



**MARION TECHNICAL COLLEGE  
PLANS AND PROCEDURES MANUAL**

**HEALTH AND SAFETY PLAN**

**EFFECTIVE SCHOOL YEAR: 2025-2026**

A DIVISION OF THE MARION COUNTY PUBLIC SCHOOLS  
AN EQUAL OPPORTUNITY SCHOOL DISTRICT

# MARION TECHNICAL COLLEGE

## HEALTH AND SAFETY PLAN

### PURPOSE

Having a systematic plan for the health and safety of students and employees of Marion Technical College (MTC) is deemed essential to effective instruction, to high levels of student achievement, and to the personal welfare of the students and employees of the institution. Implementation and coordination of the plan ensures a safe climate conducive to education and success.

### Established Procedures

Marion Technical College utilizes the many resources of Marion County Public Schools, as well as, MTC specific procedures, to assist in ensuring a safe and healthy environment for all students, employees, and visitors. Following is a listing of established routines and procedures that are in place and followed by the faculty, staff, and administration of MTC:

1. Awareness - Faculty, staff, and administration work together to create a high level of awareness of health and safety for students enrolled in the programs of the institution.
2. Safety Instruction - General safety and health instruction is provided to students in each program area at the beginning of a new term.
3. CPR and First Aid - Students in all programs are required to complete CPR and First Aid training as a portion of the program, if applicable.
4. Wellness Training - Faculty, Staff, and Administration of MTC are afforded the opportunity for instruction in CPR and First Aid.
5. Hand Sanitizer - Hand Sanitizer dispensers are located throughout the building for easy access.
6. AEDs / Bleed Kits- Two AED units and bleed kits are located in the school: Brewster Hall and the Reception area. Signs are posted to designate AED locations.
7. First Responders — MTC has designated individuals who serve as First Responders in the case of an accident or injury. These individual's names are posted; they can be contacted by school radio.

8. Classroom Postings - A wall mounted pocket has been installed in each classroom and office that contains documentation with specific instructions in cases of emergencies. Color coded charts contain documentation for classroom emergency responsive instructions.
9. Code Drills – “Code Red” and “Code Yellow” Drills are conducted each year during day and evening to ensure that all faculty, staff, and students are aware of their responsibilities during an emergency crisis situation.
10. Fire Drills - MTC conducts the district required (11) fire drills each year, scheduled at differing times of the day and week to ensure that all students are aware of and follow the required evacuation procedures.
11. Statewide Tornado Drill - MTC participates in the Florida Statewide Tornado Drill held annually.
12. District Annual Safety Inspection - During March of each year the district safety office conducts a complete inspection of the school and documents safety infractions and/or conditions that are considered hazardous. Work orders are created to correct unsafe conditions, and are completed by the District Technical Services Department and/or MTC-based personnel.
13. Periodic Health Department Inspections - Annual inspections are conducted each year by the Marion County Health Department to ensure a safe and healthy environment.
14. Kitchen Inspections - The Commercial Foods kitchen and the Campus Grill are inspected twice each year by the Marion County Health Department.
15. Safety Surveys - Surveys are conducted periodically by various members of the MTC faculty, staff, and administration. The results of the surveys are compiled and unsafe conditions are addressed and corrected.
16. Safety Committee - The committee consisting of Career Education Facilitators, Program Managers, Coordinators, Instructors and Clerks serve as members of the MTC Safety Committee and meet at least once a month to discuss safety concerns.
17. Building and Campus Evacuation Plan - A written plan and map is revised each year to provide efficient egress from the buildings to an area of safety in the event of emergency requiring evacuation.

18. Annual In-service Training - Annual preplanning meetings are held prior to the start of the fall semester to emphasize safety and health related procedures.
19. Campus Cleanliness - The MTC campus is maintained by the school's custodial staff and maintenance personnel to ensure cleanliness and safe conditions.
20. Classroom and Lab Areas - Faculty and staff are required to maintain their workspace to minimize clutter and maintain an attractive and clean professional learning environment that reflects the professional workplace.
21. Pest Control Services – MTC pest service is rendered by District's maintenance personnel to ensure control of insects and rodents in the building.
22. District Emergency Management Procedures - MTC maintains a current copy of the District Emergency Management Procedures in the Assistant Principal's office.
23. District Emergency Preparedness Site Specific Information - A copy of the district Emergency Preparedness manual is located in the Principal's office, including information on the Incident Command System (ICS).

#### PERSONNEL RESPONSIBLE FOR IDENTIFYING SAFETY ISSUES

All faculty, staff, and administration are responsible to report to the Assistant Principal any safety issues that they identify. In addition, MTC's Safety Committee is responsible for identifying and notifying administration of safety issues. The Safety Committee addresses issues regarding campus safety and proactive strategies to guarantee a safe learning environment. The Safety Committee meets throughout the year to help identify and eliminate potential safety hazards on campus.

