://www.preventionweb.net/files/8882\\_EvacStudentDisabilities.pdf](http://www.preventionweb.net/files/8882_EvacStudentDisabilities.pdf)

***Nobody Left Behind*, Report on Exemplary and Best Practices in Disaster Preparedness and Emergency Response For People with Disabilities** (March 2007)

[http://www2.ku.edu/~rrtcpbs/findings/pdfs/bestpractices\\_3-21-072.pdf](http://www2.ku.edu/~rrtcpbs/findings/pdfs/bestpractices_3-21-072.pdf)

***Talking to Children with Special Needs About Tragedy***



<http://specialchildren.about.com/od/inthecommunity/a/tragedy.htm>

**U.S. Department of Education, Administration for Children and Families, *Coping With Disaster: Suggestions for Helping Children with Cognitive Disabilities***

<https://ici.umn.edu/products/impact/201/over9.html>

**U.S. Department of Education, ERCM Express, *Integrating Students with Special Needs and Disabilities into Emergency Response and Crisis Management Planning*** (Volume 2, Issue 1, 2006)

[http://rems.ed.gov/docs/Disability\\_NewsletterV2I1.pdf](http://rems.ed.gov/docs/Disability_NewsletterV2I1.pdf)

## **APPENDIX F**

### **Acronyms**

<b>ADA</b>	Americans with Disabilities Act (1990)
<b>AFN</b>	Acute and Functional Needs
<b>ASC</b>	Advisory Steering Committee
<b>CDE</b>	California Department of Education
<b>ED</b>	Emotionally Disturbed
<b>FAPE</b>	Free and Appropriate Public Education
<b>FERPA</b>	Family Education Rights and Privacy Act
<b>HI</b>	Hearing impairment
<b>IDEA</b>	Individuals with Disabilities Education Act
<b>IEP</b>	Individual Education Program
<b>ISHP</b>	Individualized School Healthcare Plan
<b>ITP</b>	Individual Transition Plan
<b>LRE</b>	Least Restrictive Environment
<b>NSH</b>	Not severely handicapped
<b>OSEP</b>	Office of Special Education Programs
<b>RSP</b>	Resource Specialist Program
<b>SDC</b>	Special Day Class
<b>SELPA</b>	Special Education Local Plan Area
<b>SH</b>	Severely Handicapped
<b>SLD</b>	Specific Learning Disability
<b>SLI</b>	Speech/Language Impairment
<b>TBI</b>	Traumatic Brain Injury
<b>VI</b>	Visually Impaired

# School Administrator Guidance to Police-Free Response

**\*\*\* Please note: Except in an extreme emergency, only School Admin (or designee) should call these numbers.\*\*\***

## Who does Admin call if we need support?

Admin calls **510-874-7777** to access OUSD nonviolent de-escalation supports, for example:

- Severely escalated student, causing harm or danger to themselves or others
- Student running away from campus and their safety is in jeopardy (*elopement*)
- Fight that school personnel cannot subdue unassisted
- Unwelcome outsider(s) hanging around the outside of campus
- Situation in the neighborhood that appears to involve police
- Any other situation requiring immediate nonviolent de-escalation supports or when you're unsure if situation might require law enforcement
- Lockdowns / Secure School

**Please note:** Only School Admin (or other staff at the direction of admin) should call this number. Please do not distribute this number out to other people.

*If you suspect a student is experiencing human trafficking, immediately notify your school's Human Trafficking Lead, if you have one, and OUSD Legal. Otherwise, notify Legal, COST Lead, and Behavioral Health Program Manager.*

## When would Admin call the OPD non-emergency line?

Admin calls **510-777-3333** to reach the Oakland Police Department for non-emergencies, for example:

- Staff has a reasonable suspicion that a student may commit a homicidal act (*call immediately*)
- To dispose of a firearm or illegal drugs
- If a serious crime is believed to have taken place (*but is not currently in progress*)
- Secure School/Lockdown updates or questions

If a parent/guardian demands that the police be called, provide them 510-777-3333 to call themselves, unless the situation is a mandatory school notification of OPD, then administrator must call (*refer to list of when to call 911*).

## Important Numbers:

- **Child Protective Services:** 510-259-1800
- **Sexual Victimization (not in progress):** BAWAR: (510) 800-4247; Family Justice Center: (510) 267-8800
- **Mental Health Crisis:** (510) 891-5600
- **Crisis Support Service:** (800) 309-2131
- **Homelessness/Adult MH Crisis:** macro@oaklandca.gov
- **Unauthorized Vehicle Towing:** 311

## When would we call 911?

Call **911** whenever there is an imminent danger to someone's health or safety. For example:

- Active shooter
- Person brandishing a gun or explosive
- Bomb threat/discovery of a bomb
- Medical emergencies
- Fire
- Death on school site (*including suicide*)
- Serious injury
- Hostage situation
- Abduction/kidnapping (*observed/suspected*)
- Major violent crime in progress (e.g., *sexual assault, attempted murder, etc.*)
- Emergency building evacuation (e.g., *fire, hazardous materials/fumes, gas leak, etc.*)
- Any operational failure that puts lives in danger (e.g., *broken water, gas lines*)
- Any other situation posing an imminent danger to someone's health or safety

**When 911 is called, or law enforcement comes to campus you must also call 510-874-7777 after 911 is called. OUSD Coordinator of Safety will also respond.**

**What does imminent danger mean?** A situation that is reasonably expected (or highly likely) to cause serious physical harm and cannot be resolved through other means. It is not merely a fear of future harm, no matter how great the fear and no matter how great the likelihood of the harm, but is one that, from appearances, must be instantly confronted and addressed.

## What if there's a mental health crisis (5585/5150)?

- If risk of harm to self or others is imminent: call 911, stay with student, and call parent(s)/guardian(s). Otherwise screen student for risk of harm to self or other. This must be done by trained staff (e.g., site therapist, psychologist, social worker). Call OUSD Intake (510-874-7777) to connect site for a consultation if needed.
- **If screen determines assessment is needed**, contact the below to preferably conduct in-person assessment (and provide services if appropriate) or transport for off-site assessment:
  1. Call Alameda Mobile Crisis (510-891-5600) to conduct assessment or transportation for assessment. [Note: Crisis team is not available 24/7.]
  2. Call 911 (Request Ambulance/EMS Response) for transportation for assessment.

While waiting for assessment/response/transportation, immediately inform the parent(s)/guardian(s). However, do not release student to parents/guardians until assessment is complete or student is in custody of Mobile Crisis, CATT and/or OPD/EMS. **IMPORTANT: Student should NEVER be left unsupervised on site.**

- **If screen determines NO assessment is needed**, contact parent(s)/guardian(s) to explain situation and follow up as needed (including safety plan as needed).

# Intra-nasal Narcan (Naloxone) for School District Personnel

**Brett V. Curtis, M. D., J. D.**

**Medical Business Professional Services Group**



# Objectives

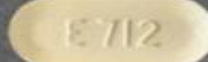
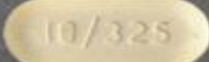
- Identify common causative agents
- Identify pertinent assessment findings before and after administration
- Recognize need for personal safety equipment and scene awareness
- Profile of naloxone including:
  1. Indications
  2. Contraindications
  3. Side/adverse effects
  4. Administration
  5. Dosages
  6. Mechanisms of drug action
  7. Medical asepsis
  8. Disposal of contaminated items and sharps

# Common Causative Agents



## Most commonly used opioids

- Heroin
- Codeine
- Demerol
- Morphine
- Darvocet
- Fentanyl
- Dilaudid
- Methadone
- Opium
- Hydrocodone
- Oxycodone
- Levorphanol
- Vicodin
- OxyContin
- Tylenol 3
- Tylox
- Percocet
- Percodan



# Things to know about Narcan

- ⦿ Narcan does NOT reverse ODs caused by **non-opioid drugs**, such as cocaine, benzodiazepines (e.g., Xanax, Klonopin and Valium), methamphetamines, or alcohol.
- ⦿ Narcan administered to a person dependent on opioids **may produce withdrawal symptoms**.
- ⦿ Withdrawal, although uncomfortable, **is not usually life-threatening**

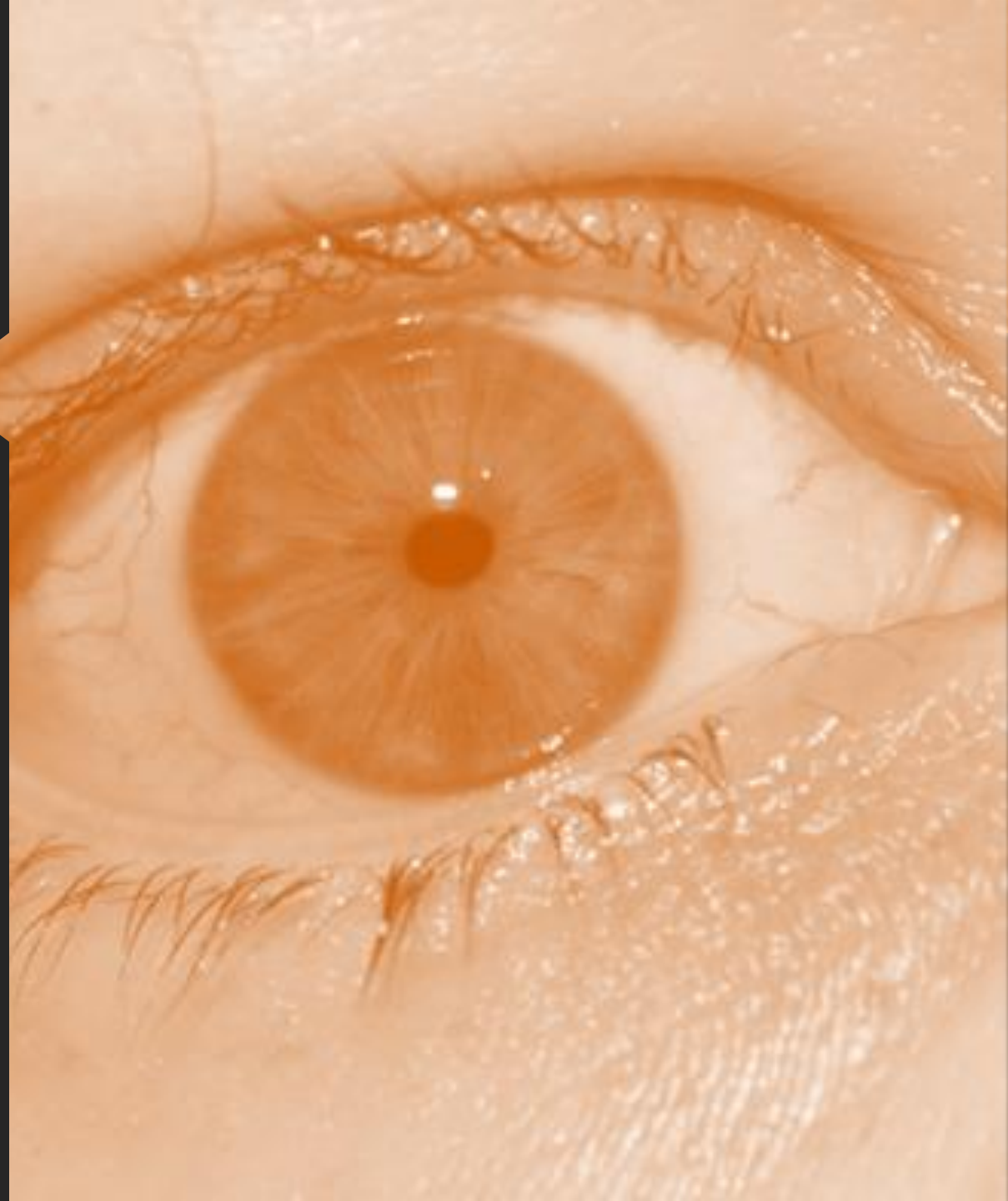
# Things to know about Narcan

- Strongly recommended that anyone receiving Narcan be transported to the hospital by EMS
  - With some long-lasting opioids, Narcan may wear off before the opioids, causing the person to lose consciousness again = they may need another dose!
- Highly recommended NOT to restrain the individual



