



Corpus J. Zorola, CTSBS, CTPM
Supervisor – Environmental/
Health/Safety/Custodial Training

Cindy Paz
Police Sergeant/Records

Oscar Garcia, L.C.C.
Chief of Police

Safety Coordinators Meeting

August 30, 2022

SRN# 247087

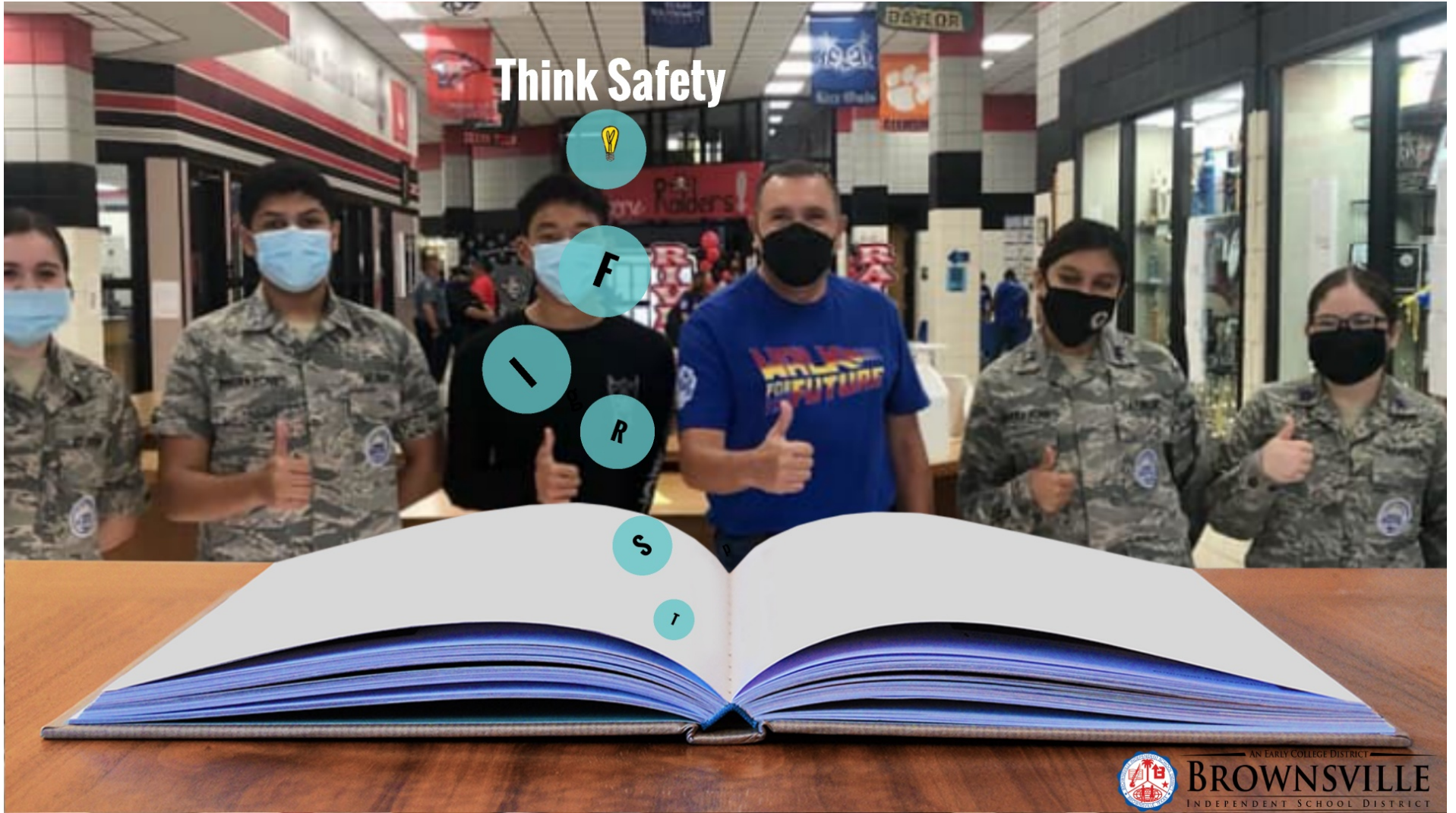
Session

4:00PM – 5:00PM

AGENDA

- **New School Year – Changes**
 - **Sergeant Paz – CKB Legal**
- **Meeting Schedule**
- **Website**
- **Responsibilities**
- **Classroom Decoration**
 - **PASS**
 - **Fire Drill Form**
- **Notice of Pest Control Treatment**
- **Mold**
- **Comments**







Phase 1

Phase 1 - Introduction to "Technical Audit"			
How many people do you have on your technical audit team?	<input type="radio"/> Yes		
How many people do you have on your technical audit team?	<input type="radio"/> No		
If you, from your school time, how long did it take you to get your technical audit team to the point of the audit?	<input type="radio"/> Less than 1 minute <input type="radio"/> 1-2 minutes <input type="radio"/> 3-4 minutes <input type="radio"/> 5-6 minutes <input type="radio"/> 7-8 minutes <input type="radio"/> 9-10 minutes <input type="radio"/> 11-12 minutes <input type="radio"/> 13-14 minutes <input type="radio"/> 15-16 minutes <input type="radio"/> 17-18 minutes <input type="radio"/> 19-20 minutes <input type="radio"/> 21-22 minutes <input type="radio"/> 23-24 minutes <input type="radio"/> 25-26 minutes <input type="radio"/> 27-28 minutes <input type="radio"/> 29-30 minutes <input type="radio"/> 31-32 minutes <input type="radio"/> 33-34 minutes <input type="radio"/> 35-36 minutes <input type="radio"/> 37-38 minutes <input type="radio"/> 39-40 minutes <input type="radio"/> 41-42 minutes <input type="radio"/> 43-44 minutes <input type="radio"/> 45-46 minutes <input type="radio"/> 47-48 minutes <input type="radio"/> 49-50 minutes <input type="radio"/> 51-52 minutes <input type="radio"/> 53-54 minutes <input type="radio"/> 55-56 minutes <input type="radio"/> 57-58 minutes <input type="radio"/> 59-60 minutes <input type="radio"/> 61-62 minutes <input type="radio"/> 63-64 minutes <input type="radio"/> 65-66 minutes <input type="radio"/> 67-68 minutes <input type="radio"/> 69-70 minutes <input type="radio"/> 71-72 minutes <input type="radio"/> 73-74 minutes <input type="radio"/> 75-76 minutes <input type="radio"/> 77-78 minutes <input type="radio"/> 79-80 minutes <input type="radio"/> 81-82 minutes <input type="radio"/> 83-84 minutes <input type="radio"/> 85-86 minutes <input type="radio"/> 87-88 minutes <input type="radio"/> 89-90 minutes <input type="radio"/> 91-92 minutes <input type="radio"/> 93-94 minutes <input type="radio"/> 95-96 minutes <input type="radio"/> 97-98 minutes <input type="radio"/> 99-100 minutes <input type="radio"/> 101-102 minutes <input 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type="radio"/> 467-468 minutes <input type="radio"/> 469-470 minutes <input type="radio"/> 471-472 minutes 		