#### EMERGENCY RESPONSE AND CRISIS MANAGEMENT PLAN

MCPS develops and annually updates the Emergency Response and Crisis Management Plan that ensures the health and safety of the institution's employees, students, and visitors; MTC follows the established procedures. The plan consists of MCPS district-wide protocols for response, evacuation, medical, student welfare, violence and crime, natural disaster, facility, and hazardous materials. MCPS also develops and annually updates the Health Coordinator Manual that includes such topics as Automatic External Defibrillator (AED) information, blood borne pathogens, Right to Know information, and first aid emergency care; MTC follows the established procedures.

Using the MCPS template, MTC develops the School Emergency Plan which is

reviewed by MTC's administration and Safety Committee and updated annually.

Safety procedures are reviewed with faculty and staff annually and are included in the MTC Policies and Procedures Manual which is available on MTC's SharePoint.

Emergency evacuation procedures are posted in all classrooms for student access. Students are informed of the institution's safety policies and procedures during school and program orientations, and safety information is available in the catalog and posted on the school 's website.

#### EVALUATION OF THE PLAN

In addition to the input received from the Safety committee, suggestions for health and safety are received from a variety of sources such as program advisory committees, students, faculty and visitors. Feedback provides additional input for identifying and eliminating potential safety hazards on campus. The administrative team discusses the input received and annually reviews and revises the plan as needed. The plan for assuring the health and safety of MTC's employees, students, and visitors has been distributed to staff via the MTC SharePoint and is available to students and the public on the MTC website. The Emergency Response and Crisis Management Plan established by MCPS and implemented by MTC is not available to students or the public per MCPS mandates.

## Student Accidents

- Please complete a Student Accident Report, [eRMD07](#), for all student injuries no matter how minor. The **supervising staff member** should do this on the day of injury.
- Schools should no longer forward student accident reports to Risk Management. If the injury is minor in nature, simply keep on file at your school for five years due to possible litigation, after which you can discard. This is the responsibility of each school.
- If the injury is serious call the emergency contact numbers on the student information card and find out if the parent or guardian wants to pick up the student or wants 911 to be called on their behalf. Then immediately call the Risk Management Hotline at 671-6923 to report and email the Student Accident Report to Cheryl Brown. If the injury is life-threatening, immediately call 911, then the parent and the Risk Management Hotline.
- If there is any student accident (major or minor) which you are concerned about for liability reasons, please contact Cheryl Brown.
- If a parent requests a copy of the accident report, or wants to file a claim, please contact Cheryl Brown for approval prior to giving any information.
- If the student was injured in a school sponsored athletic or club event, the coach/trainer should complete a Claim Reporting Form. This form is then mailed/faxed to School Insurance of Florida. Upon receipt of the form from the school, School Insurance of Florida will mail claim-filing instructions directly to the student's home to enable parents to complete the claim filing process. As with the student accident forms these Claim Reporting Forms must also be kept on file for five years.

**Any questions - Please contact Cheryl Brown at (352) 671-6980**



## STUDENT ACCIDENT REPORT

Risk Management Division  
 1105 SW 7<sup>th</sup> Road  
 Ocala, FL 34471 (352) 671-6910

**Please Print Clearly**

1. Student Name:		2. Address:		3. Parent/Guardian Phone Number:	
4. Age:	5. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	6. School:		7. Grade/Special Program:	
8. Date of Accident:			Time:		
9. Type of Injury: (Bruise, Cut, Abrasion, Bleeding, Strains/Sprains, Other-Describe)					
10. Name of Body Part Injured:				<input type="checkbox"/> Left <input type="checkbox"/> Right	
11. Eyewitness: <input type="checkbox"/> Yes <input type="checkbox"/> No					
<input type="checkbox"/> Student		Student ID:			
<input type="checkbox"/> Employee		Name:		Job Title:	
12. Accident Location: <input type="checkbox"/> School Grounds/Outdoors <input type="checkbox"/> School Building #: Room #: <input type="checkbox"/> Field Trip <input type="checkbox"/> Bus/Route #:					
13. Supervision Provided by:			14. Unsafe Act by Injured Student: <input type="checkbox"/> Yes <input type="checkbox"/> No		
15. List Corrective or Preventive Action Taken Toward Injured Student:					
16. Description/Cause of Injury: (Who, What, When, Where, Why, and How)					
17. <input type="checkbox"/> Clinic <input type="checkbox"/> 911 <input type="checkbox"/> First Aid					
18. Date of Report			19. Report Written by (Teacher, TA, Group Leader, Bus Driver): Please Print Clearly		
20. Principal/Site Manager Signature:  <small>(District requires a physical signature)</small>			21. Signature of Writer:  <small>(District requires a physical signature)</small>		
<b>This form is required for securing facts of student injuries.</b>					