# Signs & Symptoms that heighten concern for potential overdose:

- Marked drowsiness.
- Intermittent nodding off, or loss of consciousness.
- Confusion.
- Noticeable elation/euphoria.
- If sufficiently severe, hypertension and pupillary dilation may be present because of CNS hypoxia



# Signs of Serious Opioid Overdose

- Breathing slow and shallow (less than 10 breaths per minute which equals 1 breath every 6 seconds) or has stopped
- Blue or grayish lips and fingernails
- Skin may turn gray, blue
- An overall blue or grayish appearance
- Pulse (heartbeat) is slow, erratic, or not present
- Constricted Pupils
- Unresponsive to LOUD verbal stimuli, VIGOROUS shoulder shake or FIRM sternal rub



# Constricted Pupil

- Look for pupils  $< 3\text{mm}$
- $1\text{mm}$  = about the width of the side of a dime



# Signs of Opioid Overdose

By themselves, most  
previously listed signs are  
not reason enough to  
administer Narcan

Must be a reason to  
suspect opioid overdose in  
conjunction with the signs  
listed

Narcan indicated only  
when opioid OD suspected,  
**AND** the victim is  
unconscious



# Reasons to suspect opioid overdose

- When informed by students or staff that the person appears to be unconscious
- Opioid drugs found on scene
- Opioid drug paraphernalia found on scene (needles, syringes, chore boy, a burnt or charred spoon, short cylinder = pipe)
- Witnesses state victim was taking some sort of drugs prior



**Paraphernalia  
commonly  
found on  
scene of  
overdose**



# Responding to an Overdose



- **Safety is your #1 priority**
  - *Stay aware of surroundings* during victim evaluation.
  - **Observe for signs and symptoms of overdose.**
  - **Check for drug paraphernalia – especially look for needles.**
  - **If students are present, direct them to stand back.**
  - **Always call 911.**





# Personal Safety

- Body substance isolation with use of personal protective equipment
- Be aware that IV drug users may be carrying sharp objects
- Narcotic patches may transfer medication to your skin if exposed for an extended period of time
  - Heat and moisture also increase transfer
- Exercise caution while engaged in physical contact

# Be The 1 Before 911

Naloxone and the importance of being prepared

# Naloxone

## NALOXONE (Narcan)

### **ACTION: Narcotic Antagonist**

- Antagonizes effects of opiate narcotic agents by competing at the receptor site resulting in reversal of respiratory depression associated with opiate overdoses.

### **INDICATIONS:**

- Altered Mental Status in the presence of suspected narcotic overdose, or coma of unknown etiology.

### **CONTRAINDICATIONS:**

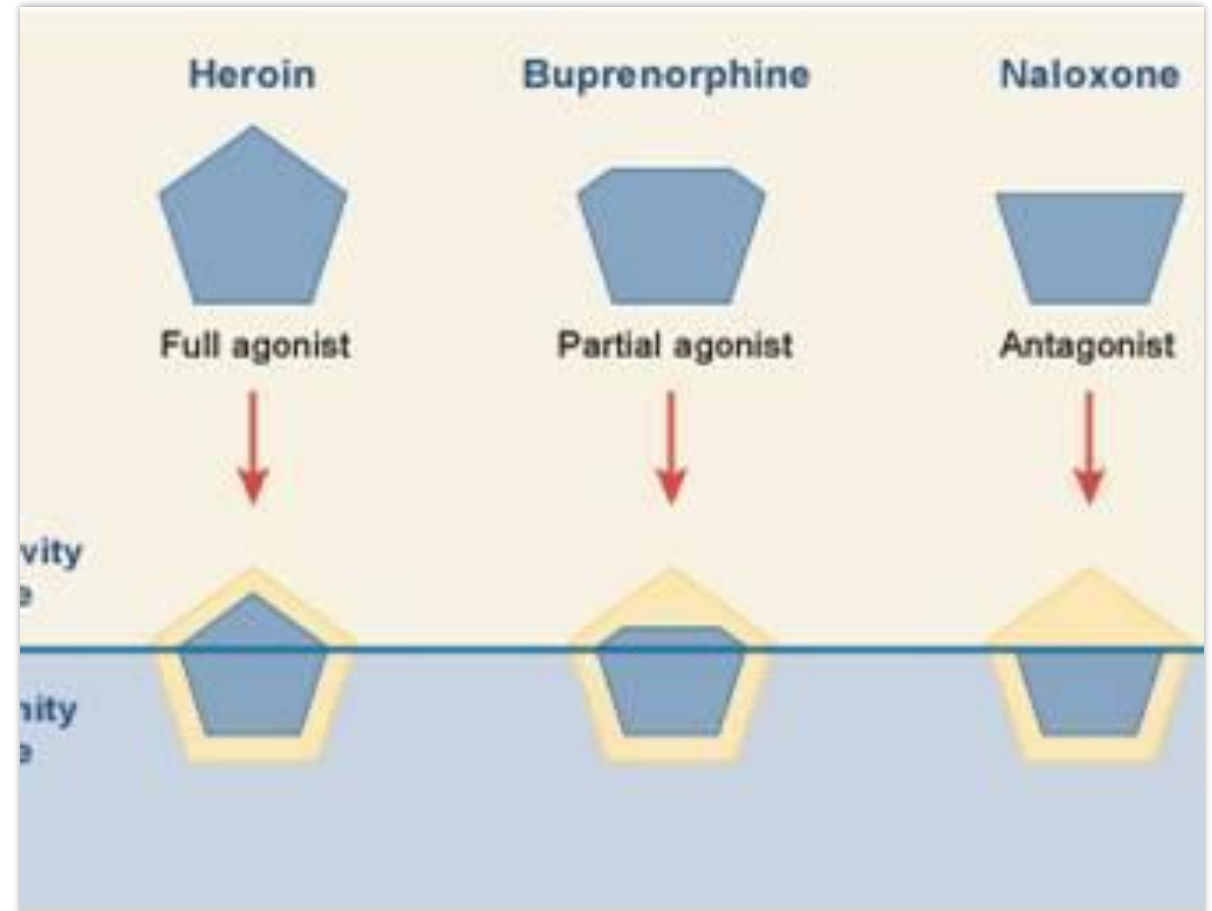
- Patients with hypersensitivity to the drug.
- Neonate in the setting of opiate dependence.

### **POTENTIAL SIDE EFFECTS:**

- Rapid administration can cause projectile vomiting.
- May precipitate withdrawal in chronic narcotic users.
- Patients may become agitated or violent after drug is administered.

# Naloxone: Action

- Drugs that block or reduce the action of another drug are called **antagonists**.
- Naloxone is a opioid antagonist
- "Antagonizes effects of opiate narcotic agents by competing at the receptor site resulting in reversal of respiratory depression associated with opiate overdoses."
- Half-life of Narcan is shorter than opiates and symptoms can recur.





# Side Effects

- Patient may become agitated or violent after drug is administered.
  - Never restrain the victim.
- Administration may cause vomiting.
  - Always step back and be to the side of the victim.
- May precipitate withdrawal in chronic narcotic users.





# NASAL SPRAY

**NARCAN<sup>®</sup>** (naloxone HCl)  
**NASAL SPRAY**

**QUICK START GUIDE**  
Opioid Overdose Response Instructions

Use the NARCAN Nasal Spray (naloxone hydrochloride) for known or suspected opioid overdose in adults and children.  
Important: For use in the nose only.  
Do not remove or test the NARCAN Nasal Spray until ready to use.

**1 Identify Opioid Overdose and Check for Response**

Ask person if he or she is okay and about name.  
Shake shoulders and firmly rub the middle of their chest.  
Check for signs of opioid overdose:  
• will not wake up or respond to your voice or touch  
• breathing is very slow, irregular, or has stopped  
• center part of their eye is very small, sometimes called "pinpoint pupils"  
Lay the person on their back to receive a dose of NARCAN Nasal Spray.

**2 Give NARCAN Nasal Spray**

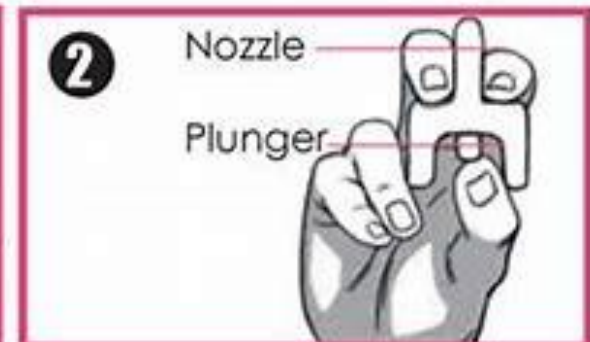
Remove NARCAN Nasal Spray from the box.  
Peel back the tab with the circle to open the NARCAN Nasal Spray.  
Hold the NARCAN nasal spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.  
Gently insert the tip of the nozzle into either nostril.  
• Tilt the person's head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into one nostril, until your fingers on either side of the nozzle are against the bottom of the person's nose.  
Press the plunger firmly to give the dose of NARCAN Nasal Spray.  
• Remove the NARCAN Nasal Spray from the nostril after giving the dose.  
Get emergency medical help right away.  
Move the person on their side (recovery position) after giving NARCAN Nasal Spray.  
Watch the person closely.  
If the person does not respond by waking up, by voice or touch, or by breathing normally another dose may be given. NARCAN Nasal Spray may be dosed every 2 to 3 minutes, if available.  
Repeat Step 2 using a new NARCAN Nasal Spray to give another dose in the other nostril. If additional NARCAN Nasal Sprays are available, repeat step 2 every 2 to 3 minutes until the person responds or emergency medical help is received.