PHASE 2 – EXTERIOR DOOR AUDIT			
Were all exterior secondary doors closed and properly locked?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
What was the total number of doors that were propped open? (if issue not detected)	Use this space to tally doors.	# Of Total Propped:	
What was the total number of doors that were unlocked? (if issue not detected)	Use this space to tally doors.	# Of Total Unlocked:	
What was the total number of doors that were broken? (if issue not detected)	Use this space to tally doors.	# Of Total Broken:	
What was the total number of doors that were improperly secured?	Use this space to tally doors.	# Of Total Improperly Secured:	
Were any items observed near exterior doors that could be used to prop a door open? (e.g., rocks, doorstops, bricks, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Was documentation of weekly exterior door sweeps observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Phase 3 - CLASSROOM DOOR AUDIT

Does the district have a policy or written administrative guidelines to lock classroom doors during instruction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In a random sample of classroom doors, were <u>ALL</u> doors closed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A (the district does not have a policy)
In a random sample of classroom doors, were <u>ALL</u> doors locked?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A (the district does not have a policy)

Notice of Intruder Detection Audit Form was provided to

Notice of Intruder Detection
(Contact Name & Title):

Phase 1

PHASE 1 - INTRUDER DETECTION AUDIT	
Were you able to gain unsecured/unauthorized access to the campus?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, from your arrival time, how long did it take you to gain unsecured/unauthorized access to the campus?	<div> <input type="checkbox"/> Less than 1 minute <input type="checkbox"/> 1 minute <input type="checkbox"/> 2 minutes <input type="checkbox"/> 3 minutes <input type="checkbox"/> 4 minutes <input type="checkbox"/> 5 minutes <input type="checkbox"/> 6 minutes <input type="checkbox"/> 7 minutes <input type="checkbox"/> 8 minutes </div> <div> <input type="checkbox"/> 9 minutes <input type="checkbox"/> 10 minutes <input type="checkbox"/> 11 minutes <input type="checkbox"/> 12 minutes <input type="checkbox"/> 13 minutes <input type="checkbox"/> 14 minutes <input type="checkbox"/> 15 minutes <input type="checkbox"/> More than 15 minutes <input type="checkbox"/> N/A (unable to gain access to the campus) </div>
If you were able to gain access to the campus, what was your entrance point?	<input type="checkbox"/> Primary entrance <input type="checkbox"/> Secondary entrance <input type="checkbox"/> N/A (unable to gain access to the campus)

While you were inside the campus, did you encounter anyone who did not stop you?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Unable to gain access to the campus)	
Who were you stopped by?	<input type="checkbox"/> Campus Staff <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Safety and Security Personnel <input type="checkbox"/> Student	<input type="checkbox"/> Other <input type="checkbox"/> No one stopped me <input type="checkbox"/> N/A (unable to gain access to the campus)
Upon entering the front office, were you required to do any of the following? (Check all that apply)	<input type="checkbox"/> Required to sign in <input type="checkbox"/> Required to present identification <input type="checkbox"/> Personal identification was checked against an electronic database <input type="checkbox"/> Provided with a visitor's badge <input type="checkbox"/> None of the above	

Phase 2

PHASE 2 – EXTERIOR DOOR AUDIT		
Were all exterior secondary doors closed and properly locked?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
What was the total number of doors that were propped open? <i>(0 if issue not detected)</i>	Use this space to tally doors.	# Of Total Propped:
What was the total number of doors that were unlocked? <i>(0 if issue not detected)</i>	Use this space to tally doors.	# Of Total Unlocked:
What was the total number of doors that were broken? <i>(0 if issue not detected)</i>	Use this space to tally doors.	# Of Total Broken:
What was the total number of doors that were improperly secured? <i>(0 if issue not detected)</i>	Use this space to tally doors.	# Of Total Improperly Secured:
Were any items observed near exterior doors that could be used to prop a door open? <i>(e.g., rocks, doorstops, bricks, etc.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was documentation of weekly exterior door sweeps observed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Phase 3

Phase 3 - CLASSROOM DOOR AUDIT

Does the district have a policy or written administrative guidelines to lock classroom doors during instruction?

- ☐ Yes
- ☐ No

In a random sample of classroom doors, were ALL doors closed?

- ☐ Yes
- ☐ No
- ☐ N/A (the district does not have a policy)

In a random sample of classroom doors, were ALL doors locked?

- ☐ Yes
- ☐ No
- ☐ N/A (the district does not have a policy)

ONSITE NOTICE OF INTRUDER DETECTION AUDIT FORM

Notice of Intruder Detection Audit Form was provided to
(Contact Name & Title):





File Home Share View

Pin to Quick access Copy Paste Cut Copy path Paste shortcut Move to Copy to Delete Rename New folder New item Easy access Open Edit Select all Select none Invert selection

Clipboard Organize New Open Properties History Select

Network > busops-srv > shares\$ > School Safety > Binder For Principals

Search Binder For Principals

Name	Date modified	Type	Size
Binder COVER for Principal Binder.docx	8/21/2022 8:39 PM	Microsoft Word D...	214 KB
Door Numbers Print Double Sided.docx	8/24/2022 8:40 AM	Microsoft Word D...	14 KB
TAB 1 DISTRICT Safety and Security Com...	8/21/2022 7:27 PM	Microsoft Word D...	107 KB
TAB 1 SUPT Safety and Security Committ...	8/22/2022 1:13 PM	Microsoft Word D...	107 KB
TAB 1 TEA MEMO School Safety Requirei...	8/22/2022 1:05 PM	Adobe Acrobat D...	216 KB
TAB 2 Exterior Door Safety Audit Tracker.x...	8/22/2022 12:58 PM	Microsoft Excel W...	207 KB
TAB 2 Summer-Targeted-Partial-Safety-A...	8/22/2022 12:56 PM	Microsoft Excel W...	126 KB
TAB 3 TrSSC Intruder Detection Audit Su...	8/22/2022 1:14 PM	Adobe Acrobat D...	586 KB
TAB 4 weekly-exterior-door-sweeps PPT...	8/22/2022 1:23 PM	Microsoft PowerP...	141 KB
TAB 5 CAMPUS weekly-exterior-door-sw...	8/22/2022 1:28 PM	Microsoft Excel W...	252 KB

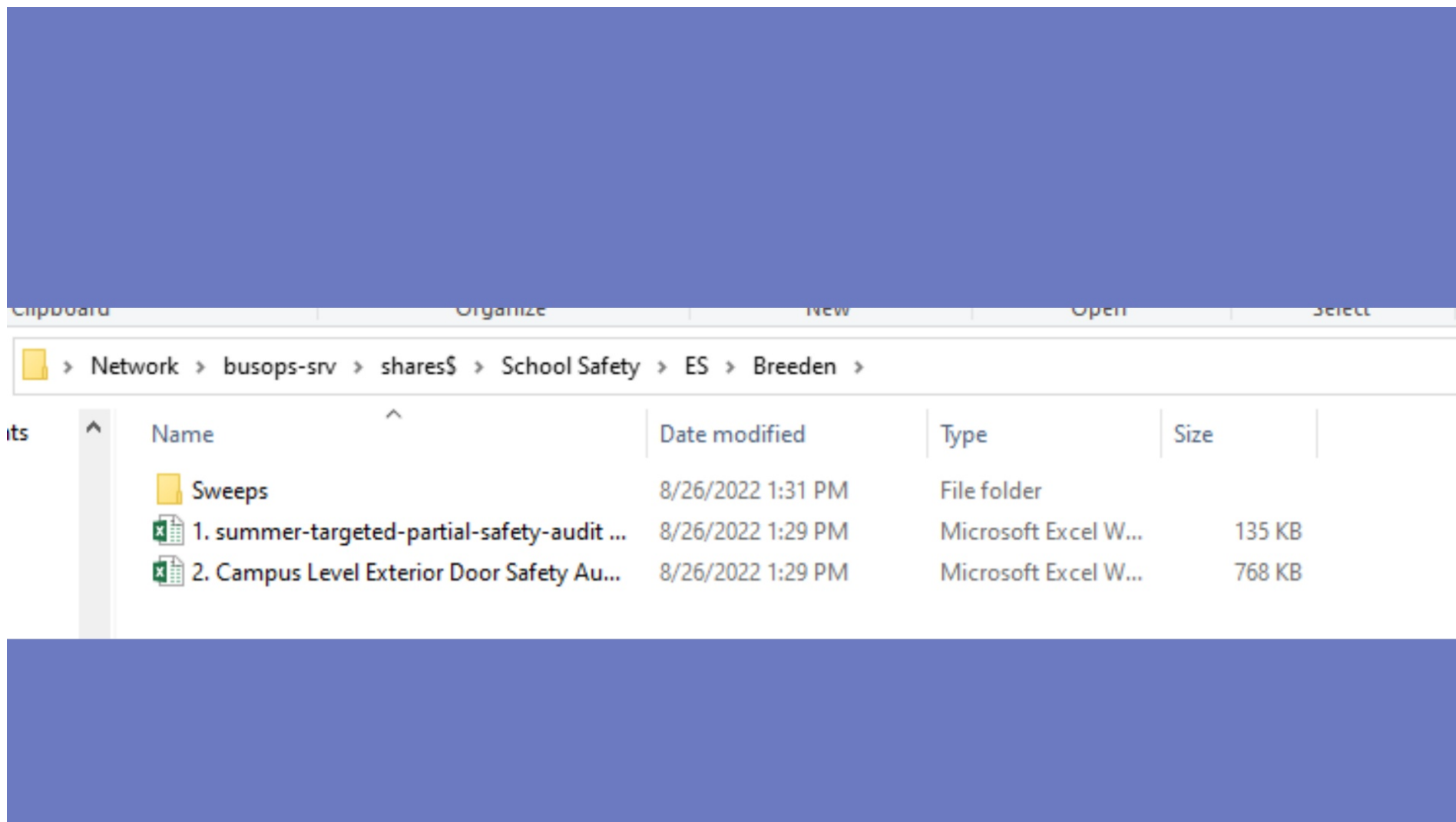
TAB 5 CAMPUS weekly-exterior-door-sweep-TOOL.xlsx [Read-Only] - Excel Corpus Zorola