## Visitor Injury Procedures

- Immediately following an accident, the designated first responder, or backup responder, should ask the visitor what part of their body is injured and render the appropriate first aid measures taught to MCPS first responders.
- Ask if **they** want 911 or a family member to be called. Do not say or imply that MCPS will pay for ambulance charges or medical treatment.
- Record their description of what happened with all details included on Accident Report-Visitors, [eRMD72](#), form. Remember it is their story not yours. Repeat back to them what you have written down so the visitor can verify the information they provided.
- While doing the above, ask another employee to call the Risk Management Hotline (671-6923) to report the incident.
- Give the written information to the principal or department head to be signed. Forward completed form to Cheryl Brown.
- Please do not discuss the accident with anyone except the principal or department head and Risk Management.



# ACCIDENT REPORT

Risk Management Division  
1105 SW 7<sup>th</sup> Road, Ocala, FL 34471  
(352) 671-6910/FAX (352) 671-4100

PARENT  OTHER VISITOR  PROPERTY

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ DOB: \_\_\_\_\_ SEX:  MALE  FEMALE

LOCATION OF ACCIDENT (DEPARTMENT/SCHOOL): \_\_\_\_\_

REPORTED TO WHOM: \_\_\_\_\_

DATE/TIME OF ACCIDENT: \_\_\_\_\_ DATE/TIME REPORTED: \_\_\_\_\_

WITNESS(ES): \_\_\_\_\_

DESCRIPTION OF ACCIDENT:  
\_\_\_\_\_  
\_\_\_\_\_

Any

DESCRIBE INJURIES: \_\_\_\_\_

### CONDITIONS

LIGHTING: <input type="checkbox"/> POOR <input type="checkbox"/> GOOD <input type="checkbox"/> EXCELLENT	WEATHER CONDITIONS: <input type="checkbox"/> CLEAR <input type="checkbox"/> RAIN <input type="checkbox"/> DAMP <input type="checkbox"/> OTHER, EXPLAIN _____
SURFACE: <input type="checkbox"/> CARPET <input type="checkbox"/> LINOLEUM <input type="checkbox"/> TILE <input type="checkbox"/> WOOD <input type="checkbox"/> CONCRETE <input type="checkbox"/> OTHER, EXPLAIN _____	CONDITION OF SURFACE: <input type="checkbox"/> DRY <input type="checkbox"/> WET <input type="checkbox"/> OTHER, EXPLAIN _____
OTHER POSSIBLE FACTORS: _____	OUTSIDE CONDITIONS: <input type="checkbox"/> GRASS <input type="checkbox"/> ROCKY <input type="checkbox"/> OTHER, EXPLAIN _____
	OTHER POSSIBLE FACTORS: _____

LIST EQUIPMENT, TOOLS, OR MACHINERY INVOLVED: \_\_\_\_\_

MEDICAL ATTENTION GIVEN:  911 CALLED?  TRANSPORT TO HOSPITAL?  FIRST AID PROVIDED?

PREPARED BY (EMPLOYEE NAME): \_\_\_\_\_ DATE: \_\_\_\_\_

PRINCIPAL/SUPERVISOR SIGNATURE: \_\_\_\_\_  
(District requires a physical signature)

questions – Please contact Cheryl Brown at (352) 671-6980



## ACCIDENT/INCIDENT REPORT

Risk Management Division  
 1105 SW 7<sup>th</sup> Road, Ocala, FL 34471  
 (352) 671-6910/FAX (352) 671-4100

**Please Complete All Areas of This Form**

EMPLOYEE NAME & ADDRESS	EMPLOYEE ID #
	OCCUPATION
EMPLOYEE'S DESCRIPTION OF ACCIDENT	EMPLOYEE PHONE NUMBER
	SCHOOL/DEPARTMENT
	PART OF BODY INJURED
DATE AND TIME OF ACCIDENT	DATE AND TIME INJURY FIRST REPORTED
LOCATION AND TIME EMPLOYEE BEGAN WORK	WITNESS NAME AND PHONE
EMPLOYEE'S SIGNATURE <small>(District requires a physical signature)</small>	DATE
DOES EMPLOYER AGREE WITH DESCRIPTION OF ACCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO    If No, Please Explain:	
SUPERVISOR'S NAME	
SUPERVISOR'S SIGNATURE <small>(District requires a physical signature)</small>	DATE

# Public Schools

Developing Successful Citizens —  
Every Student, Every Day

## Safe Schools Department

### MEMORANDUM

TO: MCPS Administrators, Area Directors, Principals and  
FROM: Dennis McFatten, Director — Safe Schools Department  
DATE: August 14, 2020  
SUBJECT: Modified Active Assailant Training

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#### Modified Active Assailant Training for School Staff

Senate Bill 7030 requires that all school personnel read and understand the Marion County School Board Active Assailant Policy and to be trained in the event of an active assailant incident. The A.L.I.C.E. Protocol Video provides an overview of the concept, which gives all employees the option to respond in a manner that will provide the best outcome for them and their students' safety.

