

SCHOOL DISTRICT NAME
EMERGENCY PROCEDURES
BOMB THREAT

EMERGENCY TELEPHONE NUMBERS

Ambulance.....911

Fire Rescue.....911 (Local No.)

Police..... 911

Hospitals **Marin General.....925-7000**
 250 Bon Air Road
 Greenbrae

Kaiser.....444-2000
 99 Montecillo Road
 San Rafael

Novato Community.....897-3111
 180 Rowland Way
 Novato

Building and
Grounds Work
Control.....(Local No.)

SCHOOL DISTRICT NAME

BOMB THREAT

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Person receiving call should:

1. Listen – Do not interrupt caller. Keep caller on the phone as long as possible. (See bomb threat check list.)
2. If possible, alert Site Coordinator by a prearranged signal while the caller is on the line.
3. Notify Site Coordinator immediately after completing the call.
4. Complete bomb threat checklist.

SITE COORDINATOR

1. Notify police department using 911.
2. Notify:
 - a. District Superintendent
 - b. Building and Grounds Work Control
3. With assistance from Site Coordinator, responding police officials will evaluate the threat and will determine whether to evacuate the building or institute a search of the premises.
4. If there appears to be imminent danger, a fire drill (or other signal) may be called.
5. Do not turn on or off any electrical machine switch.

EVACUATION

1. Have students proceed to predetermined area as quickly as possible (avoid parking lots as bombs might be placed in cars).
2. Teachers need to take attendance lists.
3. Have site plans available for police search team.
4. **DO NOT** move or cover any suspicious looking packages or objects. Do not touch – Report location to police.
5. Site Coordinator should exit with building keys and communication devices (cell phones/walkie talkies, etc.).
6. Set up incident command site and have Site Coordinator

FOR SUSPICIOUS LETTERS AND PARCELS

The following list shows some areas that should draw immediate concern:

- Foreign mail, air mail and special delivery
- Restrictive markings such as: *"Confidential"* or *"Personal"*
- Excessive postage
- Handwritten or poorly- typed addresses
- Incorrect titles
- Titles, but no names
- Misspelling of common names
- Oily stains or discoloration
- No return address
- Excessive weight and unevenly distributed or lopsided
- Rigid envelope less flexible than normal letters
- Protruding wires or tin foil
- Excessive securing material such as masking tape, string, etc.
- Visual distractions, misleading statements as being *"Official"*
- Edges are normally sharp, not rounded

WHAT TO DO:

- Do not open
- Do not bend, squeeze or drop
- Put in a safe place, away from other personnel
- Call 911
- Notify Site Coordinator

AFTER ACTION OF ANY EMERGENCY

After an emergency situation, the following plan is suggested:

1. Communication with everyone involved advising that the emergency is over.
2. Conduct a head count to insure everyone is accounted for. If someone is not present, do you know where he/she is? Locate everyone. Report anyone not accounted for.
3. Does anyone need medical attention?
4. Does anyone need another type of support?
5. Is the facility safe to enter?
6. Have all appropriate notifications been made?
7. Assign someone to write a narrative to document the actions of your facility for the after-incident debriefing and report.

Bomb Threat Call Record/Check List School District	School		
	Date	Time	
QUESTIONS TO ASK CALLER			
Exact location of bomb? _____			
Time set for detonation? _____ What is the explosive? _____			
What does it look like? _____			
Why was it placed? _____			
CHARACTERISTICS OF CALLER			
Sex	Accent	Age	Background Sounds?
NOTIFY IMMEDIATELY			
1. SITE ADMINISTRATOR OR DESIGNEE – 911 (LOCAL NUMBER)			
2. POLICE DEPARTMENT – (LOCAL NUMBER). Tell police operator you want to report a school/office bomb threat.			
3. SUPERINTENDENT’S OFFICE – (LOCAL NUMBER)			
ACTUAL LOCATION OF BOMB			
PERSON RECEIVING THREAT			
Name	Address/Location	Threat Received:	
		<input type="checkbox"/> Phone <input type="checkbox"/> In Person <input type="checkbox"/> Other	
MESSAGE (Received from Caller)			
EVACUATION			
<input type="checkbox"/> YES (If yes, who made the decision?) <input type="checkbox"/> NO	Name	Address/Location	
	Telephone	Ext.	Title
SEARCH			
Premises Searched by		Agencies on the Scene	
EXPLOSIVES			
Were Explosives found?		Description of Explosives	
<input type="checkbox"/> YES (If yes, please describe.) <input type="checkbox"/> NO			
Your Name		Your Title/Position	
Please write your comments on the back of this form.			