

*A copy of this plan should be sent to the Regional Catechetical Director (due October 1). Copies should be kept in the home of the Crisis Management Team Coordinator, on file in the parish Religious Education Office and on file in the Parish Office.*

**PARISH RELIGIOUS EDUCATION CRISIS MANAGEMENT PLAN (2019-2020)**

Parish Name & Parish #:	Deanery:	Telephone:	Fax:
Director/Coordinator:	RE Office Phone:	Home Phone:	Cell Phone: <input type="checkbox"/>
Pastor: <input type="checkbox"/>	Rectory Phone:	Private Line:	Rectory Fax:
Regional Catechetical Director:	Office Phone:	Home Phone:	Cell Phone:

**CRISIS RESOURCES**

<b>Police / Fire / EMS</b>	<b>Poison Control</b>	<b>Hospitals</b>	<b>ADAPP</b>
911	1-800-222-1222		Frances Maturo/Christine Cavallucci
			1-718-904-1335
<b>Safety Audit (date)</b>	<b>Emergency Drill (date)</b>	<b>Staff in-service (date)</b>	<b>CPR training (date)</b>

**STUDENT & VOLUNTEER RECORDS (BACKUP LOCATIONS)**

<b>Medical Emergency Forms</b>	<b>Permanent Record Cards</b>	<b>Master Phone List</b>

**CRISIS CODE**

Where to find the Crisis Code (e.g., catechist folder, catechist handbook) & Actions triggered by use of the Code:

Who is authorized to announce the Code?

**ON SITE LOCATION ~ DETAILS**

In the event children must leave their classroom, the location to where they may be safely moved:

**CRISIS TEAM MEMBERS**

<b>SESSION DAY &amp; TIME:</b>			
Member Name	Location	Cell phone	Special skills / Assignment
<input type="checkbox"/>			Team Coordinator
			First Aid / CPR

**COMMUNICATION**

Who will post message on web site/answering machine?	
Who will prepare a statement for parents?	
When & how will staff be informed?	
Who will prepare a press statement?	
Who will be the contact with the Regional/Archdiocesan Catechetical Office?	

**EVACUATION PLAN**

	Primary Evacuation Site	Secondary Evacuation Site
Location:		
Telephone (# at evacuation site):		
Site contact person:		
How will students reach evacuation site?		
How will students be returned to program site?		

**SIGNATURES**

Director's / Coordinator's Signature:	Date:
Pastor's Signature:	Date: