

Number: TBD  
EFFECTIVE DATE: November 13, 2000

## PROCEDURE STATEMENT

**Policy Area:** Safety

**Issue:** Safety Procedures for Conducting Work with Offenders on CSOSA Premises

**Action/Guidance:** Staff Safety – Bomb Threats

**Context:** Community Supervision Officer (CSO) and CSOSA staff safety centers around minimization of risk by controlling the physical setting of the office, establishing procedures for dealing with emergencies or disruptions, and training staff to work with offenders and the public. Risk cannot be eliminated but it can be minimized. Minimization of risk to all CSO's and CSOSA employees is the goal of the agency's safety policies.

Policy and procedure shall ensure that all necessary steps are taken as quickly as possible to ensure the safety of all persons in the unit.

### I. Procedure:

- A. Telephone threats, when received, will be reported promptly and directly to local law enforcement. Employees are to advise their SCSO once the notification has been completed.
- B. Threats are usually received by telephone but can be received in other forms such as written threats.
- C. The threat shall be documented on the Bomb Threat Checklist Form, which is to be kept near each telephone. Note the caller's telephone number, time, date, and telephone number where a bomb threat is received. In addition, employees should listen for the exact wording of the threat, the caller's voice, language used, and background sounds. This will assist law enforcement personnel in properly evaluating the threat situation.
- D. Bomb threat drills shall be conducted every 12 months and documented.
- E. The following steps shall be accomplished when a bomb threat is received:
  1. Notify local law enforcement immediately.
  2. Alert all staff present in the facility immediately and evacuate the building.
  3. Designate a location outside of the unit where all personnel can gather to ensure everyone is accounted for.
  4. Designate a staff person(s) to assist local law enforcement in searching and clearing the facility.
  5. Notify all staff not present, if possible.

6. The person who received the bomb threat shall complete the Bomb Threat Checklist as soon as possible thereafter.
7. Debrief staff/prepare Serious Incident Report.
8. In the absence of a supervisor, the senior staff member present shall assume responsibility for carrying out the bomb threat response plan.

**Bomb Threat Checklist**

Exact Wording of Threat: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Questions to Ask**

- |                                       |                                     |
|---------------------------------------|-------------------------------------|
| 1. When is the bomb going to explode? | 6. Did you place the bomb? Who did? |
| 2. Where is it right now?             | 7. Why?                             |
| 3. What does it look like?            | 8. Why did you call me?             |
| 4. What kind of bomb is it?           | 9. What is your address?            |
| 5. What will cause it to explode?     | 10. What is your name?              |

**Caller's Voice**

- |                                  |                                  |  |                                     |
|----------------------------------|----------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Calm    | <input type="checkbox"/> Nasal   | <input type="checkbox"/> Well-spoken     | <input type="checkbox"/> Incoherent |
| <input type="checkbox"/> Angry   | <input type="checkbox"/> Stutter | <input type="checkbox"/> Foul            | <input type="checkbox"/> Taped      |
| <input type="checkbox"/> Excited | <input type="checkbox"/> Lisp    | <input type="checkbox"/> Read from Notes | <input type="checkbox"/> Irrational |
| <input type="checkbox"/> Slow    | <input type="checkbox"/> Raspy   | <input type="checkbox"/> Other (Remarks) | <input type="checkbox"/> Foreign    |
| <input type="checkbox"/> Rapid   | <input type="checkbox"/> Deep    | <input type="checkbox"/> Soft            | <input type="checkbox"/> Ragged     |

**Background Sounds**

- |                                   |  |   |   |
|-----------------------------------|--|---|---|
| <input type="checkbox"/> Loud     | <input type="checkbox"/> Clearing Throat | <input type="checkbox"/> Conversation   | <input type="checkbox"/> Clear            |
| <input type="checkbox"/> Laughter | <input type="checkbox"/> Deep Breathing  | <input type="checkbox"/> Street Noises  | <input type="checkbox"/> Machinery        |
| <input type="checkbox"/> Crying   | <input type="checkbox"/> Cracking Voice  | <input type="checkbox"/> Dishes         | <input type="checkbox"/> Animals          |
| <input type="checkbox"/> Normal   | <input type="checkbox"/> Disguised       | <input type="checkbox"/> Engines/Motors | <input type="checkbox"/> Phone Booth      |
| <input type="checkbox"/> Distinct | <input type="checkbox"/> Accent          | <input type="checkbox"/> PA system      | <input type="checkbox"/> Static           |
| <input type="checkbox"/> Slurred  | <input type="checkbox"/> Familiar        | <input type="checkbox"/> Music          | <input type="checkbox"/> Local Call       |
| <input type="checkbox"/> Coughing | <input type="checkbox"/> Muffled         | <input type="checkbox"/> House Noises   | <input type="checkbox"/> Office Equipment |
| <input type="checkbox"/> Other    | <input type="checkbox"/> Other           | <input type="checkbox"/> Other          | <input type="checkbox"/> Other            |

**Other Details**

Phone Number at which You Received Bomb Threat:	Your Name:
Caller's Phone Number (check caller ID readout on your phone):	Threat Reported to:
Address of Alleged Bomb's Location	Law Enforcement Response:

**Remarks**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**II. Statutory Authority:** Section 11233(b)(2)(B) of the National Capital Revitalization and Self-Government Improvement Act of 1997 (“Revitalization Act”), Pub. Law 105-33, 111 Stat. 712, D.C. Code § 24-1233(b)(2)(B) (1996 Repl., 1999 Supp.) (Director’s authority); D.C. Code § 24-103 (1996 Repl.) (Probation’s authority).

**III. Procedural References/Supercedures:**

▪ **References:**

Federal Judicial Center. (unknown). *Staff Safety: Workbook for Participants*. Washington, DC: Federal Judicial Center.

Maggio, Mark J. (1997). *Applied Officer Safety: In-District Facilitator’s Guide for Probation and Pretrial Services*. Washington, DC: Federal Judicial Center.

Kipp, Richard A. (1995). *Safety Awareness Workbook: Anticipating, Identifying, and Resolving the Potential Victimization of Probation and Parole Officers*. Washington, DC: United States Department of Justice, National Institute of Corrections.

Thorton, Robert L. and Shireman, John H. (1993). *New Approaches to Staff Safety*. Washington, DC: United States Department of Justice, National Institute of Corrections.

Virginia Department of Corrections. Division of Operations. Community Corrections. (1999). *Strategies, Training, Equipment, & Policy for Staff Safety*. Richmond, VA: Virginia Department of Corrections.

United States District Court. Northern District of Ohio. (unknown). *Safety Policy*.

▪ **Supercedes:** N/A