The School Board of Marion County has deemed it necessary to modify the active assailant response training to adhere to the CDC guidelines regarding social distancing. In order to remain compliant with the active assailant policy:

1. All classroom doors and windows will remain locked during instruction hours
2. Active assailant drills must be conducted once per month

At the suggestion of the Department of Education Office of Safe Schools, there may be a need to revise how safety drills are conducted. As a result, we will not utilize the options of Counter or Evacuate during an active assailant drill. The following shall be utilized in lieu of the traditional A.L.I.C.E. protocol options:

1. Have a discussion concerning A.L.I.C.E. acronyms.
  - a. A- Alert others of the assailant on campus (radios, intercoms, panic button).
  - b. L- Lockdown in a room with a door that can be secured or barricaded.
  - c. I- Inform 91 1 when it's safe to do so. **DO NOT** assume someone else called.
  - d. C- Counter by barricading, evacuating or using any means to survive.
  - e. Evacuate if it is safe to do so. Use windows, doors, etc. to escape danger.

2. Demonstrate where the safe place is located within the classroom. Following the demonstration, a discussion should be held involving various active assailant scenarios.
3. Hold a discussion regarding the students' response if they are located outside the classroom during an active assailant drill (bathroom, recess, cafeteria, hallways, etc.).
4. Watch the short video on barricading doors and discuss with class.

In the event of an actual Active Assailant incident, all A.L.I.C.E Protocol options to include Counter and Evacuate should be considered.



## 911 EMERGENCY RESPONSE PROTOCOL

1. Anyone witnessing a medical event reports that help is needed and gives location (i.e. shout, call, EM button, Centegix Safety Badge).
2. Any personnel with a radio (Administrator, Security, Front Desk, etc.) who hears the shout or is informed by phone must **call for First Responders** to the location of the emergency. When the Centegix Safety Badge is pressed 3 times, designated personnel is notified.
3. First Responders **take their radio and emergency bag to the location called. Responders must announce that they are responding** (i.e. "McManis responding!").
4. The first 2 responders who announce that they are responding will handle the event unless another radio call is made for more responders.
5. The First Responders will assess the patient and determine if 911 needs to be called, (unless already called because it was evident 911 was necessary).
6. If First Responders **determine 911 should be called, they will radio and direct the SRO to call 911 via police radio (i.e. "Officer, call for ambulance stat")**.
7. If the SRO does not immediately respond or **no SRO is on campus, the First Responder will call 911 or instruct someone to call 911**.
8. The First Responder/supervising staff member will **complete the required report** (employee, student, visitor) and submit to an Administrator. (Each First Responder emergency bag will contain the appropriate forms).
9. When 911 is called **notify the Risk Management hotline 671-6923 or internal x56923**.

### FIRST RESPONDERS AND CPR STAFF

Kim McManis - 56866

Meghan Snider - 54441

Suhad Haddad - 56868

Jennifer Stockton - 56887

Lynn Weber - 54418

Anette Mayer - 54462

Lacy Grimstad - 54444



# Marion County Public Schools

*Where Every Child Can Learn*

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## ***Human Resources Department***

### ***Risk Management Division***

1105 SW 7<sup>th</sup> Road • Ocala, FL 34471

(352) 671-6910

Fax (352) 671-4100 (General), Fax (352) 671-6913 (Benefits)

F R S (800) 955-8770 (Voice) • (800) 955-8771 (TTY)

## **SEVERE WEATHER PROCEDURES**

*\*Save for future reference*

### What should be done when **Severe Thunderstorms** are in Marion County?

School and District Administrators should monitor their NOAA Weather Radios (with “Specific Area Message Encoder” – S.A.M.E. technology) and TV weather broadcasts. Be prepared to implement your severe weather plan. Damaging winds from thunderstorms and tornados can occur with little or no warning.

### What should be done during a **Severe Thunderstorm “Watch”**?

Outdoor activities could continue but the weather must be monitored closely at each location by assigned personnel with knowledge of the severe weather plan. If or when it becomes necessary, each site administrator or designee should bring students and employees into brick and mortar buildings until the weather threat clears out. If conditions worsen, be prepared to activate your severe weather plan and move students, staff and/or employees to the pre-determined severe weather areas within your building(s).

