# ADNY – Parish Safety & Security Planning- Follow-up Assessment

In early 2019 your parish should have received a copy of the Parish Safety and Security Guide (attached). This guide was issued to assist your parish in assessing your current security protocols and to establish a Parish Safety Plan as laid out in the safety guide.

There are four (4) key steps to developing a parish safety plan:

1. Establish a Safety Committee
2. Conduct security assessments of your premises
3. Develop and document your safety plan
4. Train staff and volunteers

Please complete the below assessment regarding the status of your parish safety plan.

# Parish Safety Plan Assessment

1. Did you establish a “Safety Committee”? **YES or NO**
	1. **If YES** – Please list your committee members and their affiliation to the parish below:
		1.
		2.
		3.
		4.
		5.
		6.
		7.
		8.
		9.
		10.
	2. **If NO** – Please provide an estimated date for your safety committee to be established
		1. Safety Committee Established:
2. Did you conduct a security assessment of your premise/s? **YES or NO**
	1. **If YES** - Did you assess the following key areas as laid out in the safety guidelines:
		1. Communication System (i.e., Phone, Alarms, intercoms)? **YES or NO**
		2. Coordination with outside agencies (i.e., local police, fire department, mental health providers)? **YES \_ or NO**
			1. Do you have a local police contact? **YES or NO**
			2. Do you have a local fire contact? **YES or NO**
		3. Did you conduct walk-throughs during various times of the day or week to assess the safety needs at different times of the day or week? **YES or NO**
	2. **If NO** – Please complete the below.
		1. When you do expect to complete your security assessment:
		2. Approximately how complete is your assessment currently (estimated %):
3. Did you document and finalize a safety plan? **YES or NO**
	1. **If YES** – Please attach a copy of your safety plan
		1. Did you review the safety plan with your safety committee? **YES or NO**
		2. Did you review the safety plan with your staff and volunteers? **YES**

#  or NO

* + 1. Is your safety plan posted in a place where staff can easily reference it? **YES or NO**
	1. **If NO** – Please complete the below:
		1. When do you expect to have your security plan completed?
		2. Approximately how complete is it currently (estimated %)?
1. Did you train your staff and any volunteers on the updated safety plan and guideline? **YES or NO**
	1. **If YES** – When did the trainings take place?
		1.
		2.
		3.
		4.
		5.
	2. **If NO** – Please complete the below:
		1. When do you plan to hold trainings?

:

* + 1. Approximately how complete is your training process (estimated %)?

:

1. Please provide any additional comments or questions you would like to share with the Office of Risk Management and Insurance Services.