

**January
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Emergency Preparedness Planning Guide for Child Care Centers & Child Care Homes



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HOW TO USE THIS GUIDE

These guidelines were developed for child care centers/child care homes in the State of Illinois to help with their development of a plan for emergency situations. Tailor these guidelines to meet the needs of your child care center/child care home and consult with key representatives within your agency to ensure compliance with state and federal laws and regulations.

These recommendations are based on current information and guidelines found within the disaster literature.

However, new information and procedures continue to be developed and the reader is advised to seek out other resources as appropriate.

Many of the disaster management terms used in this manual may be unfamiliar to child care center/child care home directors/staff. A glossary on page 66 can assist with defining common terms used in this document.

This document is available on-line at www.luhhs.org/emsc.

For additional copies or more information, contact Illinois EMSC at (708) 327-EMSC (3672).

DISASTER PREPAREDNESS IN THE CHILD CARE SETTING

Many children under the age of five spend their daytime hours away from their parents. Most of these children are in a child care center/child care home. Emergencies occurring during hours of operation require pre planning. A child care center/child care home director's primary responsibility is assuring the safety of children in their care. Therefore, it is imperative to have a comprehensive written disaster plan, commonly referred to as the Emergency Operations Plan (EOP) with policies and procedures to be followed when a disaster occurs.

All child care center/child care home disaster plans should incorporate the four areas of disaster management: prevention/mitigation, preparation, response, and recovery. The plan should be developed with input from parents, child care center directors and personnel, and local school district (if child care center is part of a school), and should be reviewed periodically. Recommendations are that the plan should be drilled once a month using different potential emergency situations. This section will review how the four areas of disaster management should be applied in the child care setting.

Prevention/Mitigation

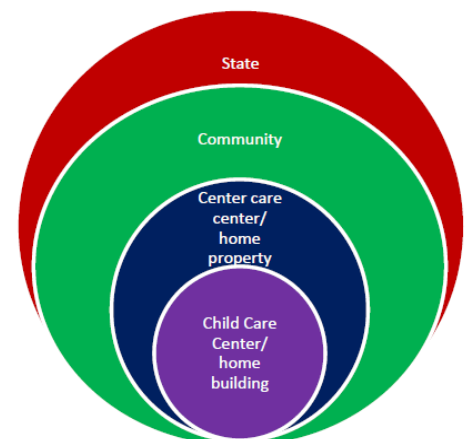
Prevention/mitigation involves taking steps to reduce the risk and effects of a potential disaster. Mitigation is an ongoing effort that addresses the implementation, management and maintenance of prevention strategies. This process includes the following steps:

- ◆ Identify hazards and risks.
- ◆ Develop plans to address specific hazards and risks.
- ◆ Identify necessary preventative strategies.
- ◆ Develop response plans.
- ◆ Implement corrective programs.
- ◆ Reassess to assure whether correctional measures were effective.
- ◆ Make necessary adjustments in emergency/disaster plans.

Hazard and Threat Assessment

A key mitigation activity is to determine which hazards and disastrous events are most likely to occur in your area or in your child care center/child care home. This process is referred to as a Hazard Vulnerability Assessment (HVA). Hazards can exist in your child care center/child care home building, on the property immediately surrounding your center/home, and in the neighborhood, community and state where your center is located. It is important to consider all four of these areas when looking at the vulnerability of your child care center/child care home. Identifying the hazards that your child care center/child care home is most vulnerable to or that are most likely to occur can guide your emergency preparedness planning activities.

Conduct a survey of your internal center/home for potentially dangerous placement of furniture, fixtures, loose blinds, windows, etc. Fix any dangerous situations that are discovered.



For example:

- ◆ Move cribs away from the top of stairs and other places where rolling could endanger them or where heavy objects could fall on them.
- ◆ Ensure whiteboards, smartboards, and bulletin boards are securely mounted to the wall. Heavy furniture and televisions should also be mounted to the wall.



Walk around the outside of your center/home and evaluate the structure for possible hazards, such as instability in a wall which could create its own disaster during an event, such as a tornado or an earthquake. Be aware of nearby structures and industry within your area that could be sources of hazardous materials, such as overhead power lines, or nearby industrial plants. Identify if there are hazardous material transportation routes that run near your child care center/child care home. In addition, identify what hazards are common in the state where your center/home is located, such as certain types of natural disasters. Examples of questions to ask during this assessment include:

- ◆ Can your center/home withstand a tornado, earthquake or other natural disasters that are common in your area?
- ◆ What would the magnitude or intensity of the impact be on your center/home should an event occur?
- ◆ Is your center/home prepared for power failures, or to respond to water contamination from a hazardous material leak?

To obtain information about your community when performing your HVA, contact your local emergency services agencies and governmental offices (e.g. local law enforcement, local fire department, city or county emergency management agency, the city planning office). Discuss with these agencies what plans are in place for dealing with possible/probable disasters in your community, how to integrate your child care center/child care home plans into their planning and identify how your center/home will be made aware of disaster events. A sample *Child Care Center/Child Care Home Hazard Vulnerability Assessment Tool* is available in Appendix I.

Other Prevention/Mitigation Activities

Other mitigation activities include:

- ◆ Get to know your neighbors and community partners since they may be able to respond and assist during an emergency event.
- ◆ Discuss and establish mutual aid agreements with neighbors and community partners for safe emergency shelter in the case of evacuation.
- ◆ Set up agreements with community partners to provide needed services in the event of a disaster. For example, an important agreement to establish is with the local transportation company to provide bus service in the event of an evacuation. These types of agreements should be in writing and are called a Memorandum of Understanding (MOU). See Appendix 2 for a sample MOU template.
- ◆ Send out reminders to parents/guardians to maintain up-to-date contact information.

Preparation

Preparation for emergencies involves developing a well thought out disaster plan that is practiced through the conduction of drills and ensures the availability of resources to respond to an event.

- ◆ Develop written disaster plans that guide staff on how to respond to incidents. For more information on what should be included in a child care center/child care home disaster plan, see the Plan Content section of this document.
- ◆ Conduct monthly drills to familiarize staff and children with the emergency procedures outlined in the disaster plan. See Appendix 3 for a sample *Child Care Center/Child Care Home Yearly Record of Disaster Drills*, which can assist with tracking the drills and exercises conducted throughout the year.
- ◆ Use different emergency scenarios during each drill to keep staff familiar with their responsibilities during an emergency, regardless of the type of event. Critique the drill, identify opportunities for improvement and modify the disaster plan accordingly. Maintain records of all drills and critiques. See Appendix 4 for the *Disaster Drill/Exercise Evaluation Tool for Child Care Centers/Child Care Homes*.
- ◆ During the orientation of new staff, train and familiarize them with their role in an emergency or disaster event. Ensure a system is in place for existing staff to periodically review their role in an emergency or disaster event. Utilizing tools such as an Emergency Procedure Flip Chart can provide staff with quick access to response activities that can serve as a just in time review during an event. See Appendix 5 for tips on creating an *Emergency Procedure Flip Chart*.
- ◆ Ensure that all staff members have a personal emergency plan that includes emergency provisions (stored in a backpack) at the center/home. In addition, they should have a family preparedness plan on how their own family will respond during a disaster, especially if they are unable to leave the child care center/child care home. Discuss the option of having family members of employees come to the center/home in the event of a disaster.
- ◆ Ensure all escape routes are designated. Teach children the evacuation procedures using developmentally appropriate language. Remember, during an emergency, staff and children will react exactly as they have been trained. Practice gives everyone confidence to know what to do. Teach older children how to contact local emergency services (e.g. call 911).
- ◆ Ensure the parent(s)/guardian(s) of all children are aware of the plans your child care center/child care home has for emergencies so they know how to contact staff and where to go to be reunited with their child. This information should be shared with parent(s)/guardian(s) during the initial registration process as well as annually. See Appendix 6 for a sample *Child Care Center/Child Care Home Emergency/Disaster Information Form for Parents/Guardians*.
- ◆ Consider either taking pictures of or have parents/guardians provide pictures of themselves as well as any alternate contact person during the initial registration process, as well as annually. Having pictures of any emergency contact listed for the child may assist with the reunification process during and after an incident.
- ◆ Prepare an Emergency Supplies Kit that can provide supplies for immediate needs as well as to sustain staff and children if sheltering in place is required for extended periods of time (e.g. 72 hours). All of these supplies should be portable so they can be moved quickly during a disaster, with some of the more immediately needed items kept in a “Go Bag” such as a back pack or duffle bag. Supplies could also be stored at a pre-identified off-site location. Developing a checklist can assist with organizing, maintaining and replenishing supplies to avoid having broken or expired supplies when they are needed most. See Appendix 7 for a sample *Emergency Supply Checklist for Child Care Centers/Child Care Homes*.

Monthly fire and tornado drills are required by the State of Illinois Licensing Standards for child care homes. Child care centers are required to conduct monthly fire drills and tornado drills two times per year. Records are kept of the dates and times required drills are conducted. These records must be maintained on file

- ◆ Encourage the families of children that attend your child care center/child care home to have a family preparedness plan. This should include a plan for an alternate person(s) who can pick up their child from child care center/ home if they are unable to leave their place of employment.

Response

Respond to emergency situations as rehearsed and according to your plan. Follow the advice and guidance of officials in charge of the incident. See the *Emergency Situations and Procedures/Response Recommendations* section of this document for more information.

NOTE:

Once everyone is out of danger after an incident involving the child care center/child care home, Illinois licensing standards requires you to call/contact your licensing representative and you should also contact the Child Care Resource and Referral (CCR & R) office that serves the county where your center/home is located. License-exempt child care providers may also contact their local CCR&R. See Appendix 17 for the Illinois CCR & R Agencies and Service Delivery Areas or visit <https://www.dhs.state.il.us/page.aspx?item=72101>

Recovery

How quickly recovery and restoration of operations occurs following an emergency or disaster has much to do with pre-emergency planning and establishment of support agreements and mitigation efforts to lessen vulnerability. Child care centers/child care homes should strive to return to normal as soon as possible following a disaster; this assists with the overall recovery of a community as well as helps children cope with the disaster. Consideration should be given to the following areas that will assist you in recovering after an event:

- ◆ A business continuity plan is an action plan that outlines the steps on how the center/home will continue to operate after an emergency or disaster that is severe enough to threaten or affect the center/home. Developing a business continuity plan before an event occurs can assist with such issues as covering repair expenses and staff salary and continuing to operate as a child care center/child care home.
- ◆ Have a backup system for your computer files to assist in getting back to business as usual. The backup system should be located at a site away from your main information system. Consider placing all back up files and all parent/guardian contact information on a flash drive for each child care attendee that can quickly be taken with during an evacuation. Having this information readily available may assist with the recovery process as well with reunifying children with their families immediately following the incident.
- ◆ Be familiar with the state requirements for provision of temporary child care and operating standards for child care centers/homes after a disaster.
- ◆ Conduct a damage assessment process as soon as possible with consideration given to the safety and security of those conducting the assessment. See Appendix 8 for a sample *Child Care Center Initial Rapid Damage Assessment Form*.
- ◆ Move to an alternate location until your child care center/child care home is safe for operation. Negotiate an agreement with another center/home to use their building in the event of a disaster. This could be arranged through a mutual aid agreement or memorandum of understanding (MOU).

- ◆ Offer to assist parents in temporary placement of children in other facilities until your center/home is able to reopen. Inform families of progress and time frame for restoration of operations. Contact the sites with whom mutual aid agreements or an MOU were established with during the planning phase to open up an alternate child care center during the recovery phase.
- ◆ Identify key equipment necessary for the safe operation of the child care center/child care home. Keep a list of vendors who can provide critical repair or replacement when needed.
- ◆ Compile damage estimates and a list of damaged goods and equipment. Prioritize repairs according to restoration needs. Maintain records of all damage related expenses.
- ◆ Notify insurance carriers, and contact emergency management agencies.
- ◆ Identify any disaster resource assistance that may be available to assist with recovery efforts (e.g. repairs). Your local health department, local emergency management agency, the Federal Emergency Management Agency (FEMA) and other community partners are valuable resources to help identify what assistance may be available.
- ◆ Provide anticipatory guidance to staff and families on the effects of traumatic events on children. Children respond differently than adults to the stress of an emergency or disaster event so it is important that staff is familiar with the normal stress response of children as well as the signs of ineffective coping. Seek out connections with mental health professionals who could be called upon to help children and families who are having difficulties coping during the disaster aftermath.
- ◆ Involve children and families in restoration activities where possible to provide closure to the disruptive event and return to normal activities.