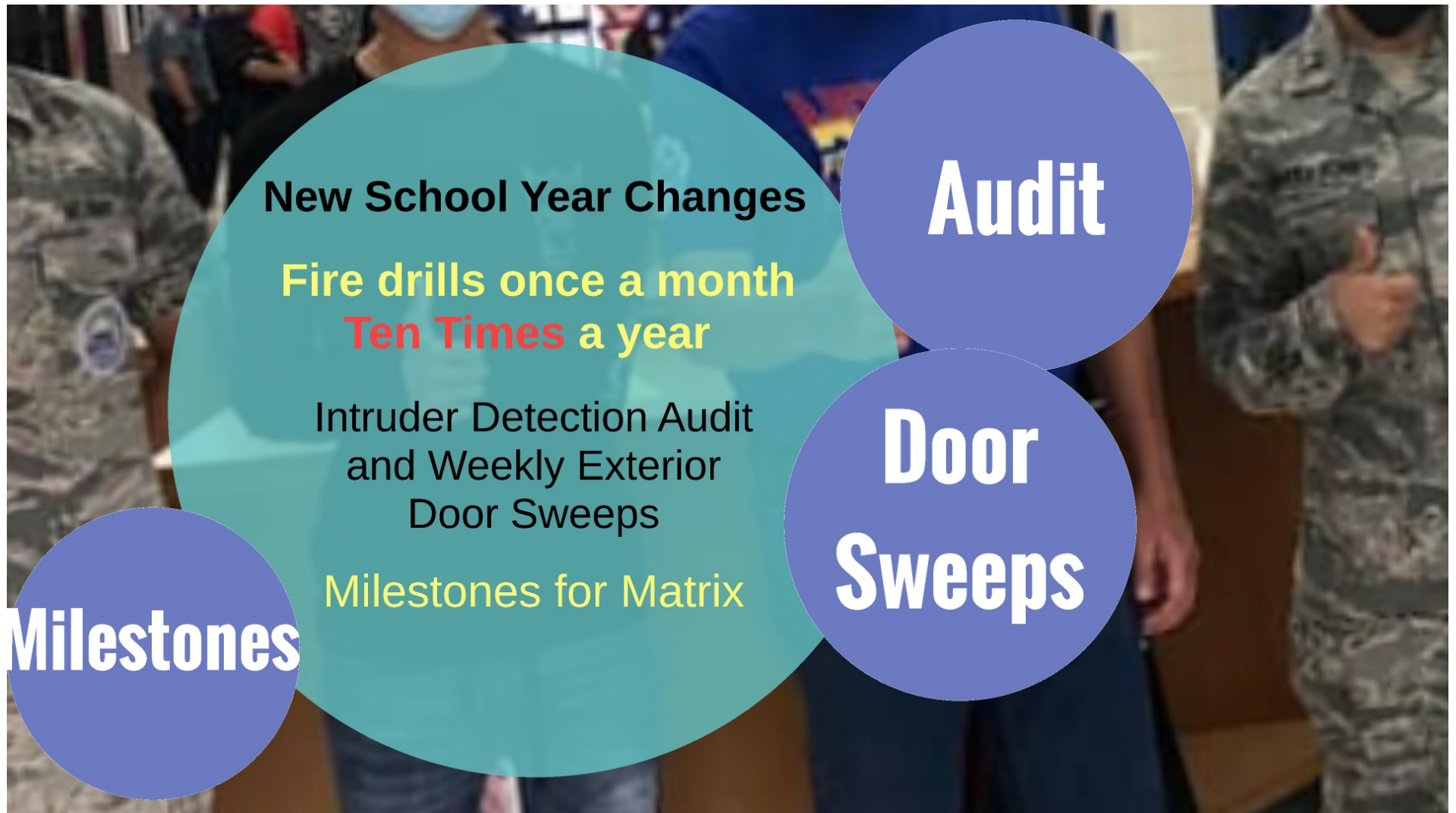
File Home Insert Page Layout Formulas Data Review View Help Acrobat Tell me what you want to do

Calibri 10 A Font Bold Italic Underline Paragraph Alignment Number Styles Conditional Formatting Format as Table Cell Styles Insert Delete Sort & Find & Filter Select Jasperactive for Office CCI Learning

1 FACILITY INFORMATION

A	B	C	D	E
1	FACILITY INFORMATION			
2	Facility Name:			
3	Facility Hours when Staffed:			
4	Facility Inspector:			Inspection Date
5				
6	Meets Standard - The door was secured (closed, latched, and locked).			
7	Human Factor - The door did not meet standard due to a human factor (ie: a door was propped open or left unlocked after use). This field does not need to be populated if the			
8				
9	Door #	Description	Meets Standard*	Human Factor**
10	1			Access Point Concern
11	2			
12	3			
13	4			
14	5			



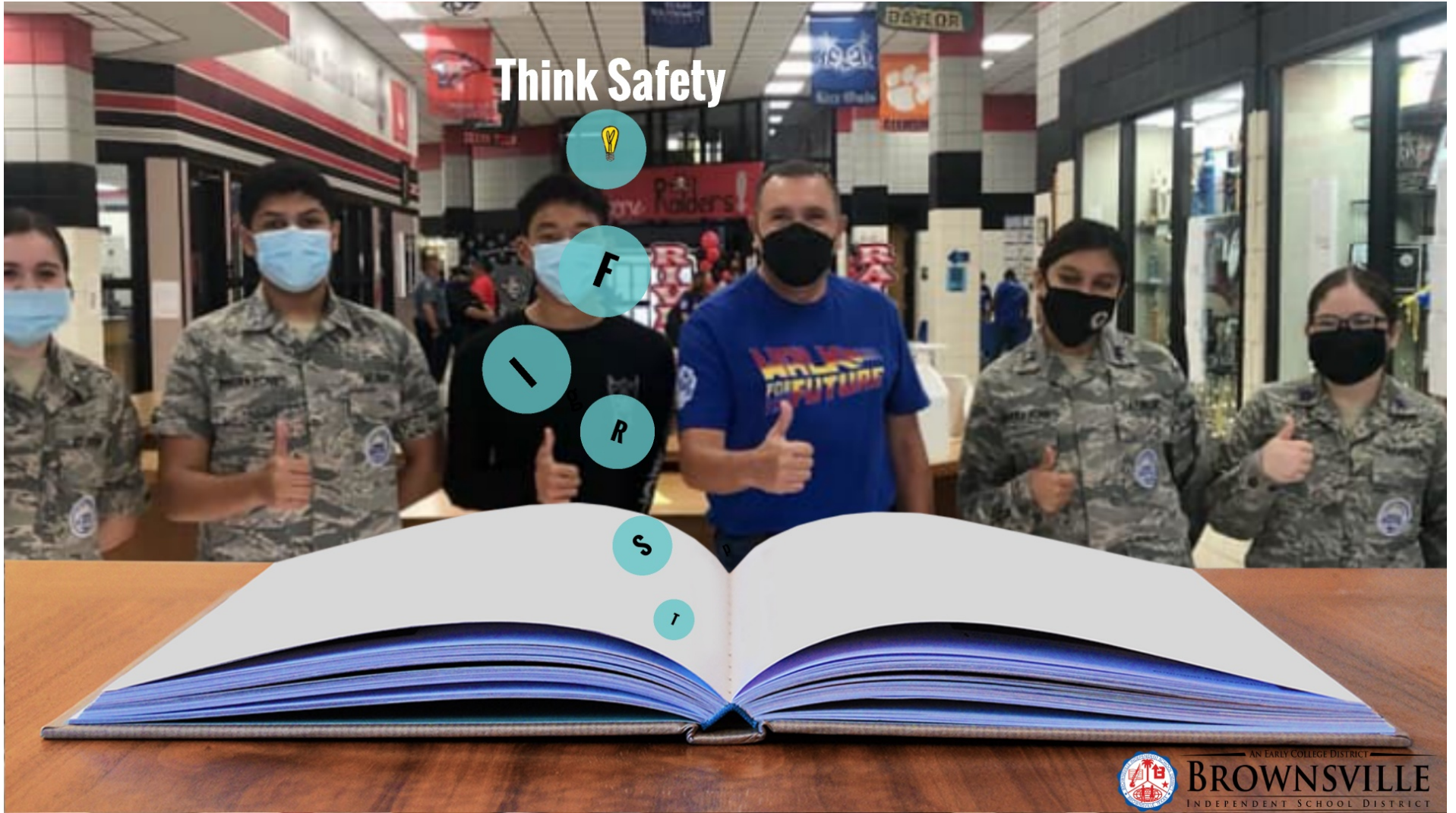


Month	Fire Drills	Fire Extinguishers	Safety Inspections	Campus Safety Meetings	Date Completed
August					
September					
October					
November					
December					
January					
February					
March					
April					
May					
June					
July					