**3 Call for emergency medical help, Evaluate, and Support**

For more information about NARCAN Nasal Spray, go to [www.narcannasalspray.com](http://www.narcannasalspray.com), or call 1-844-6NARCAN (1-844-662-7226).

©2019 ADAPT Pharma, Inc. NARCAN<sup>®</sup> is a registered trademark of ADAPT Pharma. NARCAN<sup>®</sup> is a registered trademark of ADAPT Pharma. NARCAN<sup>®</sup> is a registered trademark of ADAPT Pharma.

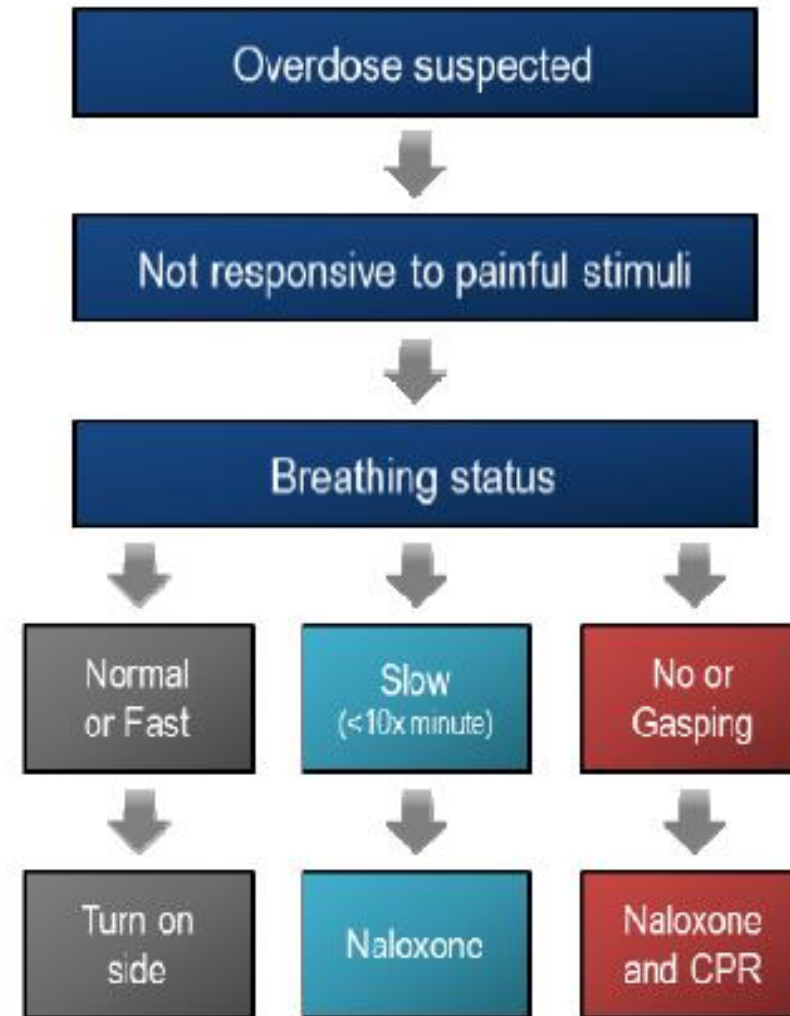
## How to administer Narcan Nasal Spray



# When to Use Naloxone

- Check responsiveness
- Check breathing status
- Remember: Check & Manage ABCs!

## When to Use Naloxone





# Intra-Nasal Naloxone



# Pre-Manufactured Kit

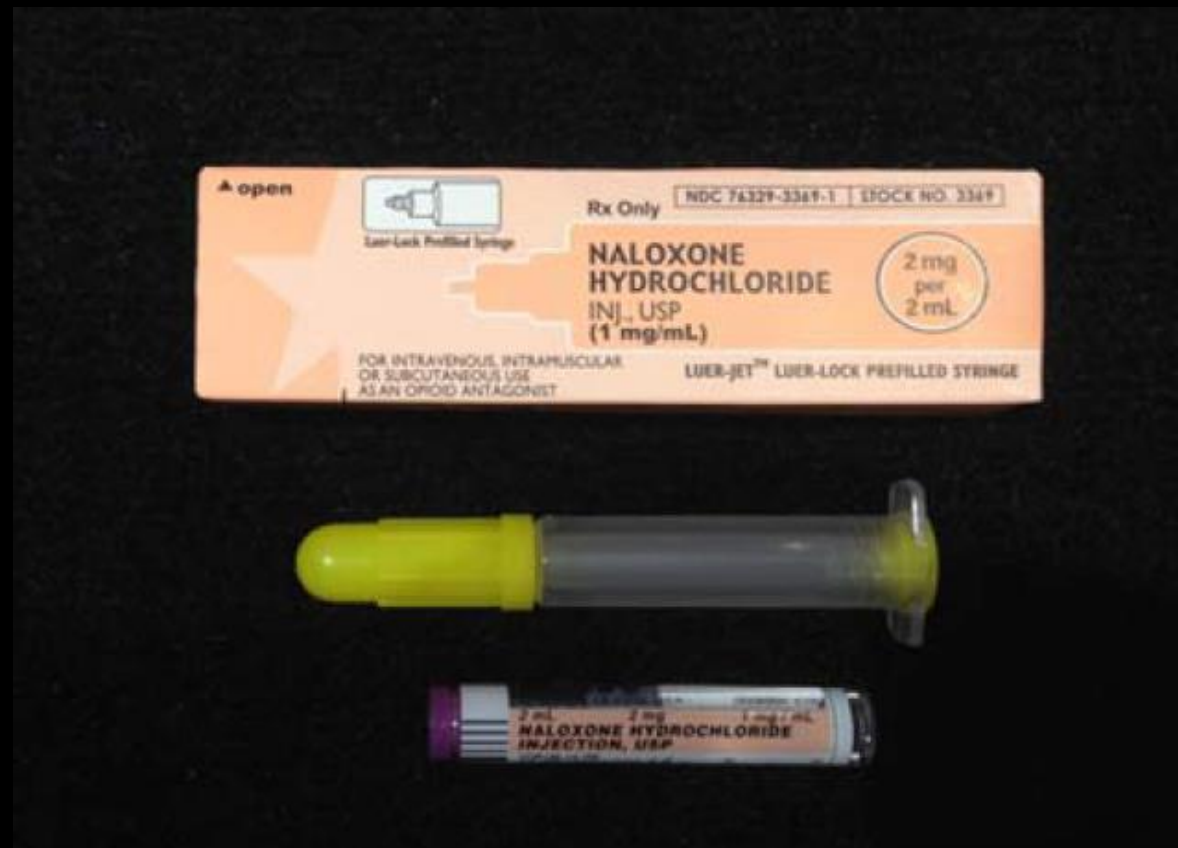


**COMPACT  
POUCH**

Available with  
Molle or Velcro  
back.



# How to Prep Intra-nasal Naloxone



# Remove caps from injector



# Remove cap from medication vial





# Get atomizer





# Attach atomizer to injector

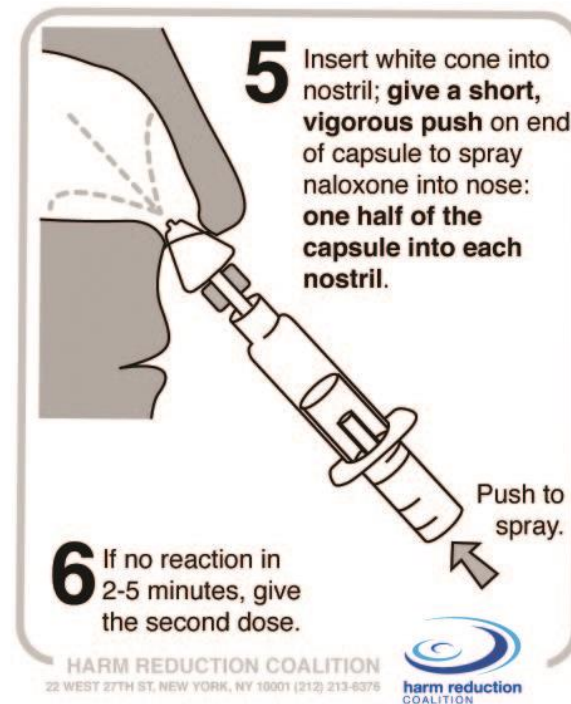
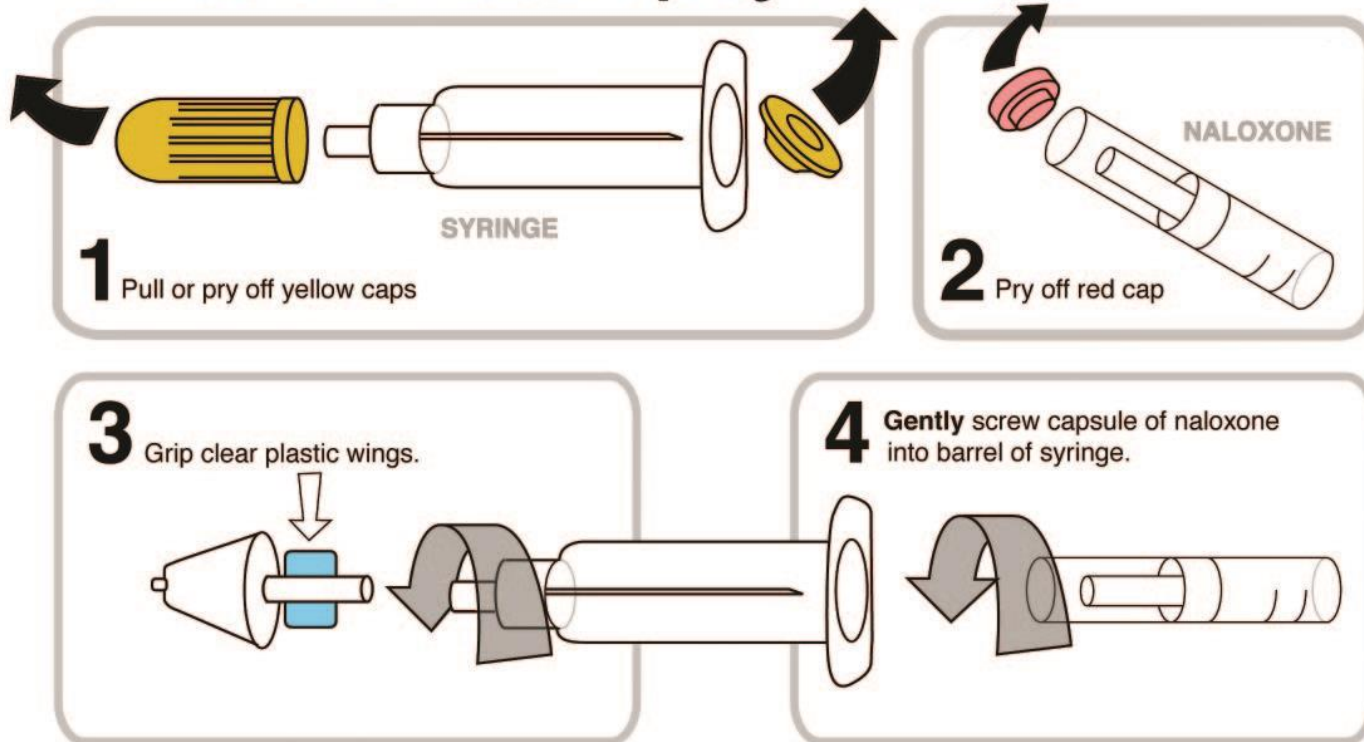