Monitor staff for difficulty coping following a disaster. Provide staff with available resources such as counseling services that can assist them with coping after a disaster. Mental Health Consultants are available at the Child Care Resource and Referral (CCR & R) offices and may be available through health insurance companies as well. The Substance Abuse and Mental Health Services Administration (SAMHSA) has a national hotline dedicated to providing year round immediate crisis counseling for those who are experiencing distress related to a disaster event. The Disaster Distress Helpline (1-800-985-5990) is a toll-free, multilingual and confidential crisis support line that is available 24 hours a day. Additionally, Save the Children has a *Psychological First Aid* online training program for child practitioners (e.g. teachers, educators, child care staff, social workers). More information can be found for this program at: <http://resourcecentre.savethechildren.se/library/save-children-psychological-first-aid-training-manual-child-practitioners>.

In addition to the above considerations, it is crucial to establish a record-keeping process in your recovery and continuity planning, especially to assist with the financial aid or reimbursement process.

One final component in the recovery process is debriefing about the event. Debriefing can involve staff, parents, and directors and serves two purposes. It provides an opportunity for those involved in the event to share their experiences and aid in their personal recovery. In addition, it provides an avenue to identify lessons learned from the event, identify what parts of the plan worked and what did not, and develop an action plan to address those components of the plan that need to be changed. This brings the process full circle as you begin to implement mitigation strategies to correct the plan.

ROLES AND RESPONSIBILITIES WITHIN THE CHILD CARE CENTER/CHILD CARE HOME DURING DISASTERS

This section outlines the different roles and responsibilities that staff at child care centers/homes need to perform while planning for and responding to a disaster. For child care homes that may have fewer staff than larger child care centers, these roles/positions would need to be shared among the available staff.

Incident Command System

The Incident Command System (ICS) is a standardized, all-hazards approach to managing disasters that:

- ◆ Allows for the integration of facilities, equipment, personnel, procedures and communications to operate within a common organizational structure;
- ◆ Enables a coordinated response among various jurisdictions and functional agencies, including public and private;
- ◆ Establishes common processes for planning and managing resources;
- ◆ Is flexible and can be used for incidents of any type, scope and complexity;
- ◆ Is used by all levels of government as well as by many nongovernmental organizations and the private sector, and is applicable across disciplines.

ICS is extremely useful as it not only provides an organizational structure for incident management but it also guides the process for planning, building and adapting that structure. Using ICS for every incident or planned event helps hone and maintain skills needed for large-scale incidents.

It is recommended that you and your staff become familiar with the overall concepts of ICS, which will assist in interacting with emergency responders during a disaster or emergency event. The Federal Emergency Management Agency (FEMA) offers free online courses that are available to assist you and your staff in learning the Incident Command System. More information can be found at: <http://training.fema.gov/IS/crslist.aspx>. One of their courses focuses on child care center preparedness and is titled IS-36: Multi-hazard Planning for Childcare.

Within the Incident Command System, there are five main positions: Incident Commander, Operations, Planning, Logistics, and Finance. On the next page is a table that provides definitions of each of these five positions, examples of how the ICS positions may fit into a child care center and examples of duties each position may perform during an emergency/disaster event. For child care homes that may have fewer staff, these roles/positions would need to be assigned among the staff that are available.

Everyone has a Role in Disaster Planning and Response

The Child Care Provider or Director

- ◆ Conducts a hazard vulnerability analysis (HVA) and identifies potential disaster situations.
- ◆ Coordinates repairs of potential dangers identified during the HVA with building management and maintenance personnel.
- ◆ Develops (with the help of a planning team) the disaster plan in conjunction with local emergency management officials.
- ◆ Assures that staff and children are trained/prepared to respond.

- ◆ Assigns emergency responsibilities to staff members. (e.g., assign a specific person to maintain and transport pertinent files which include children's names and contact information, medical information, photos as well as employee emergency information in the event of an evacuation).
- ◆ Secures necessary training for staff members (CPR and First Aid).
- ◆ Conducts drills and initiates revisions to the disaster plan based on drill evaluations.
- ◆ Keeps parents and staff members informed of emergency plan revisions.
- ◆ Conducts periodic safety checks of the physical center/home, equipment and vehicles.

ICS Position	Definition	Examples of Child Care Staff Position	Examples of Response Duties
Incident Commander	Responsible for directing all of the child care center/child care home's emergency response actions	Director of Child Care Center	Directs and coordinates disaster operations Implements response and emergency plans Assigns positions as needed
Operations	Manages the direct response activities and assigns staff responsibilities as needed	Assistant Director of Child Care Center	Search and Rescue First Aid Child Care Child Release Security
Planning	Maintains documentation during the incident and evaluates the event	Director Assistant Director Lead Teacher	Communication Documentation
Logistics	Coordinates distribution of supplies to staff and addresses resource requests	Staff in leadership roles	Supplies and equipment Staffing
Finance	Tracks and maintains financial records including staff payroll and child care billing	Billing staff or administrative assistant	Documentation Apply for financial aid after event Insurance claims

The Child Care Center/Child Care Home Staff

- ◆ Participate in developing the disaster plan.
- ◆ Know and understand their role and responsibilities during an emergency situation.
- ◆ Participate in emergency preparedness training and drills.
- ◆ Assume responsibility for taking emergency supply packs with them in the event of an evacuation.
- ◆ Know locations of the main shut-off valve for water, main utility box for electricity and main gas valve.

Center/Home Maintenance Personnel (as applicable)

- ◆ Conduct periodic safety inspections of the center/home according to policy.
- ◆ Identify shut-off valves and switches for gas, oil, water and electricity.

- ◆ Shut off ventilating system in an emergency, as applicable (e.g., during chemical/toxin release incidents).
- ◆ Practice lock down procedures.

Center/Home Food Service Personnel (as applicable)

- ◆ Maintain a 72 hour stockpile of non-perishable food and water for emergency use.
- ◆ Ensure food stockpile addresses food allergies.
- ◆ Label stockpiled food/water with date stored and expiration dates. Replenish stocked supplies every six months.

Parents/Guardians

- ◆ Become familiar with the disaster plan and procedures, their responsibilities/role and the directions they need to follow.
- ◆ Volunteer to serve as a parent representative to assist child care center/child care home's director in developing the disaster plan.
- ◆ Provide child care center/child care home with emergency phone numbers and information regarding the length of time needed to pick up their child in the event of an emergency situation.
- ◆ Develop a family preparedness plan that includes:
 - ◇ Alternate contact person who can pick up their child in the event they are unable to leave their workplace during a disaster/emergency situation. Encourage parents/guardians to identify an alternate family member who does not live in the same household.
 - ◇ Keeping a current picture of the child with them (e.g. on their cell phone) that can assist with reunification
 - ◇ Teaching their child to know their full name and to know their parent/guardians' names (as appropriate)

DISASTER PLAN CONTENT

Plan Specifics

A standardized format should be used throughout the plan that clearly establishes how procedures will be carried out. Include a detailed description of evacuation, relocation, shelter-in-place, and lock down procedures as well as procedures for incidents such as bomb threats where having a standardized approach to the response is beneficial. Note that for some emergencies, there is a common response (e.g. the same evacuation procedure will work for fire or gas leak). Developing check lists within the plan can ensure that all steps are taken and nothing is forgotten during the response to a disaster.

Additional components that need to be addressed include:

- ◆ How the center/home is to be notified of an actual or impending disaster/ emergency by municipal/ government agency;
- ◆ A description of how building management will communicate a warning to occupants of the center/home;
- ◆ How and who can activate the disaster plan and all of its components;

- ◆ A list of responsibilities and assignments of staff during an emergency situation;
- ◆ Identify each of the following designated shelter areas;
 - ◇ Protective safe area(s) inside the center/home;
 - ◇ Shelter area outside the center/home;
 - ◇ Primary evacuation assembly site outside the center/home;
 - ◇ Secondary evacuation assembly site and/or relocation center off site from the center/home;
 - ◇ Identify how staff and children will get to each of the above identified areas;
- ◆ Plan for an emergency cellular phone and an alternate communication source (e.g. Walkie-Talkies, two-way radios) if ground telephone lines fail. Consider obtaining a National Oceanic Atmospheric Association (NOAA) weather receiver radio, particularly if in a rural area (see Resources section for more information);
- ◆ Process for notifying parents, the time frame required for them to pick up their children and the reunification process. Plan should address the need to obtain information from parents about their employer's Emergency Disaster Plan and the possibility that parents may be required to stay at work after the disaster.
 - ◇ Plan for extended hours of operation in the event that parents cannot pick up their children (a modified Sheltering-in-Place plan);
 - ◇ Plan for how to respond if the center/home needs to close and the parents or alternate identified emergency contact cannot be reached.
- ◆ The parent's role in providing the following information:
 - ◇ Emergency contact phone numbers;
 - ◇ Alternate pre-identified responsible adult to pick up their child if they are unavailable;
 - ◇ Out of state contact phone numbers for a pre-identified family member/friend; and
 - ◇ Frequency that this information is updated. See Appendix 9 for a sample *Contact/Release Information Form for Disasters*.
- ◆ A list of emergency phone numbers for staff and community emergency services and partners. Out of state emergency contact phone number(s) for the child care center/child care home that parents can utilize to access information regarding their child (may be used when cell phones don't operate).
- ◆ Develop and use forms that list the emergency contact information in the above bullets, who the child can be released to, and emergency identification cards for all children. See Appendix 10 for a sample *Child Identification Card*. The emergency contact information for staff should also be included. Keep all this information in a central location and update periodically. Incorporate into the disaster plan who will be responsible for ensuring information is kept current and taking the information with them in an emergency evacuation.

Plans should ensure that employees understand that they cannot leave the child care center/child care home to attend to their own families in the event of a disaster. Incorporate the need for all employees to develop their own family preparedness plans.

- ◆ For children with disabilities and /or chronic medical conditions, consider adopting and implementing the American Academy of Pediatrics *Emergency Information Form (EIF)* and include it with other emergency forms. This form provides a summary of the medical history and needs of children with special health care needs (CSHCN). See Appendix 11 for the EIF. Keep all this information in a central location and update periodically. Incorporate into the disaster plan who will be responsible for ensuring information is kept current and taking the information with them in an emergency evacuation.
- ◆ Note the locations of emergency communications equipment and student records on a disaster preparedness map.
- ◆ Identify how the “all clear” notification will be announced.
- ◆ Outline the process for implementing emergency and temporary child care services.
- ◆ Include the process for periodic review and how revisions to the plan will occur.

The State of Illinois Licensing Standards for child care homes and child care centers requires written plans for immediate evacuation in case of emergency. The evacuation plan shall identify the exits from each area used for child care and shall specify the evacuation route.

Communication Plan

When an emergency occurs, communication is the first step in implementing the child care disaster plan. A communication plan should be incorporated into the disaster plan and outline how you will communicate with staff members, attendees, parents/guardians, families of staff members, community members (e.g. law enforcement, other emergency services, public health department, CCR & R), your licensing representative, and the media.

Establish processes for both internal and external communication. The internal communication plan should include several ways to communicate information to staff, including automatic notification systems, telephone trees, e-mail, text messages, and meetings. Provide for alternative ways to communicate if primary systems fail or are unavailable. These may include cell phones (preferably with texting capabilities), portable 2-way radios, stationary radio equipment, and other available options. All staff members who have a leadership role in disaster management should be trained to use all communication devices that may be employed.