Key	
Due	

Meeting	Percentage
October Meeting	20
December Meeting	40
February Meeting	60
April Meeting	80

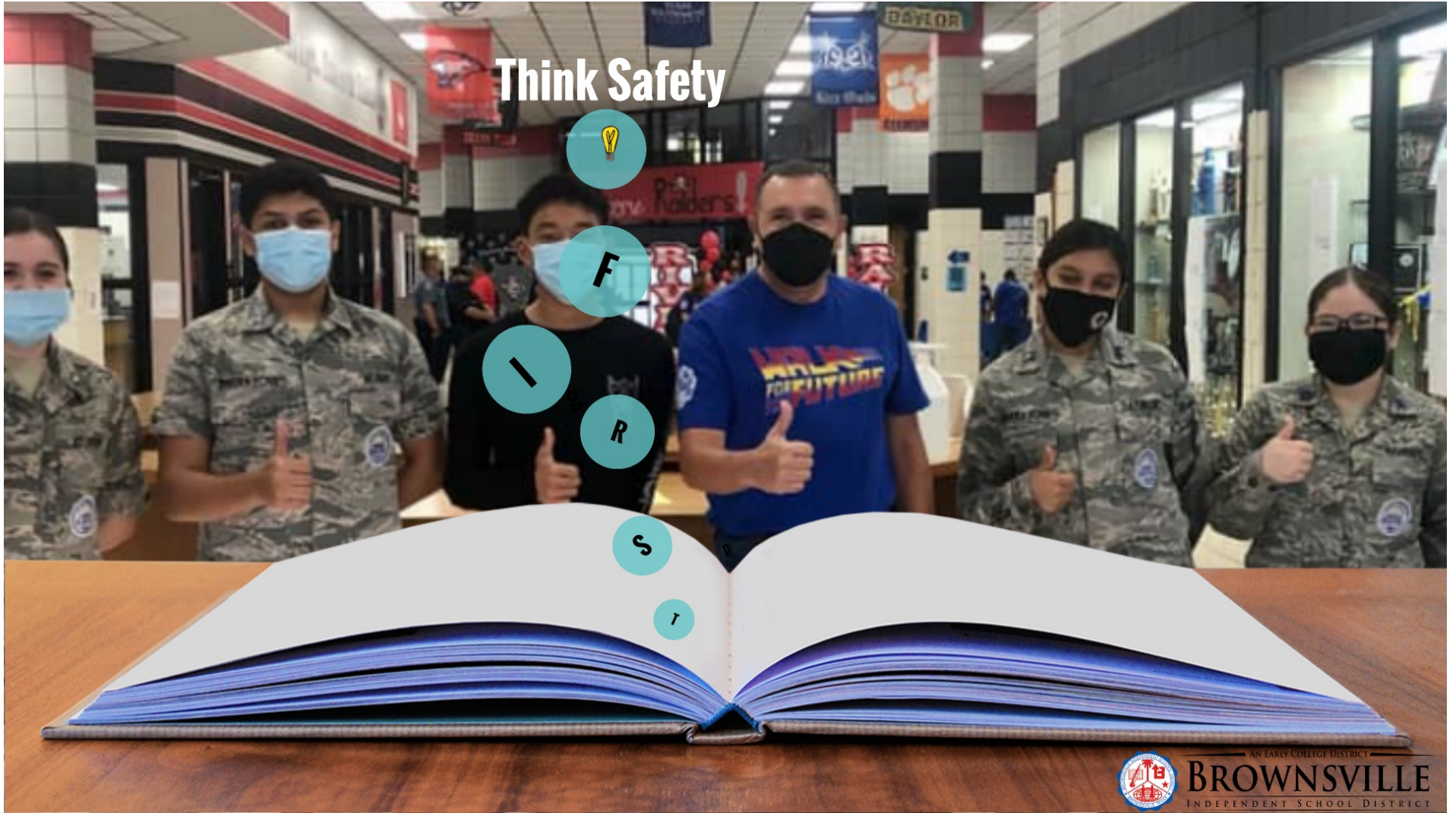




CKB Legal

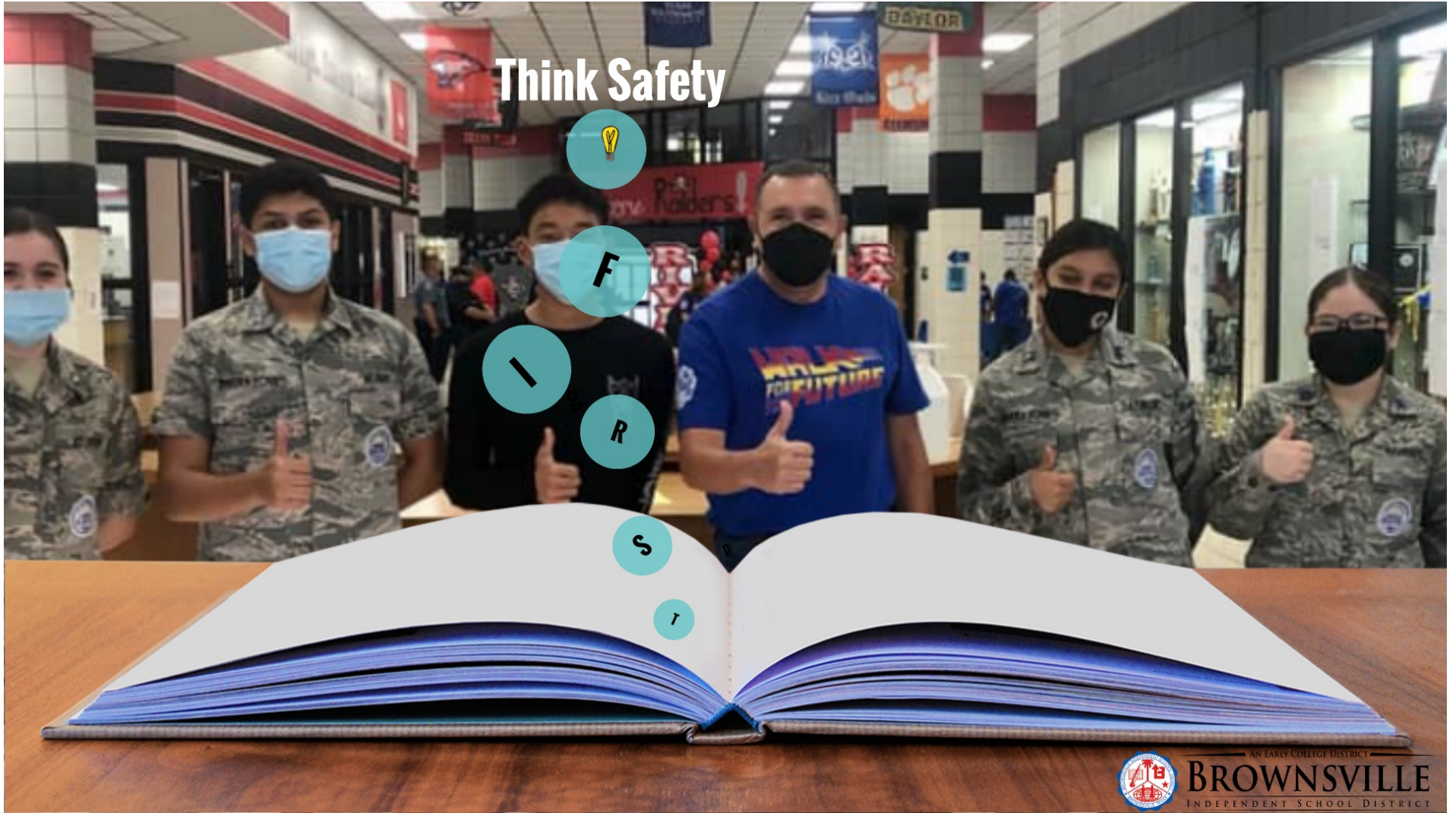
Sergeant Paz







Tentative Meeting Schedules
Oct 20, 2022
Dec 15, 2022
Feb 16, 2023
Apr 20, 2023



New Website Location


BROWNSVILLE
INDEPENDENT SCHOOL DISTRICT

About Students and Parents News and Events Join our Team Enroll at BISD COVID-19

In This Section

- Home Page
- Health Insurance
- Risk Management / Workers Compensation
- Videos & Flyers
- Wellness
- Resources
- Employee Benefits Committee
- Voluntary Products / Benefits
- Blue Cross Blue Shield
- Insurance Calendar
- Safety**
- Staff

Employee Benefits/Risk Management




Brownsville Independent School District is committed to encouraging lifelong wellness practices by providing employees with health insurance, a wellness plan and voluntary optional insurances.

[Find a Doctor or Hospital](#) [Virtual Visits](#) [How to Find Providers as a Client](#)

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- AHERA
- IPM Program
- Hazard Communication Program
- Staff

Safety



[Brownsville ISD Accident Prevention Plan](#)

Corpus Zorola, CTSBS, CTPM
Supervisor for Environmental, Health, Safety, and Custodial Training
Employee Benefits/Risk Management/Safety Department
Phone: 956-698-1374
E-Mail: czorola@bisd.us



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Employee Benefits/Risk Management



Brownsville Independent School District is committed to encouraging lifelong wellness practices by providing employees with health insurance, a wellness plan and voluntary optional insurances.

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Safety ▲

Resources
AHERA
IPM Program
Hazard Communication
Program

[Staff](#)

Safety



[Brownsville ISD Accident Prevention Plan](#)

Corpus Zorola, CTSBS, CTPM


Supervisor for Environmental, Health, Safety, and Custodial Training

Employee Benefits/Risk Management/Safety Department

Phone: 956-698-1374

E-Mail: czorola@bisd.us

Responsibilities

 Brownsville Independent School District
Environmental, Health, and Safety
3750 Robinsdale Road, Brownsville, Texas 78521
Office (956) 548-8081

Safety Coordinator's Duties and Responsibilities

Name: _____ Campus: _____
(Please Print) Safety Coordinator