### What should be done during a **Severe Thunderstorm “Warning”**?

Continue to monitor conditions by listening to NOAA Weather Radio and local TV weather reports. Watch the skies for worsening conditions such as strong straight wind, circulating clouds, severe lightning or a tornado. Portables should already be evacuated before these severe weather conditions start to occur. Activate your local tornado plan if conditions warrant and do not wait for another agency (i.e. – NWS) or department to notify you.

When appropriate, bus drivers should be informed of the threat of dangerous thunderstorms. Bus drivers should be prepared to take the necessary safety measures if conditions deteriorate. Delayed departure of school buses should be considered if watches or warnings are in effect and severe storms are moving through bus route areas. If on route, bus drivers should consider pulling over to a safer location. Then move the students away from windows and instruct them to cover their heads with their arms and hands.



### Do you have a tornado safety plan for your individual school or department?

The most important part of tornado safety is for you to develop a good tornado plan tailored to your individual campus, building design and ability to move people. The “one size fits all” approach to tornado safety should not be used because every school and support department structure is different.

The lowest possible level is the safest. However, in our larger schools or buildings, there may not be enough time to direct all occupants of the upper floors downstairs, or there may not be enough space on the lower floors to accommodate everyone affected. Therefore, this requires a customized plan which will vary with each location and requires open-ended guidelines by necessity.

Things to consider for your individual school or department:

- **SECONDS MATTER.** If it takes more than 2 or 3 minutes to move all upper-floor people down, the situation becomes more dangerous. Warnings are not absolutely perfect, radars can't see everything, and tornadoes don't always touch down miles away. Plan for a reasonable worst-case scenario – a tornado is spotted very close to your location and hits with little or no warning. During the majority of cases when there are warnings with several minutes of lead time, the plan can be executed and people are in a safer place within one or two minutes of the decision to evacuate.
- **FLYING DEBRIS.** This is the biggest tornado hazard. Always put as many walls as possible between people and the tornado. If there is not enough time to move people to the ground floor of a building, are there interior hallways, rooms or corridors on the upper floor that are not exposed to the outside through windows, doors or walls of glass? This should only be a refuge of last resort. Remember, there is no place in a school district where personal safety can be absolutely guaranteed during a tornado.
- **PORTABLE CLASSROOMS.** The MCPS severe weather plan must include getting students or employees out of portables classrooms or portable offices and into brick and mortar buildings before outside conditions become hazardous. People should be evacuated from portables before the storm arrives – usually before the warning phase is issued by the National Weather Service. However, local weather conditions at each facility will naturally vary around the county and must be taken into account during the decision-making process.

- DANGER – CAFETERIA, GYMS AND AUDITORIUMS. Large, open-span areas can be very dangerous in severe thunderstorms or tornadoes and should not be used. They have inherent structural weaknesses for winds beyond the local building code that make it possible for them to collapse.
- All administrators and supervisors will need to decide individually when to evacuate to their safer locations if serious weather conditions start occurring in their immediate area and no statements have been issued by the National Weather Service. Remember tornadoes can occur with little or no advance warning.

### SOME ADVANCE STRATEGIES

- During your response to severe thunderstorms and tornadoes be sure to include Food Service workers, Tech Services, Custodians, visitors, parents, etc., who are at your facility.
- If your severe weather alarm system (i.e. – intercom) or method relies on electricity, have a compressed air horn or megaphone to sound the severe weather alert in case of power failure.
- Make provisions for special needs students, staff or employees who need assistance getting to their assigned severe weather areas.
- Designate someone on site to shut off electricity and gas in the event the school is damaged. Also, have at least two other people assigned as backups for this purpose.
- Keep children at school beyond regular hours if the weather conditions in your immediate area become dangerous. Notify the superintendent's office of the delayed dismissal.
- Lunches or assemblies in large rooms should be postponed if severe weather is approaching. Cafeterias, gymnasiums and auditoriums offer no meaningful protection from tornado-strength winds. Severe thunderstorms can also generate winds strong enough to cause major damage to these taller buildings.

- You need to have or obtain a NOAA Weather Radio with a warning alarm tone, battery backup and S.A.M.E. technology that allows you to set the weather radio to go into alarm specifically for Marion County.
- In addition, listen to radio and television weather broadcasts for information when severe weather is likely.
- Do not open windows to equalize the air pressure or for any other purpose during storms.

### WHEN A TORNADO THREATENS OR STRIKES

Follow your customized plan for severe weather as described above. Provide leadership for your students and/or employees when you make the decision to evacuate to the safer areas of your building or campus. Before a tornado hits your location, everyone should be on their knees or seated on the floor with their heads down, protecting the back of the head with the arms and hands.