External communication procedures and protocols should outline how information will be conveyed to parents/guardians, emergency responders, licensing representatives and CCR & R. Examples of communication strategies include child care center website, social media site, automatic text or e-mail messaging system, automatic phone system, and the local media (e.g., TV and radio stations). It is particularly important to have several mechanisms in place for notification of parents/guardians when an emergency arises as well as a way to address rumors. These mechanisms must be tailored to address cultural differences and language barriers within the community.

Make sure families understand the child care center/child care home’s emergency communication protocols, including:

- ◆ When and how they may initiate contact so that they do not disrupt or endanger attendees or staff during a developing emergency;
- ◆ When and how they will be notified regarding the safe release of the children, so that they do not endanger themselves and others by attempting to take their children out of the center/home prematurely.

EMERGENCY SITUATIONS AND PROCEDURE/RESPONSE RECOMMENDATIONS

The director and staff of each child care center/child care home are considered responsible for the safety of children and will coordinate actions during an emergency event with the community's public safety officials, building managers, families of the children in their center/home, their CCR & R and licensing representative. If a child care center is located in a larger building which has its own disaster plan, the center's plan should be incorporated into the larger response plan. Emergency instructions and direction will be taken from the local emergency agency in charge of the event. The director of the child care center/child care home will oversee the situation at their center/home. The director should follow all requests from emergency personnel on scene, e.g., fire, law enforcement and EMS. In the director's absence, the assistant director or designee will oversee the emergency response.

The following section provides recommendations for responding to certain emergency situations. This is not meant to be an all-inclusive list but is a tool that can be utilized as child care centers/homes develop their emergency response procedures and build their disaster plans. Please see Appendix 12 for the *Child Care Center/Child Care Home Incident Response Reference Guide* that provides a basic overview of recommended response procedures.

Illness or Injury

The following information is a general response to injuries or illnesses that may present in the child care center/child care home. Staff members should evaluate each situation, and only intervene when their safety is not compromised.

Note: the Illinois State Licensing Standards for child care homes and child care centers requires that a person trained in CPR and First Aid be on site (in the home or child care center) whenever children are present.

- ◆ Staff should be aware of the locations of the first aid kits within the center/home.
 - ◆ The staff responsible for the child will employ first aid techniques as trained. This should only be done if the staff can do so safely. The child care center/child care home director should also be notified of any major illness or injury and Emergency Medical Services (EMS) should be activated by calling the local emergency services number (e.g. 911).
 - ◆ If the staff member is not trained in first aid techniques, they should contact the child care center/child care home director or designated staff that has been trained in the proper first aid techniques.
-
- ◆ If the child has fallen from a high place, do not move the child unless there is a life-threatening situation.
 - ◆ Post the 24 hour Illinois Poison Control contact information (1-800-222-1222) and website (www.Illinoispoisoncenter.org) where they are easily accessible to staff. If the child has consumed some type of potentially hazardous substance (e.g. medications, poisons, chemicals), the staff responsible for the particular child should contact Illinois Poison Control and EMS as indicated.
 - ◆ If medical attention is required immediately, the staff responsible for the child will have a fellow staff member contact local emergency medical services (EMS) (e.g. 911). If an Emergency Information Form (EIF) is available for the child, copy the form and provide to EMS when they arrive.
 - ◆ The director or designated staff member (preferably the staff member who is responsible for the child) will accompany the child during EMS transport to the hospital.
 - ◆ If the illness or injury does not require immediate medical attention but requires a doctor's care, the child

care center/child care home director or designated staff member will arrange for transportation to the emergency room, pediatric clinic, or hospital. This should be in accordance with the center/home policy and per the instructions of the parent or guardian.

- ◆ The director or designee will notify the parent or guardian of the situation and what care has been provided.
- ◆ The staff responsible for the child will document treatments and any action that took place due to the injury or illness.

Public Health Emergencies

Public health emergencies such as infectious disease outbreaks, should also be addressed in your child care center/child care home's disaster plan. Infants, young children, children with special health care needs and pregnant women are at greater risk to infectious diseases. Although there is no ability to completely prevent the spread of an outbreak, the following information should assist the response to a public health emergency:

- ◆ Ensure all attendees have the childhood immunizations required by the Illinois Department of Public Health as listed in the Illinois State Licensing Standards and encourage annual immunizations such as the influenza vaccine, for staff members.
- ◆ Establish a relationship with the local public health department to facilitate receiving updates on possible outbreaks as well as reporting any suspicious illnesses/trends from your center/home.
- ◆ Conduct training on infection control practices such as frequent cleaning of equipment and toys, hand washing, and respiratory hygiene/cough etiquette.
- ◆ Incorporate response procedures into your disaster plan:
 - ◇ Communicate with families and staff during outbreaks.
 - ◇ Define exclusion criteria when children should not attend child care.
 - ◇ Outline criteria when children can return to child care after an illness.



Missing or Abducted Child Care Attendee

The following outlines is a general response to a missing or abducted child.

- ◆ Anytime a child is unaccounted for, the staff member responsible for the child should search the premises. Each area that a child could potentially hide should be searched, as well as the outdoor areas of the center/home.
- ◆ The staff member should also double-check with other staff in case the child may be at another location (e.g. child was picked up by their parent or guardian).
- ◆ If the child is not located after all potential hiding spots and immediate outdoor areas have been searched, the director should be notified that the child is missing.
- ◆ Begin lock down procedures:
 - ◇ All exits should be monitored by employees.
 - ◇ No one should be let in or out of the child care center/child care home.

- ◆ The staff member responsible for the child will call law enforcement (e.g., 911), since he/she will be able to provide the best description of the child (e.g. what the child was wearing that day and other distinctive features).
- ◆ The following information should be documented:
 - ◇ Child's name, age, height, weight, date of birth, and hair color;
 - ◇ Child's clothing that he/she was wearing that day, along with any other identifying features;
 - ◇ The time at which the child was noticed missing;
 - ◇ If child abduction is suspected, were there any suspicious vehicles and/or persons located around the child care center/child care home? If so, describe the appearance of the person and/or vehicle.
- ◆ The director will notify the child's parent(s)/guardian(s) that the child is missing from the center/home.
- ◆ While awaiting the arrival of law enforcement, the staff of the child care center/child care home will continue to search for the missing child. The staff should look in every cabinet, closet, cubby, and other locations where a child may hide.
- ◆ The director will remain on the premises at all times and act as the contact person for law enforcement, as well as the missing child's parent(s)/guardian(s).
- ◆ The director will request that law enforcement activate an Amber Alert.

Short Term Safety Procedures

Depending on the nature of the emergency, there are three types of short term safety procedures: shelter-in-place, lock down, and evacuation.

Shelter-In-Place Procedures

When a threat creates hazardous conditions outside the center/home, child care attendees and staff may need to shelter-in-place. This may also need to occur if it is not safe or there is insufficient time to move to a designated assembly area or secondary relocation site. Shelter-in-place involves keeping children and staff in place inside the building and securing the center/home for the immediate emergency. Examples of such situations include tornados, community violence or a hazardous material spill.

- ◆ Bring children and staff to the pre-determined areas within the center/home. This area should be an interior room with the fewest windows or vents that has adequate space to accommodate attendees and staff.
- ◆ Close and lock all windows and doors.
- ◆ As applicable, shut off the building's air handling systems, gas, electric, water and other utilities.
- ◆ Gather disaster supplies and bring to the predetermined area, as applicable.
- ◆ As applicable, seal all cracks around the doors and any vents into the room with duct tape or plastic sheeting.
- ◆ Conduct a roll call to ensure everyone is present and accounted for in the area.
- ◆ Contact the center/home's off site emergency contact, inform them of the situation, and report the list of attendees and staff who are present.
- ◆ Listen for announcements from local officials via portable battery or hand-assisted radio and continue to shelter-in-place until told it is safe.

Lock-Down

The purpose of a lock down is to keep children and staff inside the building by securing them inside a classroom or other secure safe area due to an immediate threat inside the center/home. Lock-down procedures will be used in situations that may result in harm to persons inside the child care center/child care home, such as a shooting, hostage incident, intruder, trespassing, disturbance, or at the discretion of the director, designee or public safety personnel.

- ◆ The director or designee will notify local emergency services (e.g. 911) and initiate the lock-down procedure by announcing it over the public address system or other designated system. The alert may be made using a pre-selected code word/phrase so staff is aware that a lock down procedure has been initiated but the intruder is not alarmed. See Appendix 13 for a *Lock Down Procedure Reference Sheet*.
- ◆ In a lock-down situation, all children are kept in classrooms or other designated safe area locations, out of view and away from the danger.
- ◆ Staff members should put their cell phones and/or pagers on silent mode.
- ◆ Staff members are responsible for ensuring that all children are present and accounted for and that no one leaves the classroom or designated safe area locations.
- ◆ Maintenance personnel should secure building entrances, ensuring that no unauthorized individuals leave or enter the building.
- ◆ Staff and children remain in the classroom or other designated safe area, ensuring the doors are locked and if possible, turning off the lights and covering the windows. Encourage children to remain out of sight (e.g. get under desks, behind cabinets). If possible, engage in quiet story time activities with the children until “all clear” is announced.

During a lockdown, there may be an opportunity to evacuate some of the children.

The director or staff designee will notify the classroom to evacuate and specify the route to take out of the building and the designated area for assembly outside.

The importance of staff and children remaining calm cannot be over emphasized. Quick, silent evacuation is the goal.

Evacuation

Evacuation of a center/home involves moving children and staff out of the building that is affected by the emergency and relocating them to a safer area. There are three types:

- ◆ Onsite: Evacuation to a designated safe staging area on the site of the child care center/child care home such as evacuating to the playground during a fire.
- ◆ Offsite: Movement of children and staff off the premises of the child care center/child care home to a designated shelter or relocation area due to a threat (e.g. natural, terrorist or man made, or hazardous chemical release) to the children and center/home. Transportation will be needed for this type of evacuation.

- ◆ **Reverse evacuation:** Movement of children and staff back into the child care center/child care home due to a danger/emergency outside. An example of this is a suspicious or criminal act occurring nearby.

In the event of a fire, extreme weather, center/home emergency, bomb threat, or any other situation that results in the child care center/child care home needing to be evacuated, all staff should adhere to the following.

- ◆ The director or designee will call local emergency services (e.g. 911) and indicate the need for assistance. It may be beneficial to develop scripts to assist staff with the information needed when calling emergency services, especially during high risk, high stress situations (e.g. bomb threat).
- ◆ Evacuate all child care attendees and staff members to a designated safe area away from the building as quickly as possible.
- ◆ **Before** leaving the child care center/child care home, confirm attendance by conducting a **roll call** to ensure all children and staff members are accounted for. Bring attendance list along to the evacuation site. If possible, a staff member (secretary) should bring along child and staff records.
- ◆ During the evacuation, child care attendees and staff should adhere to predetermined evacuation routes as much as possible. However, staff should not hesitate to alter the designated route if determined to be unsafe.
- ◆ The staff will evacuate children as follows:
 - ◇ *Infants:* Place up to four infants in an evacuation crib, or place two infants in rescue packs carried over the shoulders of staff, or place infants in carriers to evacuate.
 - ◇ *Toddlers and Preschool:* Gather children in a group and supervise an orderly evacuation to the designated assembly area.
 - ◇ *Children with Special Needs:* These children will be assisted by specific staff members who have been trained in their role to evacuate children with special needs.
- ◆ Emergency disaster packs/backpacks are carried out by designated staff.
- ◆ Once child care attendees and staff report to the designated safe staging area, a **second roll call** should be conducted to ensure that everyone has exited the building safely.
- ◆ No person should return into the center/home until it is deemed safe by the proper authorities.
- ◆ If needed, child care attendees and staff should relocate to the secondary offsite location.
- ◆ The director or designee will carry the child care center/child care home's emergency cellular phone or other communication device to notify parents of the situation and the pick-up point for the children.
- ◆ See Appendix 14 for an *Emergency Evacuation Tool for Child Care Centers/Child Care Homes* that outlines evacuation sites as well as a list of staff responsibilities during an emergency. It also provides the opportunity to include location directions. The information in this Tool should be discussed with every staff member to help reduce confusion during an emergency. This information should be kept with the disaster plan and/or in a location that is easily accessed during an emergency/evacuation to assist with the response.