# Screw medication vial onto injector



# How to Use Intra-nasal Naloxone

## How to Give Nasal Spray Naloxone



# Opioid Statistics – October 2022

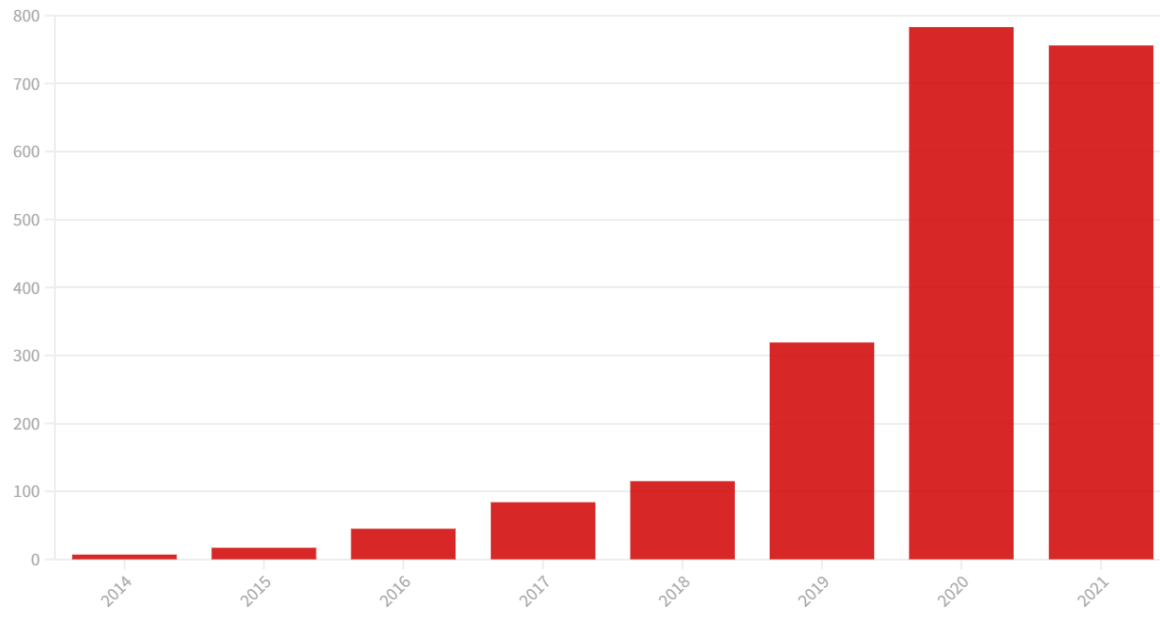
- The United States makes up 4.4% of the world's population
- The United States consumes nearly 81% of the world's opioids (prescription and non-prescription)
- The opioid prescription rate was 42.8 prescriptions per 100 people in the United States.
- The United States consumes 99% of the world's hydrocodone supply (aka Vicodin / Lortab / Norco).

# Youth fentanyl deaths have increased

## Spike in California youth deaths fueled by fentanyl.

Yearly youth fentanyl deaths shot up nearly sevenfold from 2018 to 2021.

■ Fentanyl Deaths



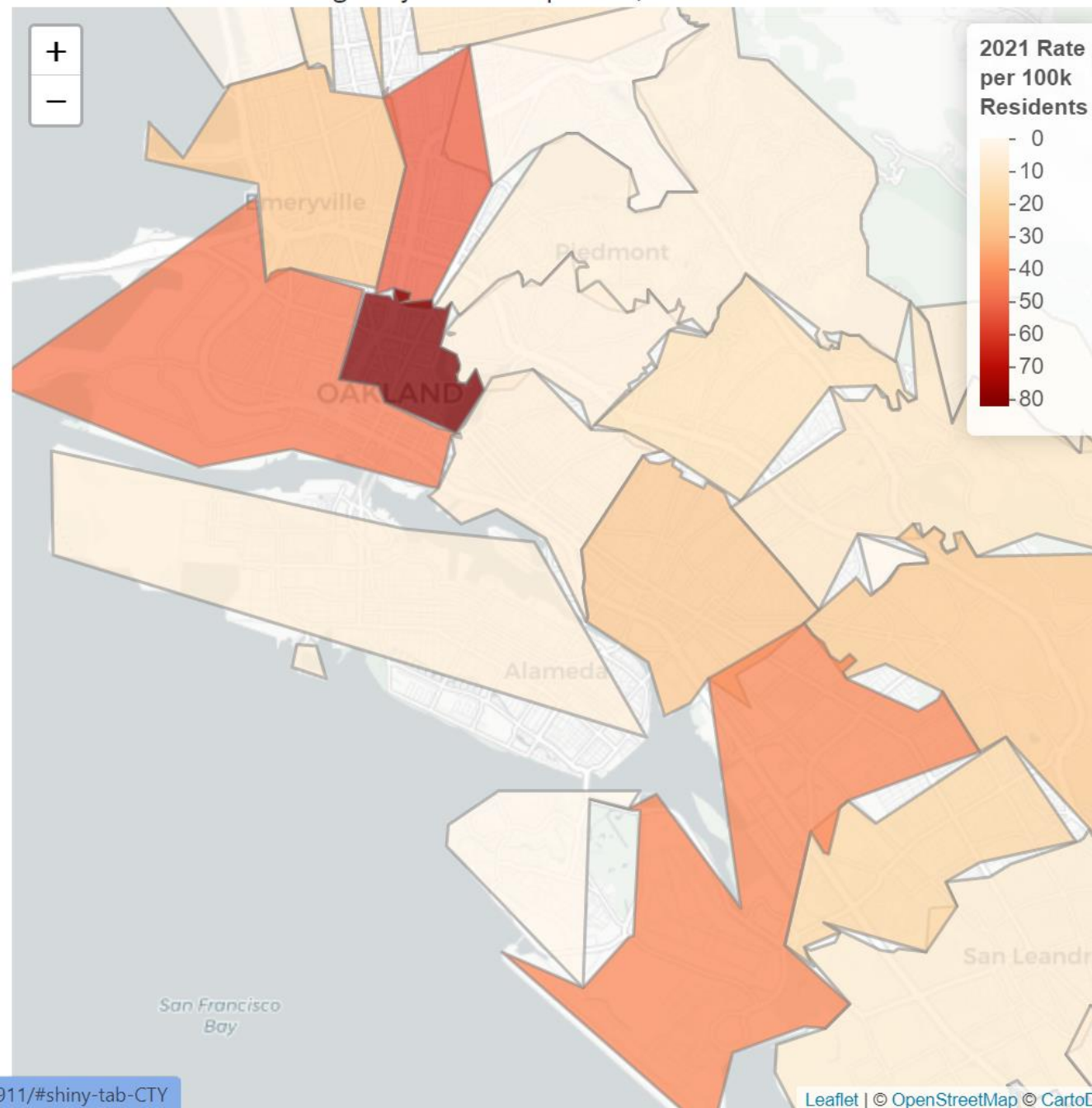
In 2021:

- 14,777,578 Opioid prescriptions in CA
- 21,016 ER visits related to any opioid overdose
- 7,175 deaths related to any opiate in CA
  - 5,961 deaths related to Fentanyl OD in CA
- 77 youth, ages 15 to 19, were rushed to emergency rooms in bay area counties
- Alameda County:
  - Over 200 deaths related to any opioid
    - 95% of deaths related to Fentanyl
    - 10 deaths per 100k residents
- Problem is that death rates continue to rise for all classes of drugs of abuse: prescription opiates, street opiates (fentanyl / heroin) and a non-opiates like methamphetamine. Dealers are now spiking marijuana with opiates.

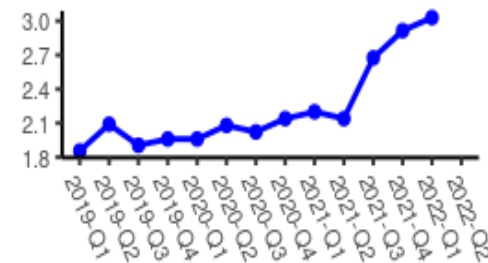


# Any Opioid-Related Overdose Deaths - Total County Population, Alameda, 2021

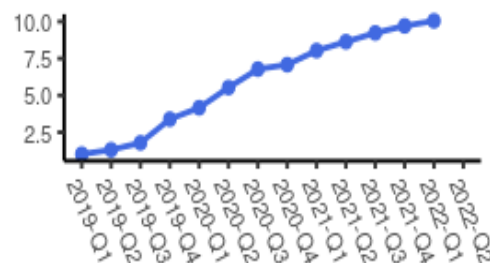
Age-Adjusted Rate per 100,000 Residents



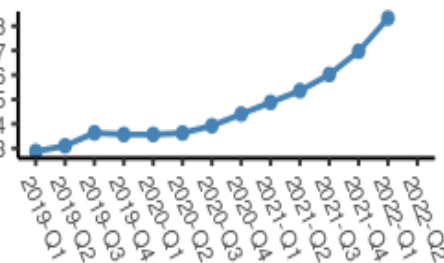
## 12-Month Rx Opioid-Related OD w/o Synthetics Death Rates



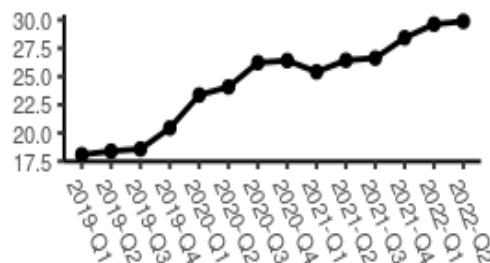
## 12-Month Synthetic Opioid-Related OD Death Rates



