# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1200</td>
<td>Objective</td>
</tr>
<tr>
<td>1210</td>
<td>Incoming Client/Visitor Traffic</td>
</tr>
<tr>
<td>1220</td>
<td>All Other Emergencies</td>
</tr>
<tr>
<td>1230</td>
<td>Listing of Telephone Numbers to be Contacted in Emergencies</td>
</tr>
<tr>
<td>1240</td>
<td>Internal Traffic</td>
</tr>
<tr>
<td>1250</td>
<td>Employee Access</td>
</tr>
<tr>
<td>1260</td>
<td>After Hour Usage of Agency Facilities</td>
</tr>
<tr>
<td>1270</td>
<td>Facilities and Emergency Response Procedures Annual Assessment</td>
</tr>
<tr>
<td>1280</td>
<td>Instructions for Facilities and Emergency Response Procedures Annual Assessment and Forms</td>
</tr>
<tr>
<td>Appendix A</td>
<td>Reception Register, HS-20</td>
</tr>
<tr>
<td>Appendix B</td>
<td>Sign-In/Out Sheet, HS-8</td>
</tr>
<tr>
<td>Appendix C</td>
<td>Hostile Client Register, HCR-1</td>
</tr>
<tr>
<td>Appendix D</td>
<td>Hostile Client Action Form, HCA-F</td>
</tr>
<tr>
<td>Appendix E</td>
<td>Bomb Threat Report Form</td>
</tr>
<tr>
<td>Appendix F</td>
<td>Agreement for Utilization of Facilities Form</td>
</tr>
<tr>
<td>Appendix G</td>
<td>Facilities Review Assessment</td>
</tr>
</tbody>
</table>
1200 OBJECTIVE

The manual material below is provided as instruction, delineation, and standardization of the roles and responsibilities of managerial and line staff toward the objective of enhancing the levels of security and safety in the Department’s facilities. Supervisors are responsible for assuring that their employees are familiar with this policy. A signed acknowledgment by staff that they have received the policy and training is to be maintained in the employee’s personnel file.

1210 INCOMING CLIENT/VISITOR TRAFFIC

A. All incoming traffic, other than staff officially headquartered in a particular field office, must first report to the receptionist.

B. The receptionist is to register all clients or visitors on the reception register (see Appendix A).

C. All employees of the Department who are not headquartered in a particular field office must register on a Sign-In/Out sheet when entering/leaving the field office (see Appendix B).

D. The person(s) in charge of Department or non-Department meetings will provide the telephone receptionist with a listing of the names of the participants expected. The receptionist will place a check (√) by each participant’s name as they enter the office. (Procedure for group meetings is explained more in detail in Section 1240 B.)

E. The receptionist is to maintain an HCR-1, Hostile Client Register (see Appendix C) and an HCA-F, Hostile Client Action Form (see Appendix D) for all clients who have made threats to employees or other actions considered to be a potential threat. The HCA-F is to be completed by the immediate supervisor of the program and given to the receptionist with a copy to the management team for their review and disposition. The receptionist will register the client on the HCR-1 and maintain the HCA-Fs in alphabetical order.

Each Operations person who may be responsible for permanent or rotating receptionist duties is required to review the HCR-1 frequently and to stay familiar with all clients’ names on the list. This list must be concise with only dangerous clients being included.

The Community Services Manager or his or her designee is required to review the receptionist’s HCR-1 and the HCA-Fs monthly to update the listings.
F. The Community Services Manager or his or her designee is to immediately review all newly completed HCA-Fs to determine any other appropriate action to be taken and determine that the plan is appropriate.

G. If a client becomes hostile and is considered a potential threat while in the waiting/interviewing room area, the receptionist, in utilizing good judgment and common sense, should follow one or more of the following four options:

1. Contact the immediate supervisor or his or her designee of the worker/unit responsible for the client. This person will then assume responsibility for dealing with the client.

2. Contact the Community Services Manager or his or her designee if the immediate supervisor is unavailable.

3. If the receptionist believes that serious or immediate danger exists, a buzzer or coded message over the telephone PA system should be activated. The Community Services Manager shall have previously identified which staff is to respond to this situation. The Community Services Manager shall also formulate an alternative plan for any office where a buzzer or PA type code system is not available, or inappropriate.

4. The receptionist will always convey these situations to the Community Services Manager and Operations supervisor at the earliest opportunity.