I recognize that the success of an **Accident Prevention Program** is contingent and dependent upon support from the executive level of management down to the involvement of all employees of the District. I will make every effort to assist the District in providing a working environment free from any recognized or potential hazards. I am aware that all management and supervisors will set an example of commitment to safety and health in the District.

I acknowledge the following safety documentation: Fire Drills, Fire Extinguisher Logs, Campus Safety Inspection & Work Request Form(s), which may be required every month. Campus Safety Meetings agendas with sign-in sheets are needed for September, November, January, March, and April. Additionally, the forms must be posted within the TEAMS file sections and a hard copy must be filed within my campus or department. If changes are made to this requirement, I will be notified at Safety Coordinators' meetings.

Fire Drill - A minimum of five (5) fire drills are required per semester ten (10) per school year, on months having ten (10) school days or more, as directed by the Texas Administrative Code RULE §103.1209. Having two (2) fire drills in one month will not be substituted for a month in which no fire drill was held.

Fire Extinguisher Log - All fire extinguishers must be checked on a monthly basis. The Inspector's name, date of inspection, and status of each extinguisher must be noted during the Months of August thru May.

Safety Inspection and Work Request Form - Months of September, November, January, March, and April.

Safety Meeting - Every staff member on your campus or department must receive safety meeting information on the months that are required. All sign-in sheets must have the date, presenter's name, topic, and legible signature of all employees. All Campus/Department Safety documentation is to be posted within the TEAMS - Campus, Department Safety Coordinators platform files section by the end of each required month. Having a Safety Meeting on a month that was not required will not be substituted for a month that was needed.

Employers' First Report of Injury - This is to be submitted to the Employee Benefits/Risk Management Department within 24 to 48 hours of an accident or near-miss accident and submitted to the Employee Benefits/Risk Management Department. Email to: workerscomp@bisd.us

I understand my responsibilities as a Principal/Administrator/Safety Coordinator regarding the required documentation. Please send this signed form via email to czorola@bisd.us.