*During an evacuation,
under no circumstances
should staff stop for any of
their own or children's
personal belongings,
including jackets, shoes, etc.*

Fire

In case of a fire, follow the R.A.C.E. acronym.

- ◆ **R** = Rescue (Evacuate the area immediately);
- ◆ **A** = Alarm (Fire alarm should be pulled and local emergency services {e.g. 911} should be notified of fire location);
- ◆ **C** = Contain (Close doors and windows to contain the fire);
- ◆ **E** = Extinguish (Evaluate the situation to determine if staff should attempt to extinguish the fire);

Evaluate the situation:

- ◆ The location of the fire within the center/home;
- ◆ The size of the fire;
- ◆ The nature of the fire.

If the fire is small and is not located in a room where child care attendees are present, a fire extinguisher may be used to put out the fire. This should only be done if the staff responding to the fire has received the proper training. In addition, staff should not attempt to fight the fire if there is an imminent threat to their safety.

- ◆ A roll call of all child care attendees and staff should be taken to ensure that everyone is out of the building. If there is any threat to the children and staff at the designated evacuation site, an immediate evacuation to the alternate evacuation location is necessary.
- ◆ The child care center director or a designated person should go to a visible location to help direct the fire department to the center/home. Once the fire department arrives on scene, the director or designee should establish contact with the fire department official to discuss what information they need.
- ◆ When possible, all windows and doors in the center/home should be shut, and all electrical switches should be in the off position. This should be done while keeping in mind that both the children and staff need to be evacuated in the shortest time possible.
- ◆ The director or designee should make sure no child or staff member attempts to re-enter the center/home until cleared by the fire department.

Illinois State Licensing Standards for child care homes and child care centers requires that “in the event of a fire, the child care home shall be evacuated immediately and the children’s safety insured before calling the fire department or attempting to combat the fire.”

Life safety is the first priority. No matter how small or large the fire is, an evacuation should occur and local emergency services (e.g. 911) should be called.

Hazardous Chemical Spill

The following section contains general response guidelines to a hazardous chemical spill in the child care center/child care home. In general, the most dangerous chemicals located on the premises should be locked in a secure location. When handling chemicals, be sure to follow the instructions written on the product. Never mix products together.

- ◆ Evacuate the area immediately if a hazardous chemical is spilled.
- ◆ Do not turn any electrical switches ON or OFF when exiting the room. Eliminate all open flames.
- ◆ Evacuate to an area upwind and uphill from the location of the spill if possible.
- ◆ The child care center director or designee will contact local emergency services (e.g. 911) and notify them that there has been a “hazardous materials spill.”
- ◆ The child care center director will contact the maintenance personnel to request turning off the ventilation system to avoid further spread of the hazardous materials.
- ◆ No person should try to contain, touch, or identify the hazardous material.
- ◆ Staff should not attempt to rescue anyone who has passed out due to fumes given off by the hazardous materials spill. This could expose staff to the fumes, potentially incapacitating them as well.
- ◆ If any child or staff has come into contact with a hazardous material, the chemical should be washed off immediately with water.

Utilities and Maintenance Emergency

The following section is a general response to utility problems that may present themselves in the child care center/child care home.

When a utility failure has occurred, the decision to close the child care center/child care home or delay its opening will be based on the following factors:

Illinois State Licensing Standards for child care homes and child care centers requires maintaining the temperature of the center/home at 65°-75°F in the winter and 68°-82°F in the summer

- ◆ The amount of natural light in the center/home;
- ◆ The temperature in the center/home;
- ◆ The ability and necessity of heating food and formula;
- ◆ The risk to the health and well-being of children and staff.

Gas Leak

The following section outlines the general response to a gas leak:

- ◆ The children and staff should evacuate the building.
- ◆ Local emergency services (e.g. 911) should be notified that there is a possible gas leak at the child care center/child care home.
- ◆ The child care center director should be notified of the situation, and the director or designee will notify the rest of the staff.
- ◆ Do not turn ON or OFF any electrical switches.
- ◆ The center/home should not be entered by anyone until the fire department announces it is safe to return.

If anyone in the center/home smells gas, take action immediately! Pull the fire alarm and evacuate the building.

Electrical Power Failure

In the event of a power failure and the building has a back-up generator, the building's emergency generator should turn on automatically. Contact the electric company to notify them of the power failure.

If there is no backup generator:

- ◆ Access emergency lighting from your emergency supply cache (e.g. flashlights, lanterns).
- ◆ Contact the electric company.
- ◆ If there is danger of fire, evacuate the child care center/child care home.
- ◆ If an electrical short is suspected, turn off power at the main control point.

Water Main Break

In the event of a water main break:

- ◆ Call maintenance personnel and/or the water department.
- ◆ Shut off the valve at the primary control point.
- ◆ Access water from your emergency supply cache.

Contaminated Water Supply

Occasionally water supplies are contaminated or are suspected of being contaminated with microorganisms or chemicals due to a break in a water main or other damage to the distribution system. Discontinue the use of tap water, ice machines, drinking fountains and any other water equipment to prevent ingestion. Label all water sources with a sign reading, "Do not drink" and begin using bottled water.

NOTE:

If water is suspected of being contaminated, do not boil water for infants! Use bottled water from an approved source for all infant feeding and drinking needs. Bottled water may be needed to care for children with special health care needs as well.

The following advisories/notifications may be used during an incident that leads to contaminated water:

- ◆ Boil water advisory/notice: water can be used for drinking only if it is boiled or disinfected with chlorine prior to consumption.
- ◆ Do not consume: water should not be consumed.

Extreme Weather

Consider investing in a National Oceanic and Atmospheric Administration (NOAA) weather receiver radio. The radio is particularly important for facilities in rural areas where there may not be siren alerts for approaching storms or tornados (especially at night).

General Extreme Weather Planning Considerations:

Child care center/child care home staff should follow these general guidelines during weather emergencies:

- ◇ The child care center/child care home director or designee will monitor radio, television, or NOAA weather radio for weather updates.
- ◇ The child care center/child care home director or designee will advise all staff of the weather conditions that are approaching.
- ◇ When extreme weather is approaching, check the status of:
 - Battery powered radios,
 - Flashlights,
 - Back-up lighting and power,
 - Heat,
 - Cell phones.
- ◇ Consider pre-storm closing (night before) or early closing depending on conditions.
- ◇ Release non-essential staff in accordance with child care center/child care home closing procedures.
- ◇ Identify services for snow and ice removal as well as possible debris removal such as fallen trees and utility lines.
- ◇ Staff should maintain voice contact at all times, and all staff members should have flashlights and emergency packs/backpacks available.
- ◇ Take a roll call before moving to the safe place, after arriving at the safe place, and finally, after leaving the designated safe place.
- ◇ Once the storm has passed and there is no more danger to the children and staff, the following steps should be taken.
 - If any medical attention is required, first aid should be administered. If the situation warrants, contact local emergency services (e.g. 911) for medical assistance.
 - The staff should once again do a roll call to ensure that all child care attendees and staff members are safe.

- Staff needs to assess the center/home for any damage created by the extreme weather, such as fire, water, or structural damage. This includes testing utilities to ensure they are functioning appropriately. Report any damage according to the Emergency Preparedness Plan for Recovery. See Appendix 8 for a sample *Child Care Center/Child Care Home Initial Rapid Damage Assessment Form*.
- Contact any vendors that provide services if problems occur as a result of the extreme weather.

Specific Weather Situations

In addition to the above general guidelines, the following are recommendations for specific inclement weather emergencies.

Severe Thunderstorm Watch

- ◇ Outdoor activities should be modified to ensure that quick access to safe areas and shelter is available.

Severe Thunderstorm Warning

- ◇ All outdoor activities should be terminated and shelter should be taken.
- ◇ The child care center/child care home director or designee will monitor sky conditions as best and safely as possible. If a dark/funnel-shaped cloud is seen, seek shelter immediately. If possible, call local emergency services (e.g. 911) to report it.

Tornado Watch

- ◇ Outdoor activities should be modified to ensure that quick access to shelter is available.
- ◇ Upon the approach of thunderstorms, cease all outdoor activities that may delay seeking shelter.
- ◇ The child care center/child care home director or designee will monitor sky conditions as best and safely as possible. If a dark/funnel-shaped cloud is seen, seek shelter immediately. If possible, call local emergency services (e.g. 911) to report it.

Tornado Warning

In addition to the above tornado watch guidelines:

- ◇ If time permits and it can be done safely, the child care center/child care home director or designee will turn off all utilities.
- ◇ The director or designee will have all staff and child care attendees move to their designated safe area locations.

Flash Flood

- ◇ The child care center/child care home director or designee will move records and valuable equipment to higher floors. Chemicals that are in the child care center/child care home should be stored in locations where floodwaters will not come into contact with them.
- ◇ The child care center/child care home director or designee will make transportation preparations to move children and staff in the event that an evacuation is needed.
- ◇ If evacuation is necessary and time permits, staff members or employees will unplug all electrical appliances. If time permits, move all loose and unsecured outdoor equipment to an indoor location.

Blizzard/Snow/Ice

- ◇ Outdoor activities should be modified to ensure that quick access to shelter is available in the case of hazardous conditions.

- ◇ If evacuation is necessary, the child care center/child care home director or designee will ensure that proper transportation has been arranged to move the children and staff to the designated safe area. This area can be the same as the flash flood location.

Radiological Emergencies due to Nuclear Power Plant Incidents

The Nuclear Regulatory Commission requires that each nuclear power plant have specially-developed offsite emergency response plans for the areas within ten miles of the plant (referred to as the Emergency Planning Zone). The plans are maintained by county and local emergency management agencies (EMA).

If your child care center/child care home is within ten miles of a nuclear power plant, contact your local EMA office to ensure that your child care center/child care home's disaster plan fits into the larger plans that are maintained for the entire Emergency Planning Zone around the plant.

In addition, many types of hazardous substances including radioactive materials are shipped daily across the state on highways and railways. Municipal EMAs and fire departments maintain information concerning extreme hazardous and radioactive materials that are stored, used, or manufactured in the area. Contact these groups when developing your disaster plans to ensure activities will be coordinated in the event of an emergency.

Warning

A warning of a hazardous or radioactive materials incident is usually received from local fire or law enforcement or the EMA when such an incident occurs close to or on a center/home's property.

Response

- ◇ Determine with the assistance of the local EMA and fire department, whether it is safer to shelter in place or to evacuate the child care center/child care home.
- ◇ If it's necessary to evacuate the area, follow your evacuation procedures.
- ◇ Move upwind and never directly into or against the wind which may be carrying fumes.
- ◇ Upon reaching a point of safety take a roll call.
- ◇ Staff must not return until the emergency services personnel have declared the area to be safe.

Potentially Violent Situations

Potentially violent events such as a hostage situation, disgruntled person, active shooter, community violence, unstable custody disputes, or other physical or verbal threats may occur at or near a child care center/child care home and require lock down procedures or selective/partial evacuation procedures. The premise behind a selective/partial evacuation is to evacuate a small area in order to remove large numbers of children and staff from harm's way when an individual is on-site who is potentially violent.

Violent Intruder

- ◇ Immediately call law enforcement (e.g. 911) and notify security.
- ◇ Alert security and center/home director that you may have a condition for selective/partial evacuation (this may be within the building if the potentially violent person does not leave the area).
- ◇ If you have any reason to believe the individual has a weapon, order a selective/partial evacuation, if possible.

- ◇ If the intruder chooses to leave the premises, allow them the freedom to exit making sure to note their vehicle make and model, license plate, and the direction of their travel. Communicate this immediately to the emergency services (e.g. 911) dispatcher.
- ◇ Try to isolate the intruder away from as many adults and children as possible. Seek to draw the individual(s) to an office, break room, conference room, or other less populated area. If the individual has entered a classroom, seek to draw him/her into the least utilized portion of the room.
- ◇ Remain calm and be polite.
- ◇ Do not physically restrain or block their movement.
- ◇ While you are engaging the potentially violent intruder, other available persons should direct unaffected classrooms to move to locations in the center/home that are farthest from the incident point. This selective/partial evacuation should precede room-by-room and as orderly and quietly as possible, being careful to use routes not visible to the intruder.
- ◇ Once law enforcement arrives, they will assume charge of the situation, negotiate and dictate further movements.
- ◇ If a decision is made to relocate to the alternate site while negotiations continue, follow the appropriate evacuation procedures.

If an intruder leaves with a child or staff member, it is oftentimes better to let them leave rather than prompt a confrontation that would increase the risk of injury

Active Shooter

An active shooter is defined as an individual actively engaged in killing or attempting to kill people in a confined and populated area. In most cases, there is no pattern or method to their selection of victims. Active shooters can include unstable persons, and may be unknown to the child care center/child care home, known to a child or staff member of the center/home (e.g. parent/guardian of a child, or spouse to an employee), an armed criminal, or in rare cases domestic or international terrorists. Staff must be aware of their surroundings and be prepared to respond appropriately and effectively if they ever find themselves in such a situation in order to protect the children in the center and themselves. Active shooter situations seem to be unpredictable and the event often evolves quickly. However, there may be signs that staff can be aware of to potentially prevent an attack. Examples of behaviors that staff should look out for include suspicious people watching a child care center/child care home or taking photographs, or strange calls and unusual behavior by staff, parents/guardians or visitors. Staff should report this information as soon as it is identified.

There are three basic steps to survival during an active shooter incident: “Run, Hide, Fight.”

- “Run” - If you are able to escape, evacuate yourself and children to safety and then contact law enforcement (e.g. 911).
- “Hide” - If you and the children are not able to evacuate, use a modified lockdown procedure by hiding, keeping the children as calm and quiet as possible to try to avoid detection.
- “Fight” - As a last resort, in order to protect yourself and the children, fight the shooter with aggression and improvised weapons (e.g. anything you can throw at the shooter such as books, fire extinguisher, canned goods, etc.)

Child care center/child care home staff should be aware of what to expect and how to respond once law enforcement arrives on scene. Conducting regular drills will provide staff with the training they need to know should an active shooter incident occur at your child care center/child care home.

Hostage Situations

A child care center/child care home may be subject to hostage situations from disgruntled employees, parents/guardians, or terrorists. Important tips to remember if you are held hostage:

- Remain calm.
- Remain polite.
- Follow the hostage taker(s) instructions.
- Do not resist.
- If it is safe to do so, alert staff members and contact local emergency services (e.g. 911).

If a hostage situation is occurring at the center/home and you are not in the immediate area:

- Activate lock down procedures (see Lock Down Procedures section).
- Staff should place phones and/or pagers on silent mode.
- Contact local emergency services (e.g. 911).
- Provide as much information as possible to law enforcement when they arrive.
- DO NOT PUT YOURSELF IN DANGER.
- Do not attempt a rescue.

Physical and Verbal Threats

The following information is a general response to physical threats that may present in the child care center/child care home. This includes threats that come from outside the child care center/child care home, such as community violence, as well as inside the center/home. In every situation, the child care center/child care home director and staff members should evaluate the situation, and only address the threat when their safety is not compromised. If any person in the child care center/child care home does not feel safe in the situation, local emergency services (e.g. 911) should be contacted, provided it can be done in a safe manner.

- ◇ All physical threats made inside or outside the child care center/child care home should be taken seriously.
- ◇ Report and document any physical threats directed towards the children or staff members to the child care center/child care home director.
- ◇ If the physical threat comes from within the center/home, the child care center director notifies law enforcement of the incident and communicates with the staff members involved in the incident.
- ◇ Staff members involved in the altercation should be separated. Appropriate administrative actions should be taken to insure the safety and well-being of the children.
- ◇ If the physical threat comes from outside the center/home, the child care center/child care home

director is notified of the incident. The child care center/child care home director will notify law enforcement of the incident.

- ◇ Regardless of whether the physical threat comes from outside or inside the child care center/child care home, the child care attendees should be removed safely from the area in which the altercation is taking place (selective/partial evacuation), and should return only after the situation has been resolved.
- ◇ All verbal threats will be treated the same way as physical threats.

Bomb Threats

Any bomb threat should be taken seriously and treated as a real situation until proven otherwise.

- ◇ Any suspicious packages or letters should be reported to authorities.
- ◇ **Evacuation should be out of the child care center/child care home and to another location as far from the center/home as possible.** The area that is being evacuated should be searched quickly for information that may be important for the responding law enforcement.
- ◇ Upon arrival of the law enforcement response team, the child care center/child care home director or designee will assist with any questions that the law enforcement response team may have.
- ◇ **No person should enter the center/home** until the law enforcement response team has been consulted and the situation has been resolved.
- ◇ Use landline telephones only. Turn all cell phones off and do not use them until the situation has been resolved.

Telephone Threat:

The staff member taking the call should notify another staff member that a bomb threat is in progress so that:

- ◇ The building may be evacuated immediately.
- ◇ The child care center director or designee will contact local law enforcement (e.g. 911).

When a bomb threat is received, it is important to gather as much information as possible from the caller. See the following chart for some helpful tips on how to respond if a threat should occur. See Appendix 15 for a sample *Bomb Threat Information Form for Child Care Centers/Child Care Homes*.

Keep the caller on the line as long as possible.

Record information as quickly and accurately as possible.

Obtain the following information:

- The time the call was received
- The caller's exact words
- A description of the caller's voice

Ask the following questions:

- Where is the bomb located?
- When is the bomb set to go off?

Written Threat

- ◇ The staff member that receives the written threat should handle the letter as little as possible, and should save all materials that were contained in the letter. All materials involved in the threat should be turned over to local law enforcement authorities.
- ◇ Local law enforcement should be contacted.
- ◇ The child care center director or designee should be notified of the letter.
- ◇ The building should be evacuated until it is determined that there is no longer any danger.
- ◇ No person should enter the child care center/child care home until authorized by the law enforcement response team.

Within your child care center/child care home's disaster plan, it is important to provide details of the response actions, including the Bomb Threat Information Form so staff can become familiar with the procedures. Ensure staff have quick access to it to assist them should a threat be received (e.g. have a list of tips on how to respond to a bomb threat near all the phones).

Terrorism

The National Terrorism Advisory System (NTAS) is a system used to effectively communicate information with the public about terrorist threats by providing timely, detailed information to the public, government agencies, first responders, airports and other transportation hubs, and the private sector. See Appendix 16 for more information about NTAS.

Americans all share responsibility for the nation's security, and should always be aware of the heightened risk of terrorist attack in the United States and what they should do. Be vigilant, constantly on the lookout for unusual persons or activities such as:

- ◆ Unusual unsolicited deliveries;
- ◆ Suspicious items left around the outside of the child care center/child care home;
- ◆ Individuals "hanging around" for no apparent reason.

Enforce child care center/child care home security. Restrict visitors to only public areas. Ensure that all visitors are identified and appropriately cleared before they enter the center/home.

Bear in mind that criminals/terrorists may have multiple attacks planned. They may use an explosion to get you to force an evacuation and then wait to take children hostage once they are outside. Assess the area to be sure it is safe before evacuating. This is why details of a child care center/child care home's disaster plans should only be shared with those who need to know (e.g. staff, parents/guardians, local EMA and other emergency medical services).

Weapons of Mass Destruction (WMD)

The following section gives a general response to a Weapons of Mass Destruction (WMD) incident. Since this is a worst-case scenario for a child care center/child care home and the community as a whole, the safety of children and staff should be the major concern.

- ◆ If there is reason to suspect that a WMD event has originated in or near your child care center/child care home, call local emergency services (e.g. 911).
- ◆ If the child care center/child care home needs to respond to a WMD event, the child care center/child care home director or designee should monitor the battery-powered radio for updates.

◆ **IF THE SITUATION CALLS FOR SHELTERING-IN-PLACE, TAKE THE FOLLOWING STEPS:**

- ◇ Staff will close and lock all windows and doors.
- ◇ Seal all windows, doors and vents with plastic sheeting and duct tape.
- ◇ The child care center/child care home director or designee will turn off the heating, ventilation, and air conditioning system.
- ◇ The child care attendees and staff should move to a designated interior room with an attached bathroom, if possible. A roll call should be completed to ensure everyone is accounted for.
- ◇ Be sure emergency supplies are available in the designated shelter-in-place area. If not, a staff member should be assigned to locate and bring emergency supply pack/backpacks with them into the shelter.
- ◇ Once all child care attendees and staff have been accounted for, the child care center/child care home director or designee should tape the door to create a better seal.
- ◇ The child care center/child care home director or designee should continue to monitor the battery-powered radio for information updates, including the possible order for evacuation.

◆ **IF THE SITUATION CALLS FOR EVACUATION OF THE CENTER/HOME, TAKE THE FOLLOWING STEPS:**

- ◇ The child care center/child care home director or designee will monitor the battery-powered radio for directions on where to relocate and the proper routes to take.
- ◇ Transportation arrangements should be made by the local emergency agency.
- ◇ Until the center/home is ready to be evacuated, staff will keep all doors and windows shut and locked.
- ◇ Staff will follow all their center/home's general evacuation procedures.

The center/home director or designee should carry the emergency cellular phone (if available) to contact parents/guardians with the status of the situation and where their children are being transported (if it is different from the normal evacuation site).

REUNITING CHILDREN WITH PARENT(S)/GUARDIAN(S)

During a disaster, children are at high risk for maltreatment, abduction and abuse if separated from their families. In order to protect the children in their care, child care centers/homes should have plans and processes in place to identify how they will reunify children with parents/guardians. Ideally, if there is advance warning about the event, attempts should be made to reunite children with their families before the event occurs. Below are steps that child care centers/homes can take before, during and after a disaster to address reunification needs of children in their centers:

Before a Disaster:

- ◆ Ensure there are multiple phone numbers for family members including home, cell and work phone numbers for parents/guardians and others to whom the child can be released.
- ◆ Ensure parents/guardians have designated in writing the relatives and/or friends to whom children can be

released after a disaster, including one or more individuals residing outside the area.

- ◆ Inform parents/guardians in advance where the children will be taken if an evacuation is required.
- ◆ Ensure there is a phone number of a family member or trusted friend out of the area such as a grandparent or other relative who can be contacted to locate the parents/guardians.
- ◆ Establish an emergency number for the child care center/child care home outside the area that parents/guardians can contact to learn where their child or children have been relocated.
- ◆ Take and maintain a current digital photo of each child enrolled in the child care center/child care home that can be posted to aid in reunification; with the parents'/guardians' permission, email a copy of the photo files to a location outside the area for use in reuniting children with their parents/guardians during a disaster.
- ◆ Become familiar with national and local registries that are in place to assist with family reunification during a disaster:
 - ◇ FEMA's National Emergency Family Registry and Locator System (NEFRLS): <https://www.fema.gov/public-assistance-local-state-tribal-and-non-profit/recovery-directorate/national-emergency-family>
 - ◇ National Missing and Exploited Children's National Emergency Child Locator Center (NECLC) and Unaccompanied Minor Registry: <http://www.missingkids.com/DisasterResponse>
 - ◇ The American Red Cross' Safe and Well Program: <https://safeandwell.communityos.org/cms/index.safe.php>

During a Disaster:

- ◆ Place an identification bracelet on each child or pin information on each child (e.g. to the back of their shirt) that will help reunite the child with his or her parents/guardians or other trusted individuals.
- ◆ Assign an individual (staff member or assistant) and a backup person to be responsible for each child's safety during the event.
- ◆ Release children only to individuals the parents/guardians have designated as approved to take the child from the child care center; require such individuals to show photo identification before releasing a child to them.
- ◆ Keep parents/guardians informed when children are evacuated from the child care center/child care home.

After a Disaster:

After an incident has occurred, it may not be possible to locate a child's parent/guardian or other designated trusted individuals. The child care center/child care home will need to keep the child safe until reunified. Child care centers/homes should contact the local emergency management office, the state child care licensing office and National Emergency Child Locator Center (NECLC) operated by the National Center for Missing & Exploited Children (NCMEC). If possible, provide requested information such as a photo of the child and parent/guardian information. If no one has been located to release the child to and the center is no longer able to provide care for the child, follow local protocols and contact the appropriate state agency for guidance.

CHILDREN WITH SPECIAL HEALTH CARE NEEDS

Child care centers/homes may have children with disabilities or chronic medical conditions. Considerations for these children should be included in all disaster plans and procedures. Examples of special considerations include:

- ◆ Ensure the emergency supply cache has equipment, food, medications and other items the child(ren) may need during a shelter-in-place event. Evaluate the food cache list for any conflicts with child(ren)'s allergies.
- ◆ Ensure additional equipment that may be needed is available to safely transport the child(ren) to a secondary location (e.g. special car seat, wheelchair van) during an evacuation.
- ◆ Discuss with local emergency responders what additional assistance may be needed during an evacuation, including any child that is dependent on technological devices (e.g. ventilator) and will need assistance soon after an event occurs.
- ◆ Ensure the Emergency Information Form is up to date and included with other important documents during an evacuation.
- ◆ During and after an event, ensure age/developmentally appropriate language is used when providing care, comfort and addressing the mental health needs of the child.

CONCLUSION

Most children under the age of five that spend their daytime hours away from their parents do so in a child care center/child care home. It is vital that every child care center/child care home take steps to ensure the safety of these children and be prepared to meet their needs should a disaster occur. Comprehensive written disaster plans that outline the policies and procedures that child care staff will follow during a disaster will assist centers/homes with meeting the needs of children and staff during an emergency incident.

RESOURCES

- ♦ **American Academy of Pediatrics (AAP)**
Family Readiness Kit <http://www2.aap.org/family/frk/aapfrkfull.pdf>
- ♦ **American Red Cross**
See phone directory or www.redcross.org/where/where.html to find contact information for your local chapter.
Preparedness information including helping children prepare for/cope with disaster. <http://www.redcross.org/prepare/location/home-family/children>
- ♦ **Children's National Medical Center**
The Handbook of Frequently Asked Questions Following Traumatic Events: Violence, Disaster, or Terrorism-.
<http://childrensnational.org/~media/cnhs-site/files/resources/ichoc/handbook.ashx?la=en>
- ♦ **Department of Homeland Security**
30 Tips for Emergency Preparedness for the Family
<http://www.ala.org/advocacy/sites/ala.org/advocacy/files/content/advleg/federallegislation/govinfo/disasterpreparedness/Resolve06Tips.pdf>
- ♦ **Federal Emergency Management Agency (FEMA) www.fema.gov**
How to prepare for specific types of emergencies: <http://www.fema.gov/plan-prepare-mitigate>
Resources for kids <http://www.ready.gov/kids>
Are You Ready <http://www.ready.gov/are-you-ready-guide>
- ♦ **Illinois Child Care Resource Center, <http://ccrs.illinois.edu/providers/licensing.html>**
- ♦ **Illinois Department of Children and Family Services (DCFS), <http://www.illinois.gov/dcfs/Pages/default.aspx>**
- ♦ **Illinois Department of Human Services, For Child Care Providers, <https://www.dhs.state.il.us/page.aspx?item=31068>**
- ♦ **Illinois Department of Emergency Management (IEMA)**
For Illinois preparedness information <http://www.illinois.gov/ready>
- ♦ **Institute for Business and Home Safety**
For information on insurance and recovery www.ibhs.org
- ♦ **National Association of Child Care Centers Resource and Referral Association. <http://www.naccrra.org/>**
- ♦ **National Child Care Information Center, U S Department of Health and Human Services, and Administration for Children and Families:**
Emergency Preparedness for Child Care Programs. Information about child care issues and planning guides for Child Care Centers. <http://www.acf.hhs.gov/programs/occ>
- ♦ **Save the Children**
Psychological First Aid Training Manual for Child Practitioners <http://resourcecentre.savethechildren.se/library/save-children-psychological-first-aid-training-manual-child-practitioners>

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APPENDICES

The following is a list of the appendices found in this document. These tools, forms and cards are also available on the Illinois EMSC website (www.luhhs.org/emsc) and can be downloaded and used in your child care center/child care home planning. Some of these forms are available in a fillable format.

- ♦ **Appendix 1: Child Care Center/Child Care Home Hazard Vulnerability Assessment Tool**
- ♦ **Appendix 2: MOU Template for Child Care Centers/Child Care Homes**
- ♦ **Appendix 3: Child Care Center/Child Care Home Yearly Record of Disaster Drills**
- ♦ **Appendix 4: Disaster Drills/Exercise Evaluation Tool for Child Care Centers/Child Care Homes**
- ♦ **Appendix 5: Creating an Emergency Procedure Flip Chart**
- ♦ **Appendix 6: Child Care Center/Child Care Home Emergency/Disaster Information Form for Parents/Guardians**
- ♦ **Appendix 7: Emergency Supply Checklist for Child Care Centers & Child Care Homes**
- ♦ **Appendix 8: Child Care Center/Child Care Homes Initial Rapid Damage Assessment**
- ♦ **Appendix 9: Contact/Release Information Form for Disasters**
- ♦ **Appendix 10: Child Identification Card**
- ♦ **Appendix 11: Emergency Information Form for Children with Special Needs**
- ♦ **Appendix 12: Child Care Center/Child Care Home Incident Response Reference Guide**
- ♦ **Appendix 13: Lock Down Procedure Reference Sheet**
- ♦ **Appendix 14: Emergency Evacuation Tool for Child Care Centers/Child Care Homes**
- ♦ **Appendix 15: Bomb Threat Information Form for Child Care Centers/Child Care Homes**
- ♦ **Appendix 16: Department of Homeland Security National Terrorism Advisory System: Recommendations for Child Care Centers/Child Care Homes**
- ♦ **Appendix 17: Illinois Child Care Resource and Referral (CCR & R) Agencies: Service Delivery Area**

Appendix 1: Child Care Center/Child Care Home Hazard Vulnerability Assessment Tool

Overall Assessment Questions:

What types of hazards exist within my building (e.g., heavy furniture that could topple, blocked exits, ordinary glass in windows, etc.) and what could be the consequences?

What types of hazards exist outside my building (e.g., rivers or ponds, open wells, power lines, gas pipelines, dead trees, etc.) and what could be the consequences?

What types of hazards exist in my neighborhood (e.g., rivers and ponds, chemical plants, highways, and/or railways where chemicals are transported, flood plain, power lines, gas pipelines, etc.) and what could be the consequences?

What type of weather extremes may occur in my region (e.g., blizzards, ice storms, high winds, tornadoes, earthquakes, flooding, etc.) and what could be the consequences?

What health issues do my staff/children have (e.g., asthma, diabetes, allergic reactions, limitations in mobility, etc.) and what could be the consequences?

What type of hazards may occur in child care settings (e.g., missing children, intruders, etc.) and what could be the consequences?

Internal Assessment Checklist

Mitigation Activity	Assessment Date
Are fire extinguishers properly charged, mounted securely, within easy reach?	
Do staff and volunteers know how to use the fire extinguishers properly?	
Are exits clear from obstructions such as locked doors, storage, or possible obstructions such as large nearby objects (e.g. bookcases, filing cabinets) that could fall and block the exit?	
Is a generator needed for back-up power? (A licensed electrician must install a generator).	
Are at least two individuals trained to start and operate the generator?	
Are appliances, cabinets, and shelves attached to the wall with wire or braced by being anchored together?	
Are heavy or sharp items stored on shelves with ledge barriers?	
Are blocks and heavy objects stored on the lowest shelves?	
Are television sets, fish bowls, and similar items restrained so they won't slide?	
Are pictures and other wall hangings attached to the wall with wire and closed screw-eyes?	
Are cribs located away from the tops of stairs and other places where rolling could endanger them or where heavy objects could fall on them?	
Are blackboards and bulletin boards securely mounted to the wall or hung safely from the ceiling?	
Are light weight panels, rather than shelving units or other tall furnishings, used to divide rooms?	
Are large window panes made of shatter resistant glass or covered with safety film?	
Is the street number of the home/building clearly and legibly visible from the roadway?	
In larger centers, is each internal/external door numbered or lettered for identification?	
Do florescent lights have transparent sleeves to keep broken glass pieces from scattering?	
Are emergency lights in place and are exits clearly marked?	
Are there sign-in and sign-out procedures for everyone entering the building?	
Does the emergency shut off for the water supply and electric service supply have a sign placed next to the control that identifies it as the primary disconnecting/shutoff means?	
Is staff aware of where the emergency shut-offs are, how to operate them, what tools are needed and how to quickly access them?	
Are the building's area(s) of refuge, shelter-in-place locations and evacuation assembly areas marked on your posted floor plan?	
Have savings been set aside in case of a disaster to help financially with reopening the business?	

Appendix 2: MOU Template for Child Care Centers/Child Care Homes

Introduction:

- This agreement will define the relationship, responsibilities, and obligations between the _____ (insert child care center/child care home name) and the _____ (insert company/agency/facility name that agreement is being made with)
- The purpose of this MOU is to ensure that, in the event of a natural or human-generated disaster that calls for evacuation, the staff and children in the care of the _____ (insert child care center/child care home name) may be efficiently evacuated from the _____ (insert child care center/child care home location) site and transported to safety.

Authorities:

- The _____ (insert child care center/child care home name) (hereinafter referred to as “_____ {insert abbreviated child care center/child care home name, if applicable}”) serves the child care needs of _____ (insert age range/demographic information for attendees).
- The _____ (insert company/agency/facility name that agreement is being made with) (hereinafter referred to as “_____ {insert abbreviated company/agency/facility name that agreement is being made with, if applicable}”) works to plan, develop, build, and operate _____ (insert type of service this company provides) system in the _____ (insert city/town name) area.

Areas of Cooperation Under the Terms of the Agreement:

- _____ (insert company/agency/facility name that agreement is being made with) agrees to provide _____ (insert type of service) for _____ (insert child care center/child care home name) staff and children in the event of an evacuation. The management further agrees to provide _____ (insert additional services).
- _____ (insert child care center/child care home name) agrees to maintain responsibility for the presence and well-being of _____ (insert child care center/child care home name) staff and children. _____ (insert child care center/child care home name) will maintain roll sheets and assemble staff and children for transport. Further, _____ (insert child care center/child care home name) agrees to _____ (insert additional responsibilities).
- _____ (insert company/agency/facility name that agreement is being made with) and _____ (insert child care center/child care home name) agree to mutually determine a list of potential _____ (insert additional responsibilities and agreements).

Insurance and Indemnification:

- Each participating organization will maintain independent/individual insurance coverage.
- _____ (insert company/agency/facility name that agreement is being made with) will insure _____ (insert coverage and responsibilities)
- _____ (insert child care center/child care home name) will be responsible for _____ (insert coverage and responsibilities).

Periodic Review of this Agreement:

- _____ (Insert how the progress of the terms of this MOU will be monitored)
- _____ (Insert how often the review of this MOU will occur)

Terms of Enforcement:

- This agreement shall become effective upon the execution by authorized individuals of both organizations. It shall continue with or without subsequent modification until it is terminated.
- Modification shall be by the same means as original execution.

Signature of company/agency/facility that agreement is being made with

Date

Signature of director from child care center/child care home

Date

Appendix 3: Child Care Center/Child Care Home Yearly Record of Disaster Drills

DRILL	YEAR: _____											
	J	F	M	A	M	J	J	A	S	O	N	D
	A	E	A	P	A	U	U	U	E	C	O	E
	N	B	R	R	Y	N	L	G	P	T	V	C
FIRE												
Date:												
Time:												
Time Needed to Evacuate Building												
Alarm Signal Used												
Roll Call Completed After Evacuation												
Fire Drill Observations Completed/Filed												
OTHER (Rotate practicing evacuation, lockdown etc.)												
Type:												
Date:												
Time:												
Alarm Signal Used												
Drill Observations Completed/ Filed												
OTHER (Rotate practicing evacuation, lockdown etc.)												
Type:												
Date:												
Time:												
Alarm Signal Used												
Drill Observations Completed/ Filed												

Child Care Center/Child Care Home Name: _____

Signature of Director: _____ Date: _____

Appendix 4: Disaster Drill/Exercise Evaluation Tool for Child Care Centers/Child Care Homes

Name of Child Care Center/Child Care Home: _____

Date of Drill: _____ Time of Drill: _____ Type of Drill: _____

Name of Person Organizing Drill: _____

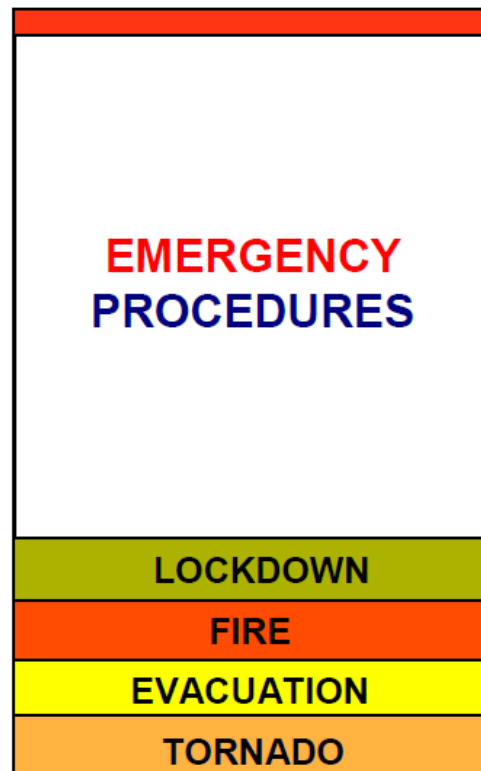
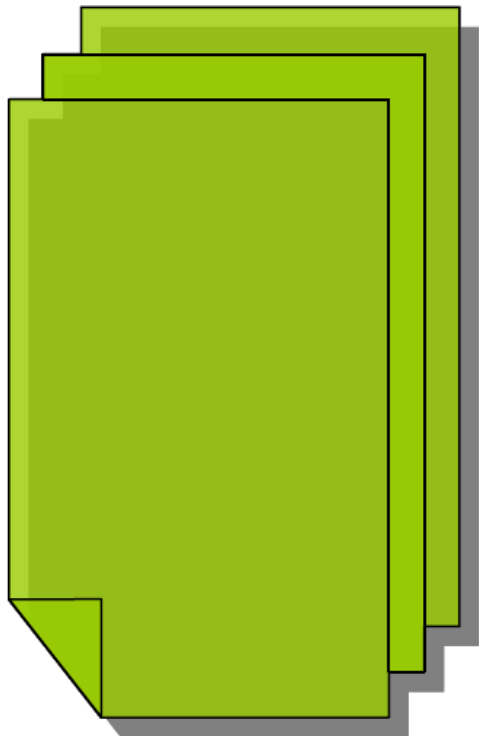
Brief Description of Drill:

Completion Date for Changes	
Estimated Completion Date for Changes	
Lessons Learned and Recommended Changes to Plan(s)	
Drill/Exercise Evaluation	
Drill/Exercise Objectives	

Appendix 5: Creating an Emergency Procedure Flip Chart

Create and place an Emergency Procedure flip chart in every area where there are children for easy reference by staff in the event of an emergency situation.

Use different colors for each emergency description. Stagger the colored paper so that each emergency description is visible and easily accessible.



Appendix 6: Child Care Center/Child Care Home Emergency/Disaster Information Form for Parents/Guardians*

Name of Child Care Center/Child Care Home: _____

Child Care Center/Child Care Home Street Address: _____

Emergency Contact at Child Care Center/Child Care Home: _____

Phone Number(s) of Emergency Contact:: _____

Cell Phone Number of Emergency Contact: _____
(Only use this number during emergencies; otherwise it is turned off)

In the event the center/home must be evacuated because of an emergency/disaster, the staff and children will leave the building and gather in the staging area at: _____

In the event there is a need to evacuate the staging area because of an emergency/disaster within that area, the staff and children will be transported by _____
_____ to the primary relocation site at _____

Primary Relocation Site Contact Person: _____
Primary Relocation Site Street Address: _____
Primary Relocation Site Phone Number: _____

If in the event the primary relocation site is inaccessible, the alternate relocation site of _____ will be used.

Alternate Relocation Site Contact Person: _____
Alternate Relocation Site Street Address: _____
Alternate Relocation Site Phone Number: _____

If necessary, children will be transported to this healthcare facility: _____
Healthcare Facility Street Address: _____
Healthcare Facility Phone Number: _____
Position/title of Contact at Healthcare Facility: _____

Parent/Guardian's signature for permission to treat medically in an emergency/disaster: _____

_____ Date: _____

Child/Children's Name(s): _____

American Red Cross Safe and Well Program: <https://safeandwell.communityos.org/cms/index.php>

** This information is to be updated and shared with parents/guardians annually. Parents/guardians may review the complete emergency/disaster preparedness plan upon request.*

Appendix 7: Emergency Supply Checklist for Child Care Centers & Child Care Homes

CHILD CARE CENTER/HOME NAME:			MANAGER OF CENTER/HOME:					
PERSON COMPLETING CHECKLIST:			DATE COMPLETED:					
FOOD, WATER, and BASIC SUPPLIES	AMOUNT	REPLENISH/ EXPIRATION DATE	SHELTER, & SANITATION SUPPLIES	AMT	REPLENISH/ EXPIRATION DATE	LIFE SAFETY SUPPLIES	AMOUNT	REPLENISH/ EXPIRATION DATE
☐ Nonperishable food items for 3 days onsite			☐ 10' poles (x3)			☐ Site maps		
☐ Separate supply of emergency food: offsite			☐ Tarp			☐ Hard hats		
☐ Infant formula*			☐ ¼ inch nylon rope			☐ Work gloves		
☐ Bottles for infants*			☐ Privacy shelter			☐ AM/FM battery powered weather radio with extra batteries*		
☐ Baby food*			☐ Plastic garbage bags*			☐ Walkie Talkies with extra batteries		
☐ Manual can opener*			☐ Plastic sanitation bags			☐ Whistles*		
☐ Disposable cups, dishes and utensils			☐ Kitty litter			☐ Orange reflective safety vests		
☐ Bottled water: 1 gallon per adult per day			☐ Toilet paper*			☐ Shovel		
☐ Bottled water ½ gallon per child per day			☐ Diapers and wipes*			☐ Matches in waterproof container		
☐ Emergency supply of food for staff*			☐ Hand soap			☐ Signal flare		
☐ Extra snacks			☐ Disinfectant			☐ Tools:		
☐ Distraction devices (e.g. games, toys)*			☐ Wipes*			☐ Bolt cutter		
☐ Change of weather appropriate clothing (1 for each child & adult)			☐ Sanitary napkins			☐ Pry bar		
			☐ Paper towels			☐ Crow bar		
			☐ Light sticks			☐ Pliers		
			☐ Blankets (wool, fleece, safety) and/or sleeping bags			☐ Hammer		
			☐ 5 gal plastic buckets for sanitation/emergency toilets			☐ Screwdrivers		
			☐ Battery operated lanterns with extra batteries			☐ Wrench		
						☐ Utility knife		
						☐ Barrier tape		
						☐ Duct tape		
						☐ Flashlights with extra batteries*		
						☐ First aid kit*		

* Indicates items that may be needed immediately and should be placed in a "Go Bag" and brought/kept with staff during the initial response. Other items should be kept in a portable container that can be accessed by staff.

Appendix 7: Emergency Supply Checklist for Child Care Centers & Child Care Homes (continued)

ADMINISTRATIVE SUPPLIES	Amount	REPLENISH/ EXPIRATION DATE	ADMINISTRATIVE SUPPLIES (CONT)	Amount	REPLENISH/ EXPIRATION DATE	FIRST AID and MEDICAL SUPPLIES*	Amount	REPLENISH/ EXPIRATION DATE
☐ Keys to center ☐ Office supplies ☐ Pens* ☐ Paper* ☐ Tape ☐ Paper clips ☐ Clipboards ☐ Camera ☐ Child release forms ☐ Staff rosters ☐ Child rosters ☐ Emergency Contact Forms for all children ☐ Job Action Sheets ☐ Emergency Operations Plan ☐ Cash ☐ Copies of all forms & important documents: (need to check list) ☐ Incident Report Log ☐ First Aid Log ☐ Notice of First Aid Care			☐ Copies of all forms/important documents: ☐ Child Release Log ☐ Child/Staff Roster ☐ Expenditure Log ☐ Staff time log ☐ Communication Log ☐ Authorization for Medical Treatment ☐ Health history forms ☐ Emergency Contact Information for each child ☐ Message Forms ☐ Insurance policies ☐ Supplier/ rental agreements ☐ Credit card and bank information			☐ First aid reference book ☐ Assorted adhesive bandages ☐ Sterile gauze pads (various sizes) ☐ Roll gauze bandages ☐ Triangular bandages ☐ Eye dressings ☐ Various sized splints ☐ Water in sealed containers for wound cleansing ☐ Safety pins ☐ Cold packs ☐ Backboard ☐ Scissors ☐ Tweezers ☐ Medical gloves ☐ 1" and 2" tape ☐ Masks (N-95, basic isolation masks) ☐ Thermometer ☐ Plastic bags for bloody materials ☐ Medical supplies for any child in center with Special Health Care Needs ☐ OTC medications ☐ Prescription medications		

* Indicates items that may be needed immediately and should be placed in a "Go Bag" and brought/kept with staff during the initial response. Other items should be kept in a portable container that can be accessed by staff.

Appendix 8: Child Care Center/Child Care Home Initial Rapid Damage Assessment

In the aftermath of a disaster, as soon as it is safe to do so, it is imperative to communicate the condition of your center/home as well as status of your program with your licensing representative and Child Care Resource and Referral representative that serves the county where your center/home is located.

Remember, safety comes first! In an event of an emergency, call the local emergency services (e.g. 911). Make sure staff and children are safe before reporting disaster related information to your licensing representative and Child Care Resource and Referral representative that serves the county where your center/home is located.

The *Child Care Center/Child Care Home Initial Rapid Damage Assessment* tool is used to assist with the initial rapid damage assessment of child care center/child care home after a disaster or emergency event and to be better able to efficiently and effectively respond to situations by providing appropriate assistance and information to child care centers/homes.

Objectives of the Child Care Center/Child Care Home Initial Rapid Damage Assessment

- ◆ To rapidly assess overall losses to child care centers/homes.
- ◆ To rapidly assess interruptions in services provided by child care programs.
- ◆ To rapidly assess the number of children and staff impacted by the disaster.
- ◆ To determine the overall operational capability and capacity of the child care community immediately after a disaster.
- ◆ To inform emergency management officials and community decision makers of the damages sustained by the child care community.
- ◆ To record available and/or needed resources to support the response and recovery of the child care community.

The Child Care Initial Rapid Damage Assessment tool was initially created by child-focused and emergency management partners in Harris County Texas – including Collaborative for Children, Child Care Licensing, Harris County Office of Homeland Security and Emergency Management and Save the Children. Permission to use and adapt this tool was granted from the Harris County Office of Homeland Security and Emergency Management.