H. If an extremely violent situation erupts in the client waiting room, interviewing area, or in staff work areas, staff using good judgment will immediately contact the most appropriate law enforcement officials, if warranted.

I. When an employee becomes aware of a situation during or after work hours which has potential to aggravate a client to the extent that he or she may become hostile and come to one of the District offices, the employee’s immediate supervisor should be notified. In turn, the supervisor will notify the Community Services Manager. An example would be a staff member taking negative action against a client who is already on the HCR-1. Another example would be when Protective Services staff removes children from a client’s home, who is known to be violent.
1220 ALL OTHER EMERGENCIES (WAITING ROOM AREA)

The steps below outline the basic options for the receptionist when faced with an immediate emergent situation.

A. Medical Emergencies (Waiting Room Area)

1. The receptionist is to evaluate the seriousness of the illness/injury.

2. Obvious immediate danger – call an ambulance – do not move the ill/injured person.

3. Other less serious illness/injury – assist client when appropriate.

4. Any staff person may call an ambulance when deemed appropriate.

5. The Community Services Manager and/or Operations supervisor or their backup is to be informed of all waiting room emergencies.

B. Bomb Threats (Received by the Switchboard Operator or Client Receptionist)

The switchboard operator is to complete the Bomb Threat Form (see Appendix E) with as much detail as possible. The completed form will be forwarded to the Operations supervisor or his or her backup as quickly as possible.

1. The switchboard operator is to immediately initiate predetermined procedures to evacuate the building (i.e., announce to evacuate the building). The Community Services Manager or his or her designee may determine, for each office, other more appropriate ways to notify all persons in the building of a bomb threat and evacuation. In the event of an evacuation for a bomb threat, it is crucial for all staff to survey their immediate area and their surroundings as they vacate the building for any suspicious objects (boxes, packages, etc.). This survey is to assist the law enforcement personnel and the Community Services Manager or his or her designee in assessing the potential of the bomb threat being real. Should the volume of bomb threats warrant, the Community Services Manager or his or her designee might evaluate obtaining “Caller ID” service or equipment to assist in identification.

2. The switchboard operator is to contact the appropriate outside agency to notify them that a bomb threat has been received. The receptionist or receiver of the threat is to complete the attached Bomb Threat Form to assist the administrative staff and/or law enforcement personnel.
3. The Local Management Team members will be responsible for assisting the outside agency(s) that responds to the bomb threat. This includes having an existing plan for identifying a Search Team Volunteer(s) from within the Local Management Team to assist with evaluation of the inside of the facility. Local Management Teams shall develop a search checklist for their individual facility. The search checklist is to incorporate results of the quick visual screening done prior to evacuation, along with the Search Teams findings. Once the checklist is completed and signed without indication that any suspicious items are present in the building, then the Local Management Team should reopen the facility for normal operation. If, however, a suspicious device is located within the building, the Community Services Manager shall follow existing guidelines for emergency closure of the office.

4. The Community Services Manager will notify his or her Regional Director immediately after a facility has been evacuated. The Regional Director will need to convey this information to all appropriate Department parties (i.e., Deputy Commissioner).

C. Emergency Situations (Bomb Threats, Fire, Hostile Clients, etc) Received by Other Agency Personnel

1. Any employee who is confronted with imminent danger to the staff or clients present in a facility (i.e., receives a bomb threat, locates a bomb, observes a fire in the building, observes an individual armed with a weapon, etc), in good judgment, may initiate evacuation of the building. The employee is to contact their immediate supervisor to convey this action immediately or, at least, the earliest reasonable opportunity. If the employee is uncertain of the level of danger or seriousness of the situation, the employee is encouraged to contact their immediate supervisor and, together, evaluate the situation and the best course of action.

2. The employee’s immediate supervisor, upon being advised of the situation, shall evaluate the seriousness of the situation and determine if cause exists to proceed further.

3. If the situation is deemed a serious threat to employees, the immediate supervisor is to take appropriate steps to initiate either the Hostile Client Policy (Section 1210 [G]), evacuation of the facility (Section 1220 [B]) and/or notify the appropriate law enforcement personnel.
4. In situations which involve the evacuation of the facility, the Community Services Manager or his or her designee is to follow prescribed chain of command procedures (i.e., notify the Regional Director, Deputy Commissioner) as soon as possible.

1230 LISTING OF AGENCY TELEPHONE NUMBERS TO BE CONTACTED IN EMERGENCIES

A. The Community Services Manager or his or her designee is to formulate a listing of local agencies and their telephone numbers that are to be contacted for specific emergencies.

