

Safety Plan (for Staff and Student Safety)

Name of Student		D.C).B:	
Grade:	School:			
		n Class (yes/no):		
If yes, specify: (i.	e. ASD, BIP, DSP	, etc.):		
Date created:	Re	vision date(s):		
-		. •	sure a safe enviror	
and students and	d should be used t	o respond to risks	of student aggress	sion/violence.
Part I				
			ducational assist	ant, early
		eacher, French te		Deta CIT leat
Name	Position	Involved with the	Crisis Intervention	Date CIT last
		development	Training (CIT)	completed: (mm/yy)
		of this Safety	(yes/no)? If	Indicate if this
		Plan? (yes/no)	Yes, indicate if	was a
		i iaii: (yes/iio)	BMS or NVCI.	recertification
			DIVIG OF ITACI.	course.
				course.
			hen student prese	ents with acting
out behaviour (i		e-principal, other	staff members):	
Name	Position	Involved with	Crisis	Date CIT last
		the	Intervention	completed:
		development	Training (CIT)	(mm/yy)
		of this Safety	(yes/no)? If	Indicate if this
		Plan? (yes/no)	Yes, indicate if	was a
			BMS or NVCI.	recertification
				course.

C. Additional Staff involved in the deve					
Name	Position				
Part II					
Student Strengths (social/behavioural)					
Safety Concern(s) (Specific Description	n of Behaviours):				
e.g. student has attempted to bite					
What Interventions have been tried and	d their results?				
Intervention	What was the result				
Does the student have a current Behav	viour Management Plan (BMP)?				
No Yes Date of Plan	• • • • • • • • • • • • • • • • • • • •				
100 Duto of Fiant					
Known or suspected triggers for acting	out behaviour				
Tanomin or suspected triggers for details out believious					
Times of day behaviours typically do <u>not</u> occur?					
I miles of ady somation of typically do n	0000.1				
Times of day behaviours typically <u>do</u> occur?					
Times of day benaviours typically <u>do</u> coodi :					

Prevention Strategies:					
Level 1 indicators (e.g. non-	Staff Response: (clear and specific)				
compliance, pacing)					
Level 2 indicators:(escalated) Imminent risk of serious harm to self or others (e.g., hitting, spitting kicking)	Staff Response: (clear and specific)				
Personal Protective Equipment (PPE) required: Yes No (Consult with Occupational Health & Safety) (If yes, staff using PPE must be trained in proper use and maintenance)					
Means to Summon Emergency Assistance					
Number to dial main office from classroon Additional communication devices (e.g. S					
Staff who have access to communication					
Additional information:					
Contingency Plan for staff changes (To another according to the protected				
Contingency Plan for staff absences: (To ensure casual stall are protected)				

Part III Notification		
Parent/Guardian informed:	Date :	
Principal's Signature		Date :
with a copy of the Safety Plan		able) in Part I have been provided
supervisor is aware or has re workplace violence from a pe obligation to provide informat Injury Form (Appendix E to P In addition to staff listed in Pa	eason to believe that workers needs not believe that workers needs of violent belien to workers at the site using PR.680.HR). The standard of this Safety Plan, the standard Risk of Injury Form i.e.	pehaviour, the supervisor has an g a Notification of Potential Risk of
Staff Member	Position	Date