

# School Staff Skills Inventory Assessment

## (For Emergency Operations Planning)

*\*This form is given to each staff members and results collected and compiled.*

As part of the development of our school Emergency Operations Plan (EOP), and in accordance with PED guidance on Safe Schools Planning, please complete the following survey of staff skills and return to the administration office by (date). You will not be assigned to any emergency response role without consent, however the information provided below may be useful to help design and update our EOP to be fully prepared for an emergency.

NAME: \_\_\_\_\_ ROOM: \_\_\_\_\_

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### I. Emergency Response:

Please check any of the following areas in which you have training or expertise:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> First aid health  | <input type="checkbox"/> Search & Rescue     | <input type="checkbox"/> Counseling/mental   |
| <input type="checkbox"/> CPR               | <input type="checkbox"/> Hazardous materials | <input type="checkbox"/> Firefighting        |
| <input type="checkbox"/> Emergency medical | <input type="checkbox"/> Media relations     | <input type="checkbox"/> Incident debriefing |

Explain or clarify items checked, if needed, or list other areas:

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### II. Special Considerations:

Please check and list special skills or resources you possess or have access to that you feel would be an asset in an emergency. Explain or clarify items checked:

- Multilingual, list language(s)
- Experience with disabled persons
- Ham radio or CB radio experience
- Knowledge of community resources
- Organizational safety planning
- Emergency operations management
- Other knowledge or skills (*customize for individual school needs*)
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