B. All staff will be provided a copy of this listing.

C. This listing must be kept easily accessible in the receptionist’s office.

D. The listing is to be maintained and updated annually by the Community Services Manager and Operations supervisor.

1240 INTERNAL TRAFFIC

A. Photo identifications for all staff will be obtained. The Community Services Managers will establish plans for each office facility in relation to the need and use of employee photo IDs and visitor badges. It shall be the responsibility of the Community Services Managers to see that IDs are used appropriately in their particular office.

It shall be the responsibility of the client’s worker to issue visitor badges to clients and collect them when no longer needed. In the event the visitor(s) is not a client, it shall be the responsibility of whoever escorts the visitor through the office to issue and make sure they use a visitor badge. It shall be the responsibility of the Community Services Manager to decide exactly who, when, and where employee IDs and visitor badges are worn in the office.

B. All clients and/or non-agency staff visitors must be escorted from and to the waiting room by the staff responsible for the client/non-agency staff visitor. All workers will be notified by the receptionist of their client’s presence. At this point, the worker will physically come to the reception area to receive their client and when the client/group interview is conducted, the responsible staff member will physically escort the client from the interviewing area back to the waiting room.
For visitors who are identified by being associated with a particular staff member, the above would hold true for the associated staff. The staff member will physically escort the visitor from and return with the visitor to the waiting area. Visiting agency staff will check in at the receptionist desk and receive direction to their destination within the office. Visiting agency staff are to wear employee ID badges.

For visitors who are not associated with a particular staff member (such as a general meeting or training session of staff not housed in the particular facility), the Operations supervisor or their designee will convey to the requesting group, that included in the request for meeting space, is the responsibility for:

1. Preparing a participant list to be given to the receptionist.
2. Assuring that all visitors sign in at the receptionist’s desk.
3. Escorting all visitors from and returning them to the waiting room.
4. Dispensing and collecting visitor badges, if appropriate.
5. Making sure that agency facilities are maintained in at least comparable condition as when they arrived (i.e., no trash or debris left in conference rooms, etc).

C. Until such time that signaling devices and windows are placed in client interviewing rooms, Community Services Managers should address worker safety in client interview room through evaluating the below and other precautionary measure to increase safety of staff:

1. Leave interview room doors open during staff/client interviews.
2. Place staff desks in such manner to allow quick, unimpeded exit.
3. Allow provisions for two staff being present in situation where a known hostile/violent person is to be interviewed.

In such emergent situations, procedures similar to those used in the waiting room involving an immediate emergency situation (Section 1210 [G]) will be followed to remove the worker from the interview room and deal with the violent client. All employees who have client contact must be familiar with these procedures. These procedures mandate that a designated group be formed by the Community Services Manager or his or her designee to respond to the emergent situation.
1250 EMPLOYEE ACCESS

In the facilities where it is structurally feasible, Community Services Managers are to implement A, B, and C listed immediately above. Community Services Managers also are to review and consider the feasibility and appropriateness of the following action steps within the environment of their particular office. Given the nature of building renovations and State funding, the times involving structural adjustments to field offices will need to follow the prescribed chain of command for approval. However, in those locations where it is feasible to proceed, renovations should proceed now, or at the time of renegotiating the building lease.

A. Exterior doors except client/visitor entrances into the waiting area are to be self-locking (panic bar) type doors to prevent outside entrance to the area. Community Services Managers or his or her designee may establish employee work time frames for locking of exterior entrances up to but not later than 8:30 a.m.

B. Interior doors which lead from the client waiting areas to employee work areas should be self-locking with a method for employees to utilize a key, magnetic strip card, or electronically activate lock for re-entrance to the staff work areas.

C. Employees who require entrance to the facility building from entrances other than the client/visitor entrance need to follow the established Office Key Policy for consideration in obtaining a key.

Upon resignation/retirement of any employee, the supervisor must obtain the key assigned to that employee along with their photo ID card, if applicable.

The entrance code will be changed to eliminate access for employees leaving the Department.

1260 AFTER HOURS USAGE OF AGENCY BUILDING PREMISES

The Department may permit the occasional use of any unoccupied or otherwise available space or rooms by persons or organizations for conventions, assemblies, or other public meetings when doing so is not contrary to any applicable law or policies of the state, or disrupts the operations of the building or State government.

A. To ensure a fair and consistent system through which the public may request after hours use, Community Service Managers, in conjunction with Regional Directors, will:

1. Develop local written policy for use of the facility after hours, ensuring that client confidentiality, office security, maintenance of facility, and
implementation of existing policies, procedures, and guidelines are not jeopardized in any manner.

2. Require that any inquiry or request for such activity must be in writing and include the time, place, type of activity being proposed and the organizational affiliation, if any; and be received at least seven (7) days in advance of the date such activity is to take place and should be addressed to the managerial authority of the particular building. Any inquiry or request for such activity also must include a completed Agreement for Utilization of Facilities Form which, in part, is a waiver indicating that the Department is not liable for any damaged or stolen items. (see Appendix F).

3. Be the initial review authority for any individual or group which makes requests for the use of the facility.

4. Require that public users shall provide the Department short-term, General Liability proof of insurance of not less than $500,000 prior to the activity.

5. Ensure that scheduling of such Department premises will be done in order of priority first to other state/public agencies and second to private citizens and organizations.

6. Reserve the right to cancel or alter any scheduled or reserved use of any space in the case of public safety or emergency.

B. Use of Facility After Hours

1. The Department shall not be responsible for the preparation of the premises, nor shall it be responsible for security of any individuals on the premises.

2. If a non-agency meeting or conference does take place after hours, a Department employee must be present. The group requesting use of the facility is responsible for locating a staff member to volunteer to be present during the group’s use of the facility.

3. The employee who attends the meeting or conference is also responsible for the security of the office and the contents within the office. The employee present assumes the responsibility that all persons attending the meeting/conference stay within the meeting area of the facility. Given that the Department deals with very sensitive and confidential material, visitors should not be permitted to wander throughout the premises. Once the meeting has concluded, the volunteer employee is responsible for the lock up and security of the facility and to make sure the facility is maintained in
a clean manner. The designated employee will walk through and make a visual inspection and a security check of the facility before leaving.

4. All users of Department premises shall leave the rooms in a reasonably clean condition after each use. If excessive clean up is necessary, then the user may be billed for the additional custodial services for clean up.

5. The following activities are either prohibited or restricted on State premises under the jurisdiction of the Department:

   a) Any activity considered by the Department likely to endanger personal safety or property.
   b) Any activity which generally produces excessive noise, such as musical performances with high amplification.
   c) Any activity where alcoholic beverages are served or any illegal drugs or controlled substances are used.
   d) Fixation of banners, posters, placards or similar items. All such items shall be free standing unless otherwise authorized by the managerial authority of the particular building.
   e) Location and size of activity advertisements, signs, posters, placards and similar items must be authorized by the managerial authority of the particular building.
   f) Food or beverage distribution and consumption. All such activities shall comply with health standards and restrictions.

C. After Hours Use of Staff Sign-In/Out Register

If an employee works after hours or during a weekend or holiday to supervise a non-Department event, a sign-in/out sheet or log is to be utilized. This sign-in/out sheet or log should consist of space for the employee to sign his or her full name, time he entered the office and the time he or she departed the office. An employee would need to sign this sheet every time he or she entered and departed the office during what the Community Services Manager designated as after hours. Also, an employee would need to sign this if that employee had worked over his or her normal work hours as a consequence of supervising an official meeting for DHHR work purposes. For example, if an employee’s normal work hours were 8:30 a.m. to 5:00 p.m. and the Community Services Manager determined that normal work hours were between 8:00 a.m. to 5:00 p.m. and if that employee works until 5:30 p.m., he or she would need to sign the After Hours Log or sign-in/out sheet for the time 5:00 p.m. to 5:30 p.m. This also would be done if that employee started the work day at 7:30 a.m. The above would allow for an accurate record for the Community Services Manager of how the office is used after hours.
For each office facility under their auspices, the Community Services Manager or their designee shall conduct, on at least an annual basis, a Facilities and Emergency Procedures Assessment. The primary reason for this effort is to assure that all employees in an office facility have standards and procedures in dealing with emergency situations which may affect the safety of the staff. The assessment tool and instructions provided allows Community Services Managers or their designee to work toward identification of areas needing physical improvements or establishment of workable procedures to better respond to the safety needs of Department staff and clients. This assessment is to be completed upon receipt of this policy and, at least, each July thereafter.
1280 INSTRUCTIONS FOR FACILITIES AND EMERGENCY RESPONSE PROCEDURES ANNUAL ASSESSMENT

The Facilities Review Assessment Form (see Appendix G) is provided as a method for Community Services Managers to assess their facilities and procedures related to Emergency Response. Through assessment, and identification of areas needing improvement, our Department’s ability to respond to emergency situations will be enhanced. Community Services Managers and, ultimately the Senior Management of the Department, through completion and review of the assessment, will identify, prioritize, and set forth plans to assure that physical and procedural standards are met.