Safety Coordinator Signature
(Rev. 07/22)

Principal's Signature

Date



Brownsville Independent School District
Environmental, Health, and Safety
3750 Robindale Road, Brownsville, Texas 78521
Office (956) 548-8081

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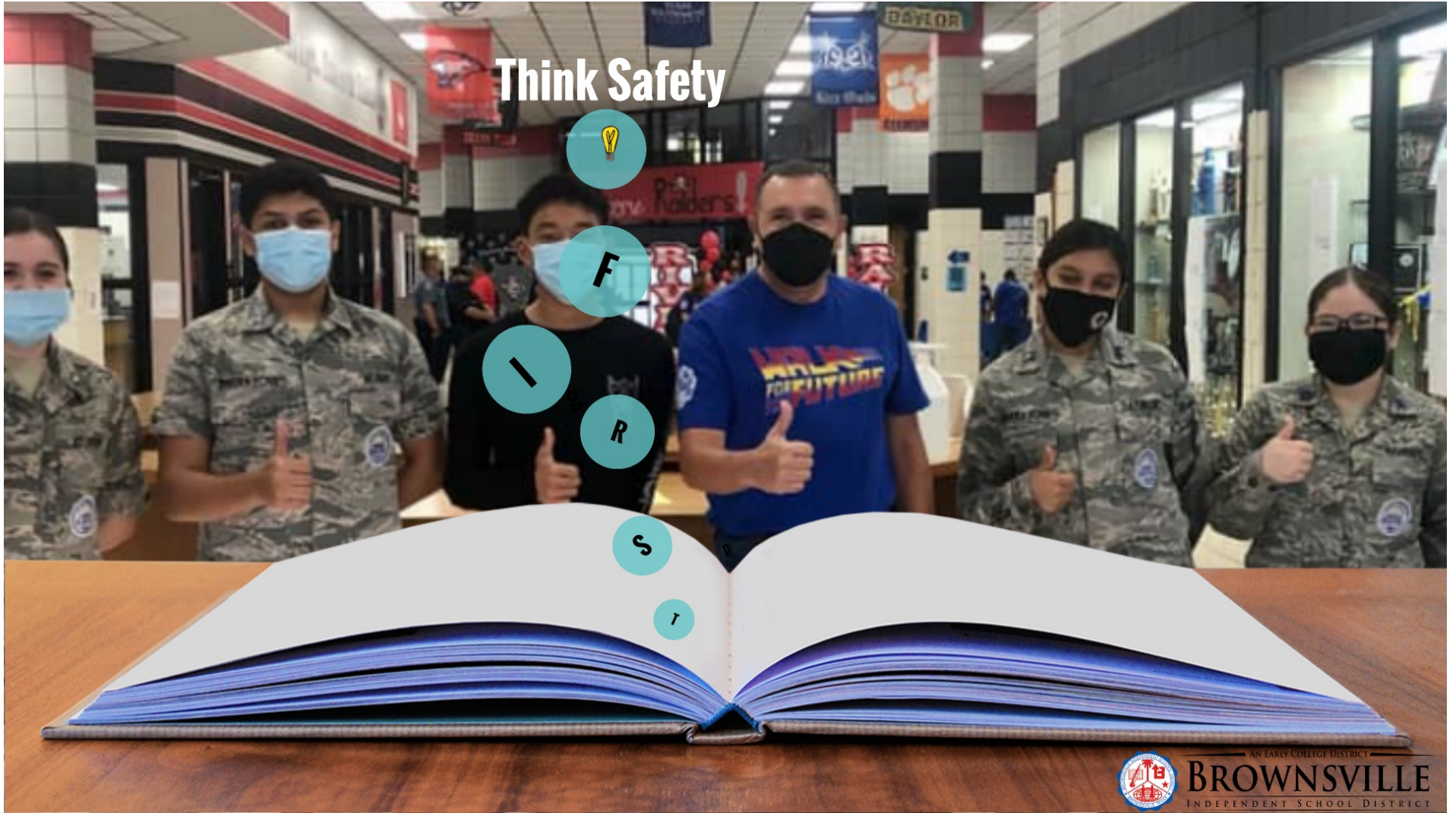
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Safety Coordinator Signature
(Rev. 07/22)

