

**EMERGENCY MANAGEMENT FACT SHEET**  
**Team Members/Staff Responsibilities**  
**2016-2017**

**SCHOOL** \_\_\_\_\_

Primary

Alternate

Crisis Coordinator:

\_\_\_\_\_

Parent/Family Liaison:

\_\_\_\_\_

Security Liaison:

\_\_\_\_\_

Media Liaison:

\_\_\_\_\_

Medical Liaison:

\_\_\_\_\_

Counseling Liaison:

\_\_\_\_\_

Local Law Enforcement Rep:

\_\_\_\_\_

Local Fire Dept. Rep:

\_\_\_\_\_

Staff Expertise:

First Aid Training:

\_\_\_\_\_

CPR Training :

\_\_\_\_\_

Crisis Training:

\_\_\_\_\_

Staff Responsible for:

Gas, water, electric shut-off:

\_\_\_\_\_

Disabling bell schedule:

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Fire Alarm:

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Sprinklers:

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Panic Button(s):

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Students with special needs (physical, visual or hearing impairment, ESOL) :

Student

Staff Member Assigned

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## **Go Box**

The Go Box is filled with the equipment needed to provide immediate aid, procedure assistance and accurate accountability of students, staff and visitors.

Go box location:

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Staff responsible for updating /  
maintaining items in the box:

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Staff responsible for taking box  
when indicated in plan:

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Contents:

- An adequate first aid kit, with disinfectants
- Latex gloves
- Flashlight
- Bullhorn
- Floor plan of the school
- Copies of master list of students updated weekly
- Crisis team badges or vests
- Paper, index cards, markers, pencils
- Name tags
- Tape
- Caution tape
- Student and staff health information; clinic cards; a list of students with medical needs
- Bus rosters and routes
- Emergency phone numbers
- List of staff trained in first aid and CPR
- District personnel directory
- Yearbook
- Schedules of classes
- Batteries
- Towels
- Tissues
- Signs for areas to be set up, i.e., Parent Pick-Up Area, Media Area, Medical Area, Command Post, and Counseling Area
- Multiple blank copies of Medical Information Form
- Multiple blank pages of your school's student sign-in sheet

**Insert your school's fire plan**

**Diocesan Office Notification of  
School Crisis**

School: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Person Calling: \_\_\_\_\_ Person Taking Call: \_\_\_\_\_

Nature of Crisis:  
\_\_\_\_\_

Current Status:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Students/Staff Injured:  
\_\_\_\_\_  
\_\_\_\_\_

**Calls Have Been Made By School To:**

\_\_\_ 911 \_\_\_\_\_

Public Affairs  
(If not available, notify school)

\_\_\_ Student Services(District Superintendent) Time: \_\_\_\_\_  
(If not previously contacted by school)

\_\_\_ Schools in vicinity Time: \_\_\_\_\_

**Other Comments:**  
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