Specific Instructions for the Assessment Form are:

1. The Community Services Manager, with the facilitation by the Operations supervisor will, for each facility under their direction, complete the assessment on at least an annual basis.

2. The Community Services Manager shall separately identify all questions which have a negative response, one or more recommendations, goals, actions, steps, etc to address the problem. (All action steps should identify the what, how, who, and when for each problem resolution.) The assessment recommendations, when completed, are to be forwarded to the Regional Director for review and consideration. Procedural elements related to evacuation plans, Emergency Response List, systems for staff emergency notification, etc should be developed by the Community Services Manager prior to submission to the Regional Director. Structural improvements to leased facilities should be outlined (including costs) by the Community Services Manager and addressed by the Regional Director in 3 and 4, listed below.

3. The Community Services Manager, facilitated by the Regional Director, will review the assessment and any recommendations presented by the Community Services Manager. The Regional Director will evaluate the completeness of the assessment, feasibility of the recommendation (availability of funding, appropriateness of recommendations, etc) and either accept (approve) or reject the recommendations. A copy of the assessment, recommendations, and the cost estimates should be attached with the minutes of the Management Team meeting for review by the Deputy Commissioner.

4. Once the Regional Director reviews the proposals, and if approval is granted for any or all of the recommendations, this information is to be communicated to the Community Services Manager or his or her designee for the county in question. At this time, the Community Services Manager will work toward implementation of any structural adjustments.
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<th>Name</th>
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<th>Worker's Name</th>
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HS-20 (Revised 07/08)
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<th>Employee Name</th>
<th>Time In</th>
<th>Time Out</th>
<th>Purpose of Visit</th>
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HS-8 (Rev. 07/08)
HOSTILE CLIENT REGISTER  
(HCR-1)

This register is to be completed by the receptionist from the Hostile Client Action Form (HCA-F) submitted by unit supervisors. It is to be located in a central place in the receptionist office along with the HCA-Fs. Each Operations employee responsible for the receptionist/switchboard duties must review this register periodically to try to remember client’s names without checking the register for every client who visits the office.

<table>
<thead>
<tr>
<th>Client’s Name</th>
<th>Date HCA-F Completed</th>
<th>Supervisor’s Name</th>
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HOSTILE CLIENT ACTION FORM
(HCA-F)

This form is to be completed by the immediate supervisors of workers who have been threatened in some manner by a client. The original is to be forwarded to the permanent or designated receptionist with a copy to the Community Services Manager or his or her designee. The receptionist is to add this client’s name to the Hostile Client Register and File this HCA-F. The Community Services Manager or his or her designee is to immediately meet to review this form to determine if the plan is appropriate and any other action that may need to be taken.

Client’s Name: _____________________________________________________________

Date(s) of Threat/Hostile Action: _______________________________________________

Nature of Threat/Hostile Action: _______________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Action to be taken by receptionist if client visits the office:
Call Worker
Call Immediate Supervisor of Worker
Call Police (in association with at least one additional action)
*Simply having the receptionist call the police is not a complete plan
Other (explain) _______________________________________________________

Immediate Supervisor’s Signature: _____________________________________________

Date: _____________________________________________________________________

Community Services Manager or His or Her Designee Decision: ______________________
___________________________________________________________________________
___________________________________________________________________________
Date: _____________________________________________________________________

Remarks and Review:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
BOMB THREAT REPORT FORM

Instructions: Be calm. Be courteous. Listen. Do not interrupt the caller. Notify supervisor/security officer by prearranged signal while caller is on the line.