Principal's Signature

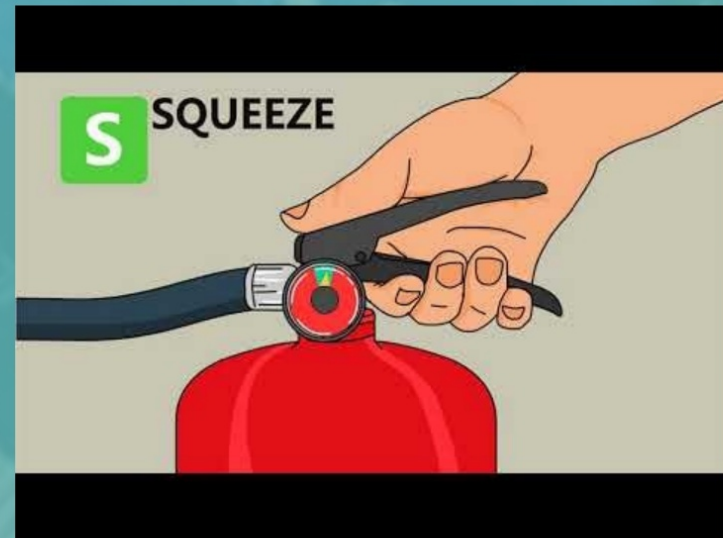
Date



Classroom Decorations

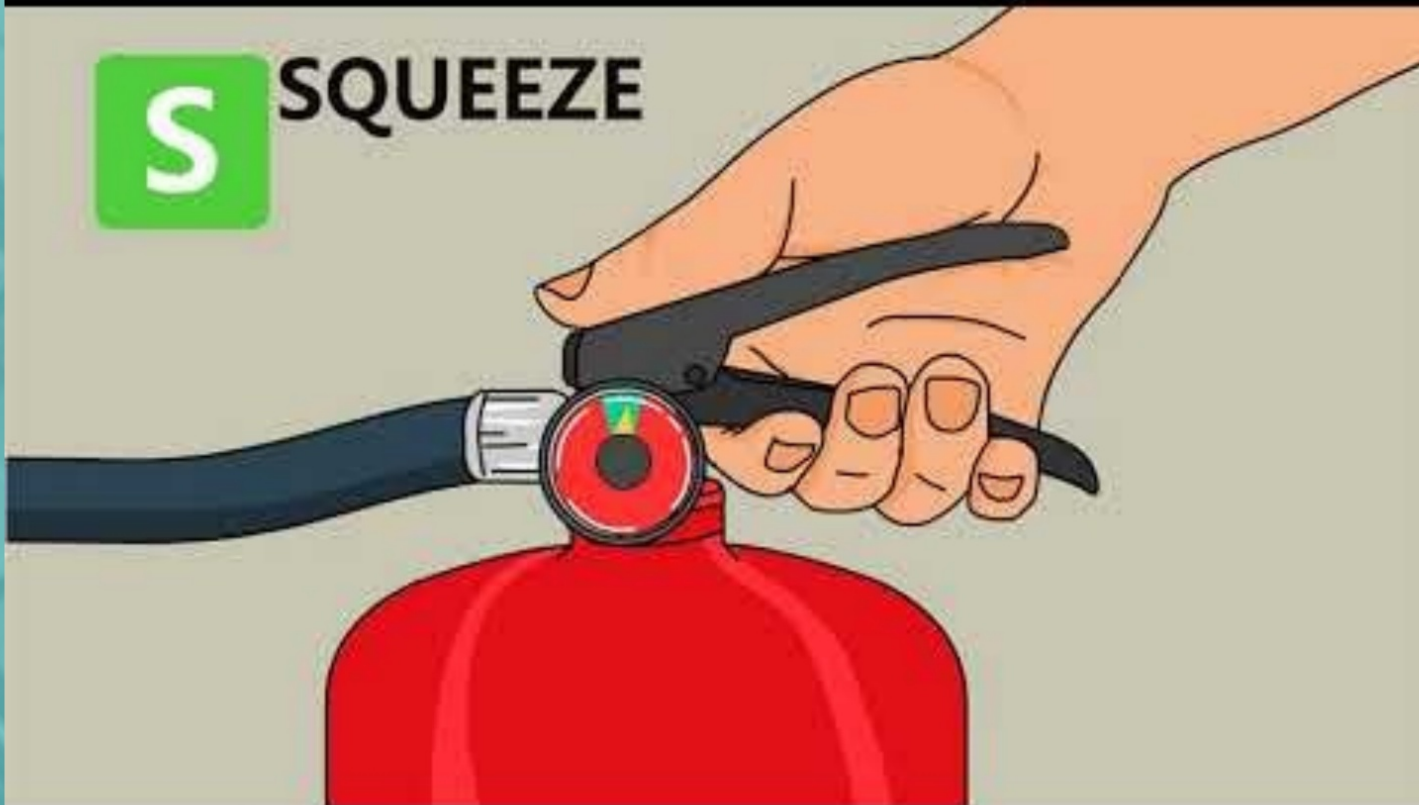
- **Fires:** Too much clutter on classroom or hallway walls can spread fires more quickly.

Rule: 50% of the classroom wall can be covered with an automatic sprinkler system - otherwise only 20% should be covered.





S SQUEEZE



Fire Drill Form



TEXAS DEPARTMENT OF INSURANCE
State Fire Marshal's Office (112-FM)
333 Guadalupe Street, Austin, Texas 78701 • PO Box 149271, Austin, Texas 78714
(512) 676-6800 | F: (512) 490-1054 | TD.texas.gov/fire | @TXS/MD

IF242 | 0320

Fire Exit Drill & Fire Prevention Education in Schools

- ▶ One form is required for each campus.
- ▶ Please complete this form and keep it in your school or school district records for three years.
- ▶ Do not send this form to the State Fire Marshal's Office.

School Name	Phone	School Year
Physical Address	City	County
		Zip +4
School District	District ID#	Campus ID#
Name of the Fire Department serving the school campus		

- ▶ Please mark an X in each appropriate box to indicate the grade levels in your school.

Sp. Ed.	ECE	PreK	K	1	2	3	4	5	6	7	8	9	10	11	12
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fire Exit Drill Information

- ▶ School Fire Drills are required by local fire code adoption or, in areas without codes, the fire inspection rules of the State Fire Marshal.

	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May	June	July
Indicate the months that your school is in session for 10 days or more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indicate the months that a fire drill was conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fire Safety Education

- ▶ Fire safety education should include items such as home escape plans, kitchen safety, monthly smoke detector checks, etc.
- ▶ Lessons may be found in Fire Safety for Texans curriculum guides at www.tdi.texas.gov/fire.
- ▶ The percentage of students participating in age appropriate Fire Safety Education during the school year is %

Certification

I certify that the above information is correct.

School administrator signature	Title
Printed name	Date

Preparation of this form is mandated by the Texas Insurance Commissioner through the adoption of the "Fire Suppression Rating Schedule." This schedule enumerates specific credit points used in calculating local insurance rates. A minimum of nine (9) drills is needed, one (1) per month for each month having 10 school days or more to achieve full credit for fire drills. If you have questions on fire drills, contact your local fire official. For more information about fire exit drill requirements in Texas, go to <http://www.tdi.texas.gov/fire/fmsh.html>.

Information solicited in this form will be combined with that of other schools served by specific fire departments and used to calculate insurance rates for your community. In addition to the enhancement to student safety that comes from holding regular fire exit drills and by providing fire prevention education, the residents in your community may benefit from lower insurance rates. Questions relating to this form may be directed to the State Fire Marshal's Office by email to fire.marshal@tdi.texas.gov. Please do not send forms to the State Fire Marshal.

Notice of Pest Control Treatment



NOTICE OF PEST CONTROL TREATMENT

Date(s) of planned Treatment (Inspection): 2nd Wednesday of March, June, September, December (Kitchen: Monthly)

Re-entry (if applicable):

Extenuating circumstances may require unplanned treatments. To confirm treatment dates, please call the contractor listed below:

Licensed Pest Control Contractor:

BIG M PEST CONTROL
PO BOX 608
INGLESIDE, TX 78362
800.864.4922

SERVICE@BIGMPESTCONTROL.COM

National Pesticide Information Center

1-800-858-7378
<http://npic.orst.edu>

Brownsville ISD conducts regular pest management inspections and services. These service calls may include inspections, pest exclusion, use of mechanical pest control devices, and occasional bait, dust, and pesticide spray applications.

A Consumer Information Sheet may be obtained from the IPM Coordinator.

District IPM Coordinator:

Corpus J. Zorola – 956-698-1374

Supervisor – Environmental/Health/Safety/Custodial Training

Pest Control Applicators are licensed and regulated by
TEXAS DEPARTMENT OF AGRICULTURE
P.O. BOX 12847, AUSTIN, TEXAS 78711-2847
Phone: 866-918-4481 Fax: 888-323-2567



revised 02/14/2022 (Perodes)

Mold

Major



Moderate



Minor



ELIMINATE BACTERIA,
VIRUSES, MOLD, ALLERGENS,
AND ODOR WITHOUT USING
HARSH CHEMICALS