### AFTER THE TORNADO

Keep students and employees assembled in an orderly manner, in a safe area away from broken glass and other sharp debris, power lines, puddles containing power lines, and emergency traffic areas. While waiting for emergency personnel to arrive, carefully render aid to those who are injured. Keep everyone out of damaged areas of the school or facility due to possible instability of the walls and roof. No one should be allowed to use matches or lighters in case of leaking natural gas pipes or fuel tanks nearby. It is very important for principals, teachers, directors and supervisors to set a calm example for those at the disaster scene. Be reassuring to all those involved.

# M.T.C. Classroom Emergency Response Instructions

## **CODE YELLOW (NON-IMMEDIATE THREAT)**

1. Lock doors. Only admit students assigned to the class.
2. Do not leave the classroom or allow students to leave. Continue instruction.
3. Create a list of names of students present, but not in the classroom at the time of the Code announcement.
4. Create a second list of those known absent. (Have both lists immediately available if requested by administration)
5. Limit phone calls and use of phones to emergencies only.
6. Plan to attend a faculty meeting at the end of the day, if announced.

## **CODE RED (IMMEDIATE THREAT)**

1. Immediately lock all doors. Do not admit anyone, including students. Do not answer the door for anyone. (Only those with a key should enter the door).
2. If outside, move immediately to a secure building.
3. Create a list of students present, but not in the classroom at the time of the Code announcement.
4. Create a second list of those students known to be absent. Have the list ready if asked for.
5. Email both lists to the "Code" Mailing Group after the event.
6. Instruct students to get on the floor in a sitting or crouching position; away from the windows and doors.
7. Turn off lights. Turn off all computer monitors.
8. Keep all students quiet.
9. Silence and hide all cell phones.
10. Do not make any phone calls. Do not call the office.
11. Do not leave classroom or allow students to leave.

## **BOMB THREAT Evacuation Procedure (School-Wide, All Classrooms and Offices)**

1. The evacuation will commence upon directive of the principal, assistant principal, or administrator on duty. Notification will be by intercom, phone call, or in person.
2. All faculty, staff and students will move to the southeast corner of the school property near Signature Brands.
3. Students and staff should take only those personal belongings in their immediate possession when an evacuation is ordered. All backpacks are to be left in the classrooms.
4. All teachers are to take their class roster to the assigned location and be ready to account for all students.
5. All classes are to remain together in the "safe" area so that all can be accounted for.
6. All persons are to remain in the "safe" area until "ALL CLEAR" is announced by administration.
7. Plan to attend a faculty meeting at the end of the day.

## **SEVERE WEATHER ANNOUNCEMENT (Tornado Warning)**

Since no one can tell until the final few seconds that a tornado is going to occur in our area, there are very few advance actions that can be taken. Tornadoes usually occur during severe thunderstorms. If a tornado is sighted, or if a heavy roaring sound is heard during a violent thunderstorm, the following action must be taken:

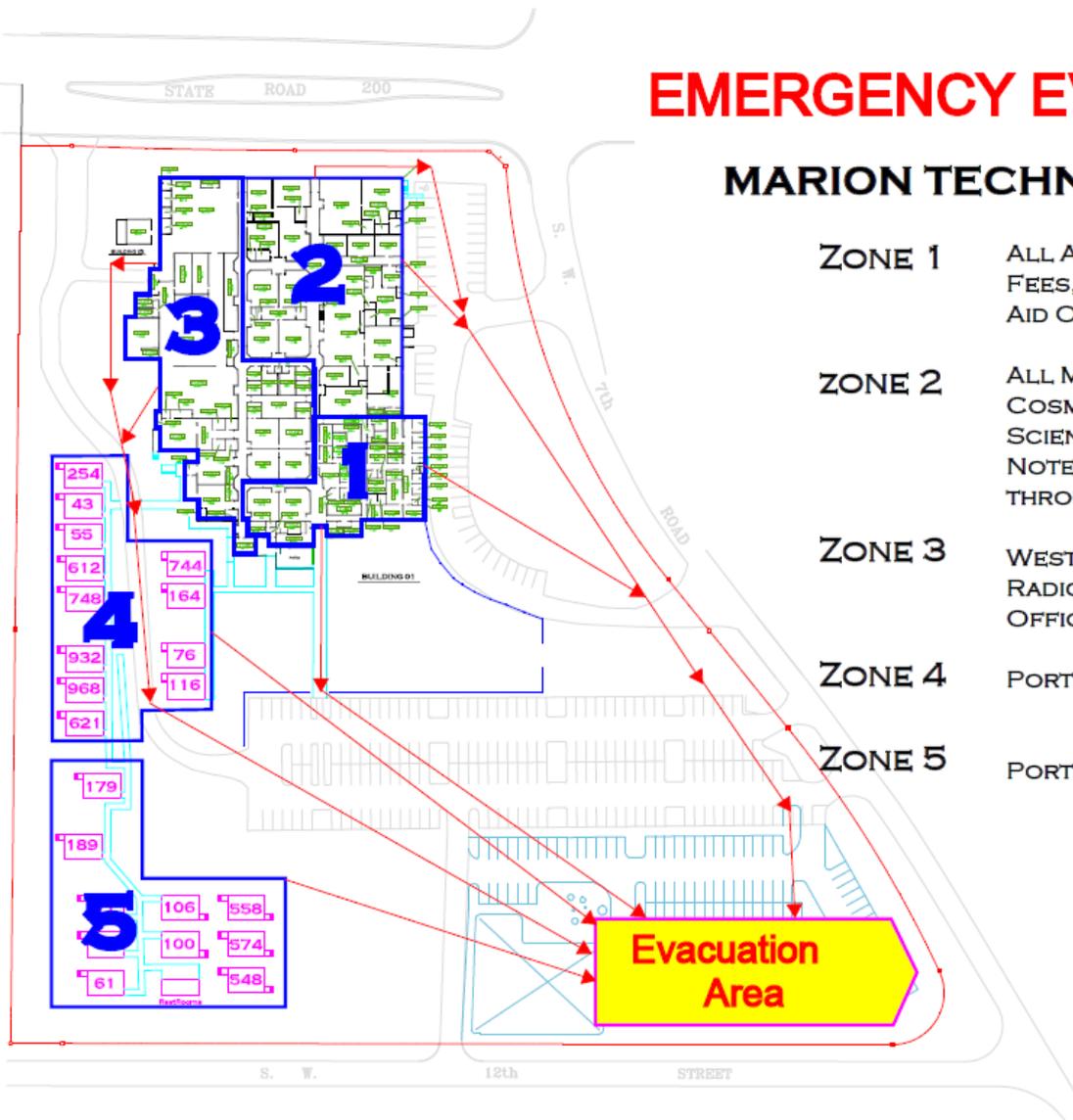
1. In the event of advance warning of a tornado, the signal will be given by the intercom to all classrooms and offices to take precautionary action.
2. All classes located within portable classrooms will move immediately, in an orderly manner, to the closest entrance of the main building.
3. Each teacher will bring the class roster and account for all students once inside the main building.
4. All students and staff should move to an interior room or hallway with concrete walls, avoiding areas where glass windows are present and get down on the floor next to the wall. Do not get under furniture.
5. Rest chest on thighs. Cover the back of the head with hands.
6. Students should remain in this position until "ALL CLEAR" is announced.
7. IF OUTSIDE: Move to main building or seek other shelter immediately. If unable to find shelter soon enough, lie on the ground, in a low area, if possible.

(August 2021)

# EMERGENCY EVACUATION PLAN

## MARION TECHNICAL COLLEGE

- ZONE 1** ALL ADMINISTRATIVE OFFICES, RECEPTION AREA, STUDENT FEES, CAMPUS GRILL, STUDENT SERVICES, AND FINANCIAL AID OFFICES.
- ZONE 2** ALL MEDICAL PROGRAM AREAS, BREWSTER HALL, COSMETOLOGY CLASSROOM (O1•085) AND LAB, HEALTH SCIENCE (O1•083 AND KITCHEN, CPR CLASSROOM (O1-84).  
NOTE: CLASSROOMS: 81B, 81E, 81F, 87, MLT - EXIT THROUGH THE NORTH DOUBLE DOORS AT RT 200.
- ZONE 3** WEST BAY, BUSINESS AND REMEDIATION COMPUTER LABS, RADIOLOGY, ADULT EDUCATION OFFICES, AND CUSTODIAL OFFICES.
- ZONE 4** PORTABLES 1-10 AND 16-19.
- ZONE 5** PORTABLES 11-15 AND 20-25



# FIRST REPORT OF INJURY OR ILLNESS

## FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION

For assistance call 1-800-342-1741  
or contact your local EAO Office

RECEIVED BY CLAIMS-HANDLING ENTITY	SENT TO DIVISION DATE	DIVISION RECEIVED DATE

**PLEASE PRINT OR TYPE**

PLEASE PRINT OR TYPE		EMPLOYEE INFORMATION	
NAME (First, Middle, Last)		Social Security Number	Date of Accident (Month-Day-Year)
HOME ADDRESS Street/Apt # City: _____ State: _____ Zip: _____		Time of Accident <input type="checkbox"/> AM <input type="checkbox"/> PM	
TELEPHONE Area Code Number		EMPLOYEE'S DESCRIPTION OF ACCIDENT (Include Cause of Injury)	
OCCUPATION		INJURY/ILLNESS THAT OCCURRED	PART OF BODY AFFECTED
DATE OF BIRTH	SEX <input type="checkbox"/> M <input type="checkbox"/> F		