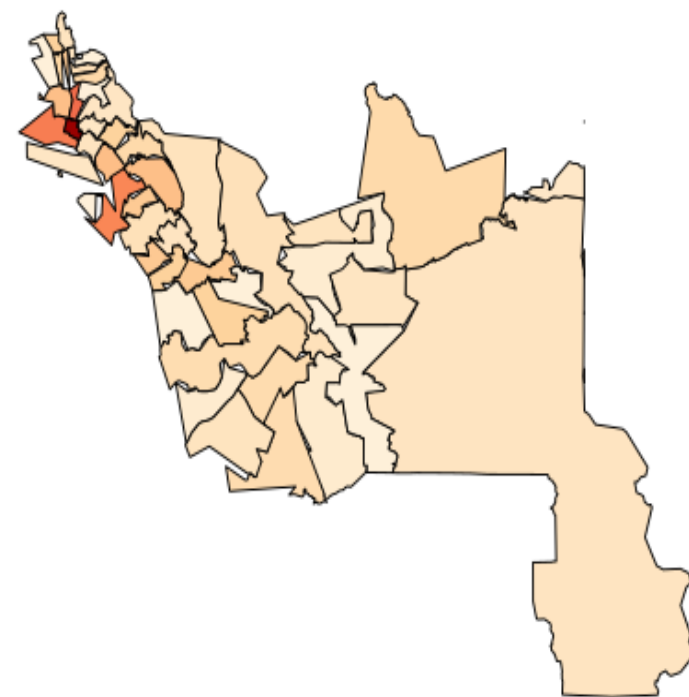
## 12-Month Psychostimulant w/Abuse Potential-Related OD Death Rates



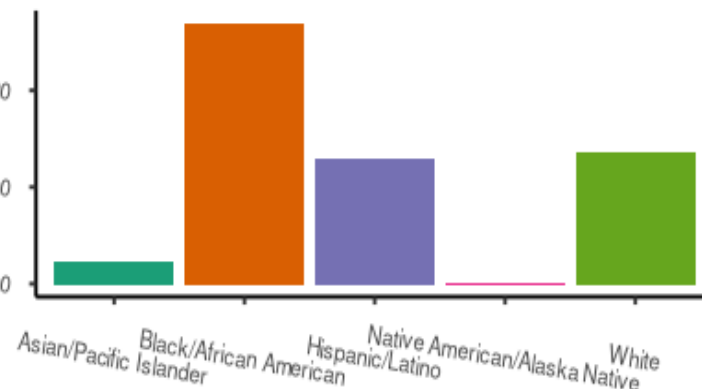
## 12-month Any Opioid-Related OD ED Visit Rates



## Any Opioid-Related Overdose, 2021 Age-Adjusted Annual Death Rates by Zip Code



## Any Opioid-Related Overdose, 2021 Age-Adjusted Death Rates per 100k Residents by Race/Ethnicity



# What to expect after administering Narcan



- Each victim will react differently
  - Most will wake up simply confused and disoriented
  - Side effects may include but are not limited to: rapid heart rate, nausea and vomiting, sweating, blurred vision, and opiate withdrawal
  - Can become combative
- ⦿ Use extreme caution with combative victims
  - Do NOT try to restrain
  - Most combative victims are also disoriented and confused
  - Will not listen to commands
- ⦿ Anyone receiving Narcan should be transported to the hospital by EMS. Call 911.

# Signs of improvement

## Respiratory

- Breathing returns
- Reverts from irregular/inadequate to normal breathing

## Circulation

- Pulse present and normal
- Skin tone improving, paleness and bluish tint go away

Consciousness improves and victim becomes more alert



# Scenario 1

- Your fellow teacher is handling a ziplock bag with some “smiley face” stickers in it left behind by kids out in front of the school, they suddenly collapse in front of you.
- They are unresponsive and seem to be barely breathing.
- What should you do?



# Scenario 1, cont'd

- What are your priorities?
- What are you assessing?
- How can you determine if this is a narcotic overdose?
- Does your fellow teacher have a pulse?  
If no, start chest compressions!



The background of the slide shows a close-up of a person's arm, likely a forearm, with a visible injury. There is a red, circular mark near the elbow and a long, vertical, reddish-purple bruise or laceration running down the forearm. The person is wearing a white shirt.

# Scenario 1, cont'd

- ⦿ Always assess ABCs
  - ⦿ Airway, breathing, circulation
  - ⦿ Be ready to perform CPR
- ⦿ Physical Exam
  - ⦿ Check pulses (not present in this case)
  - ⦿ Start CPR and activate EMS
- ⦿ AED (if available)
  - ⦿ Apply pads and follow AED instructions



# Scenario 1: Conclusion

- Call for ALS
- Check for a pulse... no pulse? Start immediate compressions! **Never delay or interrupt CPR to administer naloxone**
- Pinpoint pupils with respiratory depression? Other scene clues suspected of narcotic exposure.
  - If so, intranasal Narcan
- Prepare equipment in case of respiratory/ cardiac arrest





## Scenario 2

- You are over at a friend's home for a friends and family BBQ.
- Their 6-year-old son fell asleep in the middle of the gathering and now won't wake up.
- The boy can be roused with painful stimuli, but falls asleep almost immediately afterward.

## Scenario 2, cont'd

- What are your priorities?
- What are you assessing?
- How can you determine if this is a narcotic overdose?







## Scenario 2, cont'd

- Assess ABCs.
  - If the child is able to manage airway and breathe adequately, minimal interventions.
- Assess pupils. Are they pinpoint?
- Family medical history.
  - Does anyone in the family have a narcotic prescription?

# Scenario 2: Conclusion

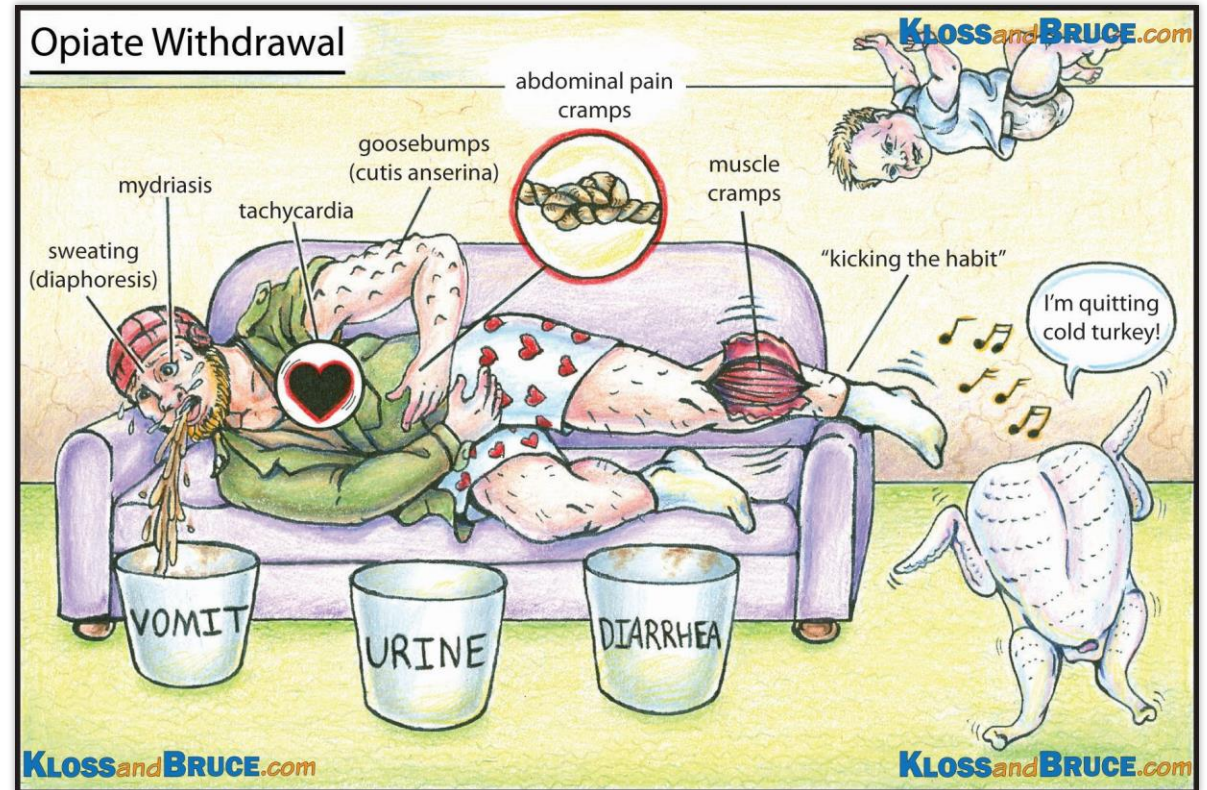
- Call 911 (EMS)
- Continue to assess airway and circulation (pulse)
- Pinpoint pupils with respiratory depression?
  - Intra-nasal Narcan
- Be prepared to perform CPR





# Withdrawal

- Withdrawal symptoms can mimic flu symptoms and include:
  - Headache.
  - Nausea and vomiting.
  - Diarrhea.
  - Sweating.
  - Fatigue.
  - Anxiety.
  - Inability to sleep.



# You have administered intra-nasal naloxone... Now what?

■ Continue to monitor signs and symptoms, breathing, pulse and level of consciousness until EMS / FIRE arrives.

■ If first dose of intra-nasal naloxone is ineffective an additional 2 doses, every 2 minutes can be given.

■ Be prepared to perform CPR

■ Paramedic may be able to restock depend on agreements with county EMS.

■ Complete paperwork, if any, required by school district.

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

Report Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Employee Name: \_\_\_\_\_

Name of Victim: \_\_\_\_\_

1. When did the overdose occur? Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Approximate Time: \_\_\_\_\_

2. How did you know that an overdose was happening? (Check all that apply.)

- ☐ Person looked blue                      ☐ Person had pinpoint pupils
- ☐ Person was barely breathing              ☐ Person stopped breathing
- ☐ Person did not respond to sternal rub or shoulder shaking
- ☐ Person did not respond to loud verbal stimuli

3. Was suspected drug paraphernalia present at the scene?

- ☐ YES    ☐ NO

4. Approximately how long did it take for the naloxone to work? (Check one answer.)

- ☐ immediately                      ☐ 30 seconds                      ☐ 1 minute / 60 seconds
- ☐ 1.5 minutes / 90 seconds              ☐ 2 minutes / 120 seconds              ☐ 2.5 minutes / 150 seconds
- ☐ 3 minutes / 180 seconds              ☐ more than 3 minutes
- ☐ It did not work

5. How many Naloxone doses were administered?

- ☐ 1                      ☐ 2                      ☐ 3                      ☐ more than 3

6. Was CPR performed by school staff?

- ☐ YES    ☐ NO

7. Did paramedics and/or fire department arrive to transport victim?

- ☐ YES    ☐ NO

8. Did the person survive the overdose?

- ☐ YES    ☐ NO    ☐ I do not know

Please return the completed for to your Narcan Coordinator and/or Risk Management Department.