Date: ____________________________ Time: ____________________________

Exact words of person placing call: __________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Questions to Ask:
1. When is the bomb going to explode? ______________________________________
2. Where is the bomb right now? ___________________________________________
3. What kind of bomb is it? _______________________________________________
4. What does the bomb look like? __________________________________________
5. Why did you place the bomb? ___________________________________________

**************************************************************************************

Try to Determine the following (Circle as appropriate):

<table>
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<th>Caller’s Identity</th>
<th>Male</th>
<th>Female</th>
<th>Adult</th>
<th>Juvenile</th>
<th>Age _______</th>
<th>Years</th>
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<td>High-pitched</td>
<td>Deep-raspy</td>
<td>Pleasant</td>
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<td>Not Local</td>
<td>Foreign</td>
<td>Region</td>
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<td>Factory Machines</td>
<td>Bedlam</td>
<td>Trains</td>
<td>Animals</td>
<td>Music</td>
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<td>Voices</td>
<td>Mixed Atmosphere</td>
<td>Airplanes</td>
<td>Street Traffic</td>
<td>Party</td>
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Additional Information:

Action TO TAKE IMMEDIATELY AFTER CALL: Notify your supervisor/security officer as instructed. Talk only to persons designated by your supervisor/security officer.
AGREEMENT for Utilization of Facilities Form

Between ________________________ and the West Virginia Department of Health and Human Resources for Utilization of Facilities.

I ____________________________ representing ____________________________, hereby agree to assume full financial and legal responsibility for any damages or liabilities caused by a member of my organization while utilizing the facilities of the West Virginia Department of Health and Human Resources located at _______________________________________
__________________________________________________________________________.

I accept the responsibility for controlling the behavior of the members of my organization while utilizing the facilities and to assure the agency that the space utilized will be cleaned upon the groups exit from the building. My organization agrees to reimburse the Department for any damages or liabilities caused by our organization using the facility.

The agency staff member who has volunteered to be present and responsible for proper use of the facility is ____________________________________________________________.

_________________________________________  _________________________
Signature, Utilizing Party      Date

_________________________________________  _________________________
Signature, Agency Employee     Date

_________________________________________  _________________________
Signature, Operations Supervisor     Date

Distribution:
1 copy to utilizing party
1 copy to Operations supervisor

07/08  18
FACILITIES REVIEW ASSESSMENT

Lease Number: ________________

County: ______________________ Date: ________________

Street Address ________________________________ Lease Exp. Date: ____________

Section I: Client Waiting Areas

1) On average, what is the daily client traffic volume?

2) What is the square footage of the area designated for the client waiting area?

Yes/No 3) Is there a structural barrier (i.e., a locking door) which separates the client waiting/reception/interviewing area from the staff work areas, which allows exit from the work area to the client waiting area but prevents open access from the client waiting area to staff work area?

Yes/No 4) Is client/walk-in receptionist area segregated from client waiting areas in the form of a counter or window?

Yes/No 5) Does the client/walk-in receptionist area provide for direct exit into the staff work area (i.e., providing for emergency exit of the receptionist area)?

Yes/No 6) Does the receptionist have secure partitioning from client waiting area (i.e., bullet-proof glass)?

Yes/No 7) Is there a plan which outlines the staff roles and responsibilities in the event of an emergency or hostile client? (attach a copy)

Yes/No 8) Is there a current evacuation plan for this facility? (attach a copy)

Yes/No 9) Are there adequate fire extinguishers and smoke detectors present and in the working area?
**Section II: Client Interviewing Areas**

1) How are clients being interviewed in this office?
   a. In interviewing booths
   b. Staff offices
   c. At interviewing booths/counters
   d. At staff desks
   e. Other (explain)

Yes/No 2) Do the interviewing locations have any signaling devices or plans to alert other staff in the event a worker experiences an emergency?

Yes/No 3) Do interview rooms have a window?

Yes/No 4) Is there a current plan of action if a client of staff member experiences an emergency in the waiting room area and/or interviewing area? (attach copy of current plan)

**Section III: Internal Traffic**

Yes/No 1) Are the outside exits, with the exception of the client/visitor entrance into the waiting area, self-locking (panic bar) type doors to prevent outsider entrance to the area?

Yes/No 2) Is there a plan of action to respond to emergencies and/or hostile situations within the work area? (attach copy of Emergency Evacuation plans) The plan should include the process of notifying staff that an emergency exists, what staff should do, when and how staff are to return to the building.

Yes/No 3) Is there a current (within the fiscal year) emergency response telephone list of local fire, police, etc. officials who will respond to an emergency situation? (attach copy of telephone list)

Yes/No 4) Have appropriate staff members been provided with emergency response telephone list (i.e., receptionist, backup(s), administrative staff locally deemed appropriate)?

Yes/No 5) Does the emergency response telephone list include when and who should make the telephone calls to local emergency response personnel?

Yes/No 6) Has the Community Services Manager or his or her designee provided local law enforcement agencies with the telephone numbers of Community Services Manager or his or her designee, in the event of an after hours emergency?