EMPLOYER INFORMATION	
COMPANY NAME: D. B. A.: Street: City: _____ State: _____ Zip: _____	FEDERAL I.D. NUMBER (FEIN) NATURE OF BUSINESS
TELEPHONE Area Code Number	DATE FIRST REPORTED (Month/Day/Year) POLICY/MEMBER NUMBER
EMPLOYER'S LOCATION ADDRESS (if different) Street: City: _____ State: _____ Zip: _____	DATE EMPLOYED _____/_____/_____ PAID FOR DATE OF INJURY <input type="checkbox"/> YES <input type="checkbox"/> NO
LOCATION # (if applicable)	LAST DATE EMPLOYEE WORKED _____/_____/_____ RETURNED TO WORK <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, GIVE DATE _____/_____/_____ WILL YOU CONTINUE TO PAY WAGES INSTEAD OF WORKERS' COMP? <input type="checkbox"/> YES
PLACE OF ACCIDENT (Street, City, State, Zip) Street: City: _____ State: _____ Zip: _____	DATE OF DEATH (if applicable) _____/_____/_____ AGREE WITH DESCRIPTION OF ACCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO
COUNTY OF ACCIDENT	RATE OF PAY \$ _____ PER <input type="checkbox"/> HR <input type="checkbox"/> WK <input type="checkbox"/> DAY <input type="checkbox"/> MO Number of hours per day _____ Number of hours per week _____ Number of days per week _____
Any person who, knowingly and with intent to injure, defraud, or deceive any employer or employee, insurance company, or self-insured program, files a statement of claim containing any false or misleading information commits insurance fraud, punishable as provided in s. 817.234, Section 440.105(7), F.S. <b>I have reviewed, understand and acknowledge the above statement.</b>	
EMPLOYEE SIGNATURE (if available to sign)	DATE
EMPLOYER SIGNATURE	DATE
NAME, ADDRESS AND TELEPHONE OF PHYSICIAN OR HOSPITAL	
AUTHORIZED BY EMPLOYER <input type="checkbox"/> YES <input type="checkbox"/> NO	

CLAIMS-HANDLING ENTITY INFORMATION	
<input type="checkbox"/> 1(a) Denied Case - DWC-12, Notice of Denial Attached	<input type="checkbox"/> 2. Medical Only which became Lost Time Case (Complete all required information in #3)
<input type="checkbox"/> 1(b) Indemnity Only Denied Case - DWC-12, Notice of Denial Attached	Employee's 8 <sup>TH</sup> Day of Disability _____/_____/_____ Entity's Knowledge of 8 <sup>TH</sup> Day of Disability _____/_____/_____ Full Salary in lieu of comp? <input type="checkbox"/> YES Full Salary End Date _____/_____/_____ Date First Payment Mailed _____/_____/_____ AWW _____ Comp Rate _____
<input type="checkbox"/> 3. Lost Time Case - 1st day of disability _____/_____/_____ Penalty Amount Paid in 1 <sup>st</sup> Payment \$ _____ Interest Amount Paid in 1 <sup>st</sup> Payment \$ _____	<input type="checkbox"/> T.T. <input type="checkbox"/> T.T. - 80% <input type="checkbox"/> T.P. <input type="checkbox"/> I.B. <input type="checkbox"/> P.T. <input type="checkbox"/> DEATH <input type="checkbox"/> SETTLEMENT ONLY

REMARKS:			INSURER NAME
INSURER CODE #	EMPLOYEE'S CLASS CODE	EMPLOYER'S NAICS CODE	CLAIMS-HANDLING ENTITY NAME, ADDRESS & TELEPHONE
SERVICE CODE/PA CODE #	CLAIMS-HANDLING ENTITY FILE #		

## DWC-1 Purpose and Use Statement

The collection of the social security number on this form is specifically authorized by Section 440.185(2), Florida Statutes. The social security number will be used as a unique identifier in Division of Workers' Compensation database systems for individuals who have claimed benefits under Chapter 440, Florida Statutes. It will also be used to identify information and documents in those database systems regarding individuals who have claimed benefits under Chapter 440, Florida Statutes, for internal agency tracking purposes and for purposes of responding to both public records requests and subpoenas that require production of specified documents. The social security number may also be used for any other purpose specifically required or authorized by state or federal law.