1

Airway, breathing, and circulation (**ABCs**) are **ALWAYS TOP PRIORITY** when managing patients who are candidates for naloxone

2

A good patient assessment reveals patients who are candidates for naloxone

3

Consider use of intra-nasal (IN) naloxone for ALOC patients **with respiratory depression**

4

Naloxone / Narcan is an opiate antagonist that reverses opiate overdose

5

No person will administer the school district issued Narcan until they have completed training.

# Conclusion

# Summary

Narcan is a safe and effective drug in treating opioid overdoses



May lessen lethality of opioid overdoses by getting Narcan on scene faster



#1 priority will always be safety



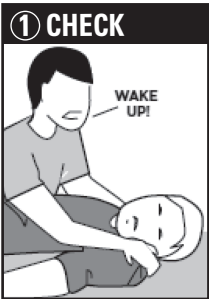
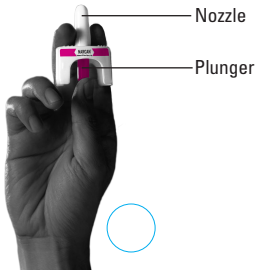
Proper storage, maintenance, and exchange of Narcan

DIRECTIONS

NARCAN®  
Naloxone HCl Nasal Spray 4 mg

Emergency Treatment of Opioid Overdose

- Important:
- For use in the nose only
  - Do not test nasal spray device before use
  - 1 nasal spray device contains 1 dose of medicine
  - Each device sprays 1 time only



Step 1: CHECK if you suspect an overdose:

- **CHECK** for a suspected overdose: the person will not wake up or is very sleepy or not breathing well
  - yell “Wake up!”
  - shake the person gently
  - if the person is not awake, go to Step 2

Unfold for  
Directions



Step 2: Give 1st dose in the nose

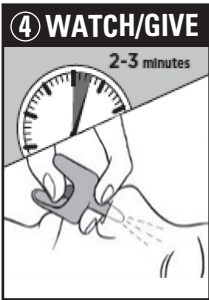
- **HOLD** the nasal spray device with your thumb on the bottom of the plunger
- **INSERT** the nozzle into either NOSTRIL
- **PRESS** the plunger firmly to give the 1st dose
- 1 nasal spray device contains 1 dose

Unfold for  
Directions



Step 3: Call 911

- **CALL 911** immediately after giving the 1<sup>st</sup> dose



Step 4: WATCH & GIVE

- **WAIT** 2-3 minutes after the 1<sup>st</sup> dose to give the medicine time to work
- if the person wakes up: Go to Step 5
- if the person does not wake up:
  - **CONTINUE TO GIVE** doses every 2-3 minutes until the person wakes up
  - it is safe to keep giving doses



Step 5: STAY

- **STAY** until ambulance arrives: even if the person wakes up
- **GIVE** another dose if the person becomes very sleepy again
- You may need to give all the doses in the pack

EMERGENT®

For opioid emergencies, call 911. For questions on NARCAN, call 1-844-4NARCAN (1-844-462-7226) or go to [www.narcan.com](http://www.narcan.com).  
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**Healthy Choices:  
Drugs and brain  
science**



# Learning targets:

We will be able to:

- Understand how the brain and nervous system function.
- Identify how different drugs can affect the body and the brain.



# Vocabulary:

**SUBSTANCE:** A product or thing.

**ADDICTION:** The difficulty to stop doing something that may be harmful.

**NERVOUS SYSTEM:** The brain, spinal cord and nerves that control the way a body functions and moves.

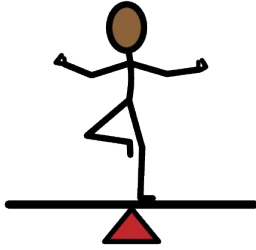
**DEPRESSANT:** a substance that slows down the nervous system.

**STIMULANT:** A substance that speeds up the nervous system.

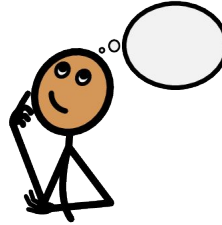
**ANXIETY:** A feeling of worry, nervousness, or obsessing over something.



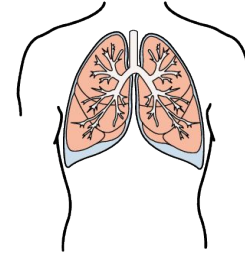
# Your brain



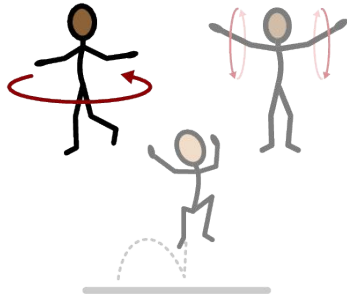
Balance



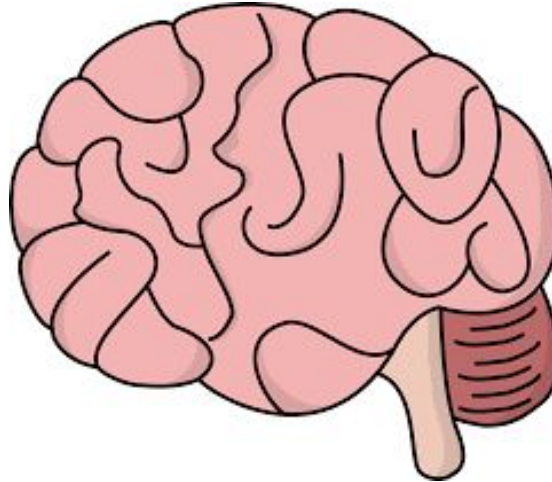
Thinking  
and problem solving



Breathing



Movement and  
coordination



Heart beat

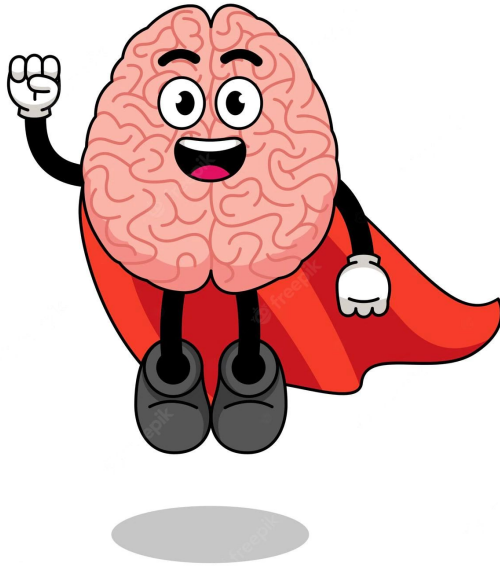
# The nervous system



**The nervous system uses seven trillion nerves to send messages at 275 miles per hour to parts of your body**



# Our brains are superpowered

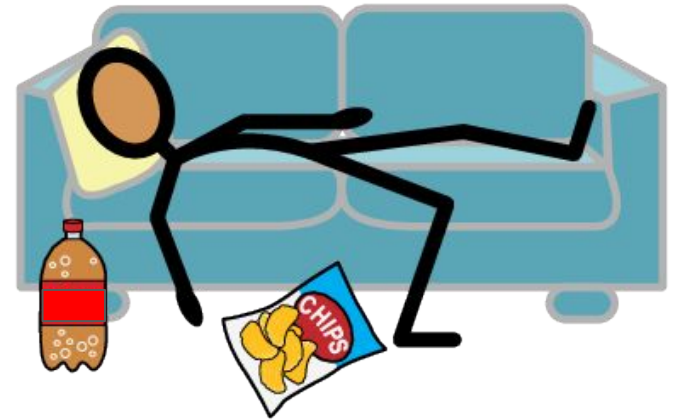
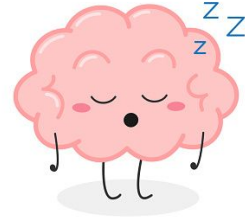


Drugs can have negative effects on our bodies and brains

# Depressants

## Drugs that slow down the nervous system

- Make your mind less alert or aware of your surroundings.
- Make your movement and reflexes slower.
- Slow down your heart rate.
- Make you sleepy or drowsy.



# Stimulants

Drugs that speed up the nervous system



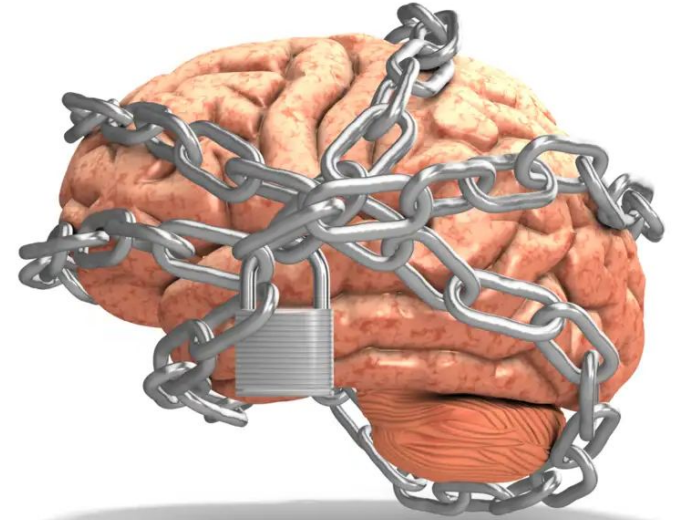
- Make your heart beat faster.
- Increase energy.
- Increase feelings of **anxiety**.
- Make you sweat or fidget.
- Decrease appetite.
- Interrupt sleep.



# Addiction



- **Addiction occurs when the repeated use of a drug changes the way the brain works.**
- **An addicted person will want the drug more and more, and feel sick when they don't have it.**



# Knowing the facts



- **Drugs can have a big impact on a person's life**
- **It's important for you to know the facts about them, so you can make smart choices for yourself.**










# Knowing the facts



## Substance Fact Sheet

Names \_\_\_\_\_

	Substance	Products that contain it	Effects on the body	#
	<b>Nicotine</b>	Cigarettes, cigars, chewing tobacco.	<ul style="list-style-type: none"> <li>•Stimulant that increases alertness</li> <li>•Heart beats faster</li> <li>•Can cause nausea and vomiting</li> <li>•Can lead to addiction</li> </ul>	
	<b>Marijuana</b>	joints, blunts, vape pens, edibles.	<ul style="list-style-type: none"> <li>•Impairs memory and concentration</li> <li>•Disrupts attention span</li> <li>•Can cause anxiety</li> </ul>	
	<b>Caffeine</b>	Coffee, tea, soft drinks, chocolate, pills.	<ul style="list-style-type: none"> <li>•Stimulant that Increases alertness</li> <li>•heart beats faster</li> <li>•Makes it harder to sleep</li> <li>•Can cause headaches, or anxiety</li> <li>•Can lead to addiction</li> </ul>	
	<b>Alcohol</b>	Wine, beer, liquor, seltzers.	<ul style="list-style-type: none"> <li>•Depressant that makes you less alert</li> <li>•Can kill brain cells</li> <li>•Harder to concentrate</li> <li>•Reflexes are slower</li> <li>•Can lead to addiction</li> </ul>	
	<b>Opiates</b>	Pain medication pills: oxycontin, hydrocodone, vicodin, morphine.	<ul style="list-style-type: none"> <li>•Depressant that can reduce pain</li> <li>•Slows a person's physical movements</li> <li>•Loss of coordination</li> <li>•Can lead to addiction</li> </ul>	

#	Riddle	Substance
1	I'm a kind of drug that is in some drinks, I affect the brain and make it harder to think, people can't drink me till they're 21, when adults drink too much, it's really not fun.	
2	When someone has a bad injury, a doctor might <u>pre-scribe</u> me, but using me is very serious, I should never be taken just cause you're curious.	
3	Even if they cough and choke, I'm a major reason reason that people smoke, once you start me it's hard to stop, I'm inside little boxes you see in shops.	
4	I'm found in a few things that you eat, like soda pop, and chocolate treats. Grownups use me to get awake, too much might cause you to shake. I can make it hard to snooze, and sleep is something you can't afford to lose.	
5	I'm sometimes eaten, and sometimes smoked, I can make you forget your favorite joke, this drug may be legal for adults, But don't use me if you want good test results.	

# What drug am I?



I'm a kind of drug that is in some drinks,  
I affect the brain and make it harder to think,  
people can't drink me till they're 21,  
when adults drink too much, it's really not fun.



**Alcohol**

## Effects on the brain:

- it's a depressant that makes you less alert
- It can kill brain cells
- it makes it harder to concentrate
- It makes reflexes slower
- It can lead to addiction

# What drug am I?



When someone has a bad injury,  
a doctor might pre-scribe me,  
but using me is very serious,  
I should never be taken just cause you're curious.



**Opiates**

## Effects on the brain:

- It's a depressant that can reduce pain
- It slows a person's physical movements
- It creates a loss of coordination
- It can lead to addiction

# What drug am I?



Even if they cough and choke,  
I'm a major reason reason that people smoke,  
once you start me it's hard to stop,  
I'm inside little boxes you see in shops.



**Nicotine**

## Effects on the brain:

- It's a stimulant that increases alertness
- It makes the heart beat faster
- It can cause nausea and vomiting
- It can lead to addiction

# What drug am I?

I'm found in a few things that you eat,  
like soda pop, and chocolate treats.

Grownups use me to get awake,  
too much might cause you to shake.

I can make it hard to snooze,  
and sleep is something you can't afford to lose.



**Caffeine**

## Effects on the brain:

- It's a stimulant that increases alertness
- It makes the heart beat faster
- It makes it harder to sleep
- It can cause headaches, or anxiety
- It can lead to addiction

# What drug am I?



I'm sometimes eaten, and sometimes smoked,  
I can make you forget your favorite joke,  
this drug may be legal for adults,  
But don't use me if you want good test results.

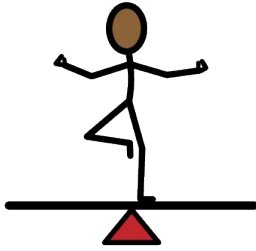


**Cannabis**

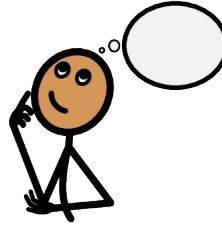
## Effects on the brain:

- It decreases memory and concentration
- It decreases your attention span
- It can cause anxiety

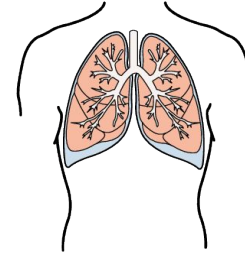
# A healthy brain



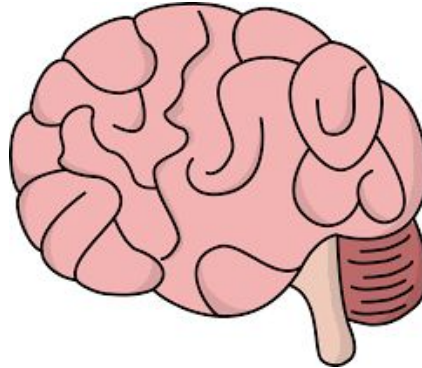
Balance



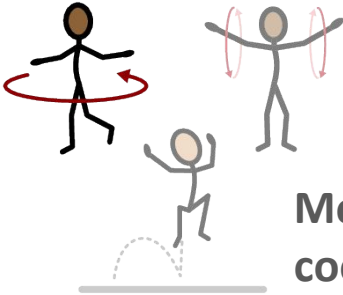
Thinking  
and problem solving



Breathing



Heart beat



Movement and  
coordination

Avoiding drugs as you grow older will make sure your body and brain can perform their best, so you can keep doing all the things you love.



# Lets review



- What is one thing we do that our brain controls?
- What is a substance called that slows down the nervous system?
- What is a substance called that speeds up the nervous system?
- What is one reason to avoid drugs?





MS Substance Use:

# Drugs, Alcohol and Addiction

# Learning Targets



We will be able to:

- understand connection between mental health and drug and alcohol addiction
- Determine what behaviors could mean a person is addicted, potentially abusing, or using a drug more safely.



# Group Agreements



- One Mic
- Any question is a good question
- Protect people's privacy (don't share personal info about other people.)
- Respect different identities and different ideas (No put downs)
- Don't make assumptions about others
- Teach others, listen to others



# Do Now



Answer the following question in your worksheet:

- Why do you think people become addicted to drugs or alcohol?
- How would someone know if they were getting addicted to drugs or alcohol?



# What are the most common reasons people use alcohol or drugs?



- To “escape from reality”
- To try to adjust their mood and feel better
- To handle strong emotions like depression, stress or anxiety.

Frequent drug or alcohol use can actually have a negative effect on mental health. Over time it can make depression and stress get worse.



# Signs of addiction



- **ADDICTION** can happen slowly. It occurs when the frequent use of a drug changes the chemicals in a person's brain. Young people's brains are more vulnerable to addiction.
- A person can develop a **TOLERANCE** to a drug, meaning they need more and more to feel its effects.
- They may begin to feel **WITHDRAWAL** and get sick, depressed, or anxious when they don't have it.



# Mental health and addiction



**Using drugs or alcohol  
to try to cope.**

**Feeling stressed,  
anxious, or  
depressed**



**Addiction leads to  
more anxiety and  
depression**



# Addiction is not one person's “fault”

HEALTHY  
OAKLAND  
TEENS

How Addiction Happens



Video will  
start at 0:27  
End at 3:45



# Risk of substance addiction:



- If other people in the family struggle with addiction
- Experiencing tolerance or withdrawal
- Often thinking about the next time you can use it
- Caring more about it than other things like friends, school, sports, or family
- Hanging out with people you don't like, or doing risky things to get it
- Trying to take a break or stop, but not being able to

# What symptom of addiction did she have?



WEED  
WHACKED

Video starts  
At 9:46, ends  
At 10:16



# products in the scenarios

HEALTHY  
OAKLAND  
TEENS



Alcohol



Medical  
cannabis



Cannabis  
vapes



Nicotine vapes

# The spectrum of drug and alcohol use



## Addiction:

- High tolerance.
- Frequent use.
- Anxiety from withdrawal.
- Care more about it than friends, family, or health.

## Potential abuse:

- Use it to fit in or be liked.
- Be under 21
- Try it, then keep using it.

## Safer use:

- Being over 21
- Using occasionally.
- Use it as prescribed by a doctor.



# Scenarios

How would you define this person's use?



Neri and Sami are both 12 and best friends. A couple of months ago Sami stole a flavored nicotine vape pen from her mom's purse and Neri and Sami decided to try it. They liked the flavor, and felt cool using it so they started using it most days when they hung out after school. Sami's mom found out that her vape was missing and asked them about it.

## Addiction:

**Lying about it, feeling anxious without it, thinking about, and using it frequently.**

is and kept thinking to get a guy outside

**Worksheet Section 3**



# Scenarios



Rhiley is 14. He has a medical condition called epilepsy that can make him shake and have seizures. Last year Rhiley's doctor gave him a prescription for a type of edible medicine that is made from cannabis. Since Rhiley has started taking the medicine he has noticed that his seizures happen a lot less. Rhiley follows the doctor's instructions for taking the medicine.

## **Safer use:**

**The safe dose and frequency was prescribed by a doctor**

**Worksheet Section 4**

# Scenarios



Lilly is 13 and has been using a cannabis vape she found at her house. She has been vaping about two or three times a week to “help” her anxiety at school. She is mad at some of her friends because they don’t like being around her when she is high. Her brother found out that she was smoking his vape. When she tried to stop vaping cannabis, she had trouble sleeping, was anxious about everything, and experienced those feelings, so

## Addiction:

**Experiencing withdrawal and anxiety without it. Tried to stop but couldn’t.**

# Scenarios



Klay was hanging out in a park with his friends after school. Jordan, who Klay never really liked, joined them and pulled out a bottle of tequila, took a drink and passed it around. Since his friends all drank, Klay drank too. The next week Jordan joined the group and offered the bottle again. Klay didn't want to stand out so he drank a second time. Jordan kept making fun of the one kid in the group who didn't drink. After school Jordan passed around the bottle again. Klay didn't want to stand out or be the only one who didn't drink so he drank again.

## Potential abuse:

**Under 21. Tried it and kept using it. Using it to fit in and be liked.**

# Reducing the chance of addiction

Not using a drug is the best way to avoid addiction.

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OAKLAND  
TEENS



## Limiting how often

- The more often someone uses a drug, the more likely they are to become addicted.
- Using a drug only occasionally and taking long breaks between use, could reduce the chance of addiction.

## Limiting how much

- The higher amount of a drug a person takes, the more likely they are to become addicted.
- Using only a little bit of a drug can reduce the chance of addiction. i.e. taking one hit, v.s. smoking a whole joint.



Exit ticket



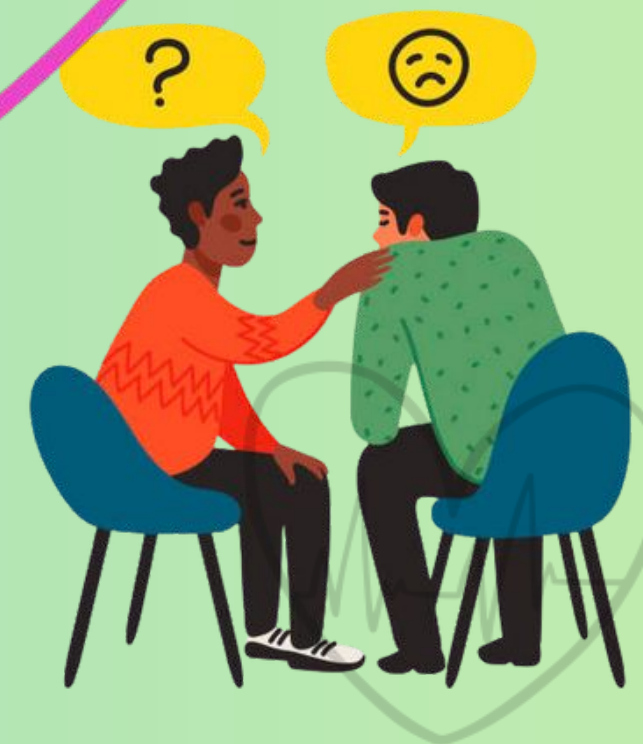
# Getting help

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If you or someone you know feels worried about drug or alcohol addiction, it's important to talk to someone and not deal with it all alone.

Usually addiction has to do with deeper emotions and mental health.

Talk to a friend, a teacher, or a counselor at school. It can be confidential and they won't get you in trouble.



# Put Your Questions in the Question Box

- Questions will be answered next time we meet for class





# What signs of addiction do you hear?



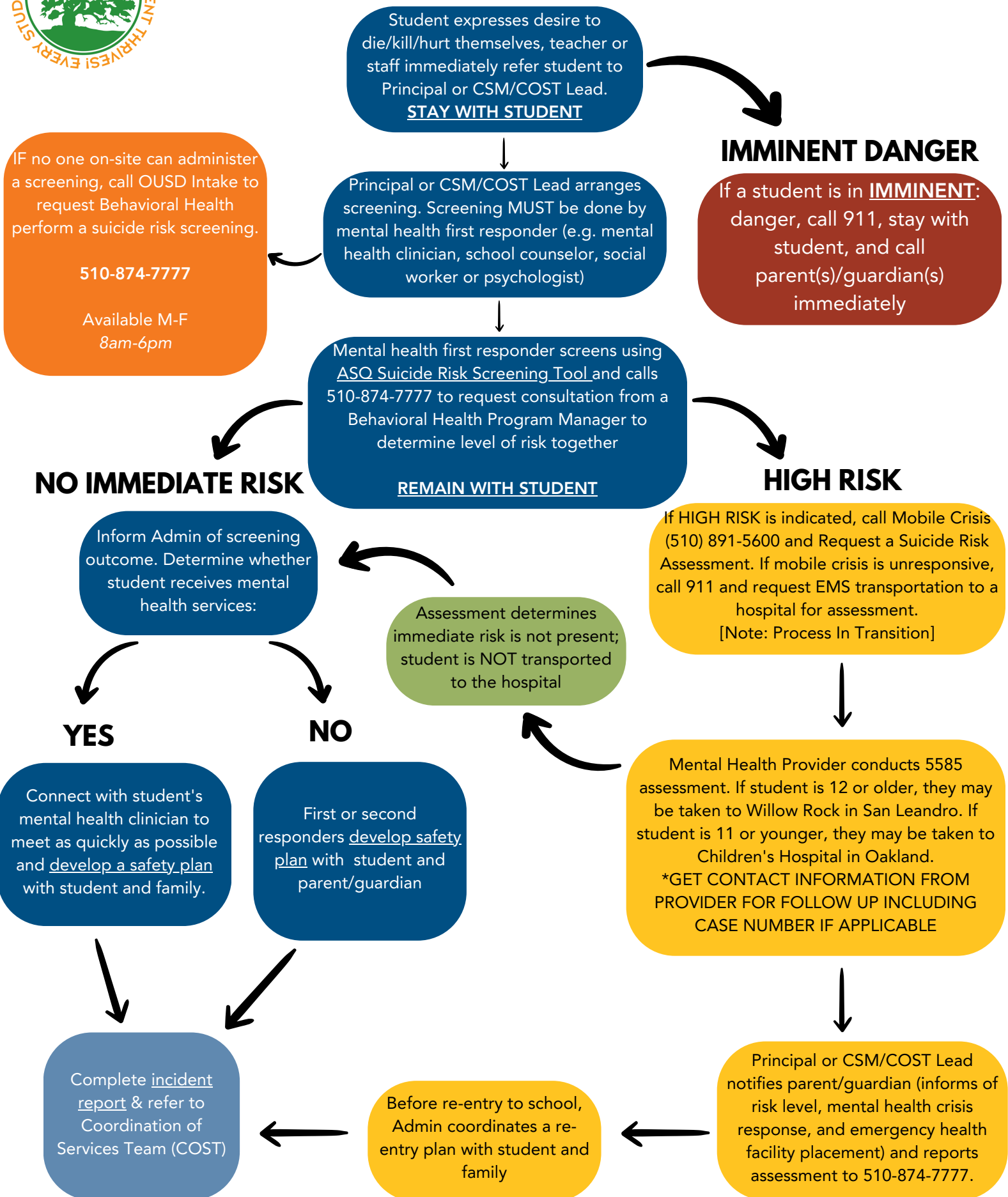
Starts at  
2:09  
Ends at  
6:29





# Oakland Unified School District

## Student Suicide Risk (5150 / 5585) Procedure Flowchart





## AFTER AN INCIDENT

### 1. Debrief As a Team

- a. Mental health first responders meet with administration to debrief incident and co-create a re-entry plan. Assign next steps: Communication with family/student, re-entry facilitator, communication with teachers/staff.
  - i. *Are there any growth points? Was everyone clear on the protocol? If support is needed to review or revise response protocol, contact your behavioral health program manager for support.*

### 2. Re-Entry Planning

- a. A student must have a re-entry plan in place before returning to the classroom. The plan should be made in collaboration with the school counselor, caregiver, and the student. Ensure the plan includes a safety plan (clear steps the student can take if/when they have thoughts of self harm again), a plan for parental/guardian support, and a school wide suicide safety plan (how the school can support the student moving forward). See Re-Entry Guidelines for support.

### 3. Make a COST Referral

- a. Complete a COST referral following an incident regardless of its severity. The COST referral will allow the student to access academic, social, and emotional resources as needed.

### 4. Complete Appropriate Incident Report

- a. An incident report or special ed behavioral emergency report should be completed by the principal, CSM/COST Lead, or designated individual within 24 hours after the incident occurs.

## FAQs

### 1. What is the function of the suicide risk screener?

- a. The suicide risk screening tool determines whether there is suicide risk RIGHT NOW warranting immediate response.

### 2. What is considered imminent danger?

- a. A student has taken action to harm themselves or has the means and intent to cause immediate and serious self-harm (e.g. a student has taken pills/substances, a student is in possession of a weapon and expressed intent to use it, a student has cut themselves and requires immediate medical attention).

### 3. How do I know who is a mental health first responder on my campus?

- a. Reference your site's Mental Health Crisis Team document, located within your GFR Village Response Plan.

### 4. What do I do when an incident happens in After School?

- a. The OUSD Intake line is active until 6pm. If a mental health first responder is not on campus, call 510-874-7777 and request a suicide risk screening. If a behavioral health staff member is not available, call Mobile Crisis at (510) 891-5600 for a suicide risk evaluation or call 911 and request EMS transportation to the hospital for suicide risk assessment.

### 5. What do I do if I call Mobile Crisis and they do not respond or do not arrive?

- a. Call 911 and request EMS to transport the student to the hospital for assessment. Ensure a staff member remains with the student. Call 510-874-7777 if you are not able to reach emergency services.

### 6. Can parents/guardians bring their child in for assessment themselves?

- a. No, once a student is screened by a mental health first responder and determined to be at high risk for suicide, mental health personnel are responsible for ensuring the student is assessed.

### 7. Will my child interact with Law Enforcement when they receive a suicide risk assessment? (i.e. when Mobile Crisis is called and they are transported to the hospital)

- a. Mobile Crisis may bring a police officer to the assessment to facilitate involuntary hospitalization when necessary. Mobile Crisis may also recommend to call 911 and send a police officer to complete a 5585 assessment when they are not available to respond.

## School Safety Plan Recommendations and Assurances

School Site Name: \_\_\_\_\_ Site Number \_\_\_\_\_

The School Site Council (SSC) recommends this comprehensive School Site Safety Plan to the district governing board for approval, and assures the board of the following:

1. The School Site Council is correctly constituted, and was formed in accordance with district governing board policy and state law, per Education Code 52012. Under California Education Code 32281, the School Site Council or its delegates formed a School Site Safety committee with the minimum of the following members:
  - The Principal or designee
  - One teacher who is a representative of the recognized certificated employee organization
  - One parent whose child attends the school
  - One classified employee who is a representative of the recognized classified employee organization
  - Other members, if desired
2. The school plan and safety plan is based upon a thorough analysis of student safety goals/data. The actions and strategies proposed herein form a sound, comprehensive, and coordinated plan to reach stated safety goals and to meet all safety planning procedures.
3. The School Site Council reviewed the content requirements of the Site Safety Plan and assures all requirements have been met.
4. The safety plan was communicated to the public, per Education Code section 35294.2 (e): "...an updated file of all safety related plans and materials shall be readily available for inspection by the public."
5. Opportunity was provided for this school's Safety Plan (per Education Codes Sections 35294.8(b), 35294.2(e), and 32288) for public input and adopted by the School Site Council at a public meeting (s) on:  
\_\_\_\_\_

**In your Site Safety Plan, include documentation of how you provided an opportunity for public review and how the public can access or review the plan**

The public was alerted about the meeting through one of the following:

Fliers in students' home languages (date) \_\_\_\_\_

Announcement at the public meeting (date) \_\_\_\_\_

Other - \_\_\_\_\_ (date) \_\_\_\_\_  
Please specify the type of notice/media announcements

### Signatures

_____	_____	_____
Print name of school principal	Signature	Date
_____	_____	_____
Print name of SSC chairperson	Signature	Date
_____	_____	_____
Print name of Network Superintendent	Signature	Date