Appendix 8: Child Care Center/Child Care Home Initial Rapid Damage Assessment (continued)

Date and time of the incident: _____

Brief description of incident: _____

Conducted by: _____ Assessor's Phone Number: _____

Date and Time of Assessment: _____

Name of Center/Home		Center/Home ID	Address	
			Street _____	
			City _____	
			County _____ ZIP _____	
Name of Director		Director Cell	Alternative person-in-charge & contact	
Center/Home Contact details				
Phone	Email	Fax	Alternative 1	Alternative 2
Type of Child Care Program				
☐ Center ☐ Accredited Center ☐ Home ☐ ☐				
☐ Government ☐ Tribal ☐ Private Non-Profit ☐ Other ☐ Not Sure				
Type of Insurance				
☐ Property ☐ Hurricane ☐ Flood (Structure) ☐ Flood (Contents) ☐ Tornado ☐ None				
What approximate payment is expected from the insurer? _____				
Is the building insured to cover the cost of repairs? ☐ Yes ☐ No				
Damages				
What is your assessment of the damage?				
☐ Completely destroyed ☐ Partially destroyed ☐ Little or no evidence of damage				
Do you have photos of the damages sustained?			☐ Yes	☐ No
Is street access available?			☐ Yes	☐ No
Were in-door materials damaged or lost?			☐ Yes	☐ No
Was out-door equipment damaged lost?			☐ Yes	☐ No
Were appliances damaged or lost?			☐ Yes	☐ No
Were stored food, water, and/or other emergency supplies lost?			☐ Yes	☐ No

Appendix 8: Child Care Center/Child Care Home Initial Rapid Damage Assessment (continued)

Describe any major EXTERIOR damages such as new or enlarged cracks, broken windows, etc.:

Damage/Problem	Location of damage/problems	Detailed descriptions
Main entrance		
Other entrances		
Walls		
Windows		

Others useful information:

Describe any major INTERIOR damages:

Damage/Problem	Location of damage/problems	Detailed descriptions of damage
Ceiling		
Walls		
Doors		
Floor/Carpet		
Water Leaks		
Toilet		
Light fixtures		
Supplies		
Desks		
Play equipment		

Other useful information:

Appendix 8: Child Care Center/Child Care Home Initial Rapid Damage Assessment (continued)

Employee/Child Status:								
	Total #	# Absent	# Injured	# Sent to Hospital	# Dead	# Unaccounted for	# Released to Parents	# Being cared for
Staff								
Children								
Others								

Source of Damage (Check all that apply)

☐ Flood ☐ Fire ☐ Wind/Wind driven rain ☐ Earthquake ☐ Other _____

Estimate of Damages

Repairs	Contents	Total
\$ _____	\$ _____	\$ _____

Operation/Program

Is the center/home open? ☐ Yes ☐ No

If yes, what are the hours of operation? (_____ A.M./P.M. -- _____ A.M./P.M.)

If no, what are the reasons? ☐ Structural damage ☐ No electricity ☐ No water ☐ Flooding
☐ Staff shortage ☐ Other _____

If no, what are the factors that most impact your ability to re-open?

☐ Return of electricity ☐ Return of water ☐ Return of staff
☐ Ability to complete forms to receive assistance
☐ Once forms submitted approval and receive financial assistants
☐ Financial assistant to replace lost or damage materials in classrooms
☐ Families returning to area or enrolling children returning
☐ Other _____

If no, when is the anticipated re-open date and hours of operation?
(Please call back for any future updates.)
Date: _____ (_____ A.M./P.M. -- _____ A.M./P.M.)

If you are currently temporarily closed, are you and/or your staff interested in working in other child care facilities for a limited time? ☐ Yes ☐ No

Do you have the capacity to serve additional children? (If you are not at capacity.)
☐ Yes ☐ No

If yes, how many additional children would you be able to accept? _____

Do you have a generator system? ☐ Working ☐ Not working

What supplies or materials would you need immediately to continue or resume your program?

Appendix 8: Child Care Center/Child Care Home Initial Rapid Damage Assessment (continued)

*This information will be passed onto the emergency management agencies and assistance organizations but the provision of the items to your sites can not be guaranteed.

Is the building owned or rented? ☐ Yes ☐ No

Is the facility a Head Start program? ☐ Yes ☐ No

Does the facility participate in the state child care assistance program? ☐ Yes ☐ No

Does the facility participate in the state nutrition program? ☐ Yes ☐ No

Number of children served pre-disaster

_____ Infants

_____ Toddlers

_____ Preschoolers

_____ School-age

Number of children served post-disaster (at the time of assessment)

_____ Infants

_____ Toddlers

_____ Preschoolers

_____ School-age

Number of employees pre-disaster _____

Current number of employees (at the time of assessment) _____

Number of employees planning to return to work post-disaster _____

Utility

Is telephone access available at your center/home? ☐ Landline ☐ Cell ☐ Both ☐ Neither

Is there electricity available at your center/home? ☐ Generator-based ☐ Normal ☐ None

Is there water available at your center/home? ☐ Normal service ☐ Bottled ☐ None

Collaborative for Children Funding Application

Did you submit a funding application? ☐ Yes ☐ No ☐ Withdrew

Were you granted funding? ☐ Yes ☐ No

If no, what was the reason why funding was not granted? ☐ Withdrew ☐ Denied

☐ Ineligible ☐ Unable to contact ☐ No damage ☐ No information provided

☐ Provider on corrective or adverse action ☐ Pending result ☐ Other _____

Appendix 8: Child Care Center/Child Care Home Initial Rapid Damage Assessment (continued)

Disaster Applications

Have you completed /submitted a disaster application with FEMA? ☐ Yes ☐ No

Have you completed /submitted a disaster application with the Small Business Association?
☐ Yes ☐ No

Public Assistance Eligibility (if there is a PA Declaration)

Are you located within a designated disaster area? ☐ Yes ☐ No

Were you in active use at the time of the disaster? ☐ Yes ☐ No

Were damages sustained as the result of the declared disaster or emergency? ☐ Yes ☐ No

Are you a state, local, tribal entity or private non-profit? ☐ Yes ☐ No

Others

Appendix 9: Contact/Release Information Form for Disasters

The top portion of this page should be filled out by parents when registering their child at the child care center/child care home and updated annually or as needed when information changes. In the event of an emergency situation the bottom portion of this form will be used to document the name of the person to whom the child was released to at the evacuation/shelter site.

Child's Last Name:		First Name:	
DOB:	Address:		
Mother's Name:	DOB:	Day Phone () Cell Phone ()	
Father's Name:	DOB:	Day Phone () Cell Phone ()	
Legal Guardian's Name (If different than above):	DOB:	Day Phone () Cell Phone ()	

If I/we are unable to pick up my/our child, I/we designate the following people to whom my/our child may be released in case of emergency.		
Name:	DOB	Phone ()
Name:	DOB	Phone ()
Name:	DOB	Phone ()
Name:	DOB	Phone ()

If telephone service is interrupted due to a major disaster, long distance service will be the first service repaired. Please list a friend or family member, who lives out of state that we can call with information in case local telephone service is interrupted.	
Name:	Phone ()

FOR CHILD CARE CENTER/CHILD CARE HOME STAFF USE ONLY

Name of person child released to:		Released by:	
Proof of ID Provided:	Date:	Time:	(AM) (PM)
Destination:			

Appendix 10: Child Identification Card

(Complete the information within the card and cut along the outside lines. Place completed card out-of-sight on each child (e.g., pinned to the back of the child's shirt) during an evacuation. Ensure this Card is included in the Evacuation Supplies and an electronic copy is kept on file).

Child's Name		DOB	
Child's Home Address		Home Phone	
Distinguishing marks/features on child (e.g., birthmarks)			
Parent/Guardian Name	Parent/Guardian DOB	Parent/Guardian Phone	
1.	1.	1.	
2.	2.	2.	
Additional Family/Friend Name	Additional Family/Friend Phone	Contact Outside of Area Name	
1.	1.		
2.	2.		
2.	3.	Contact Outside of Area Phone	
3.	4.		
Child's Physician:	Medical Conditions:	Allergies:	
Phone:	Medication:		
Child Care Center/Child Care Home Program Name			
Child Care Center/Child Care Home Phone			
Contact Name at Child Care Center/Child Care Home			

Appendix 11: Emergency Information Form for Children with Special Needs

Emergency Information Form for Children With Special Needs																																																																																
 American College of Emergency Physicians*	American Academy of Pediatrics 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Date form completed</td> <td style="width: 33%;">Revised</td> <td style="width: 33%;">Initials</td> </tr> <tr> <td>By Whom</td> <td>Revised</td> <td>Initials</td> </tr> </table>	Date form completed	Revised	Initials	By Whom	Revised	Initials																																																																								
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Last name: _____ <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black; padding: 2px;">Name:</td> <td style="width: 25%; border-bottom: 1px solid black; padding: 2px;">Birth date:</td> <td style="width: 25%; border-bottom: 1px solid black; padding: 2px;">Nickname:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Home Address:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Home/Work Phone:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Parent/Guardian:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Emergency Contact Names & Relationship:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Signature/Consent*:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Primary Language:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Phone Number(s):</td> </tr> <tr> <td colspan="3" style="padding: 5px;">Physicians:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Primary care physician:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Emergency Phone:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;"></td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Fax:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Current Specialty physician:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Emergency Phone:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Specialty:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Fax:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Current Specialty physician:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Emergency Phone:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Specialty:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Fax:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Anticipated Primary ED:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Pharmacy:</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black; padding: 2px;">Anticipated Tertiary Care Center:</td> </tr> <tr> <td colspan="3" style="padding: 5px;">Diagnoses/Past Procedures/Physical Exam:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">1.</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Baseline physical findings:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;"></td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">2.</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;"></td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">3.</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Baseline vital signs:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;"></td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">4.</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;">Synopsis:</td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;">Baseline neurological status:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;"></td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;"></td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 2px;"></td> <td colspan="2" style="border-bottom: 1px solid black; padding: 2px;"></td> </tr> </table>			Name:	Birth date:	Nickname:	Home Address:	Home/Work Phone:		Parent/Guardian:	Emergency Contact Names & Relationship:		Signature/Consent*:			Primary Language:	Phone Number(s):		Physicians:			Primary care physician:	Emergency Phone:			Fax:		Current Specialty physician:	Emergency Phone:		Specialty:	Fax:		Current Specialty physician:	Emergency Phone:		Specialty:	Fax:		Anticipated Primary ED:	Pharmacy:		Anticipated Tertiary Care Center:			Diagnoses/Past Procedures/Physical Exam:			1.	Baseline physical findings:					2.						3.	Baseline vital signs:					4.			Synopsis:	Baseline neurological status:										
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*Consent for release of this form to health care providers

Appendix 11: Emergency Information Form for Children with Special Needs (continued)

Diagnoses/Past Procedures/Physical Exam continued:		Last name:																																																																					
Medications:	Significant baseline ancillary findings (lab, x-ray, ECG):																																																																						
1. _____	_____																																																																						
2. _____	_____																																																																						
3. _____	_____																																																																						
4. _____	Prostheses/Appliances/Advanced Technology Devices:																																																																						
5. _____	_____																																																																						
6. _____	_____																																																																						
Management Data:																																																																							
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Comments on child, family, or other specific medical issues:																																																																							

Physician/Provider Signature:		Print Name:																																																																					
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Appendix 12: Child Care Center/Child Care Home Incident Response Reference Guide*

*This document was used and adapted with permission from the Knox County, TN Public Health Department

EMERGENCY PHONE NUMBERS

POLICE (e.g. 911)

FIRE (e.g. 911)

POISON CONTROL (800) 222-1222

GENERAL GUIDELINES

Protect yourself, staff and children

Call local emergency services (e.g. 911)

WHEN CALLING 911:
Inform emergency dispatcher that you are calling about a child care center/child care home.
Answer all the dispatcher's questions.
DO NOT HANG UP UNTIL TOLD TO DO

Follow all directions given by emergency response personnel

CRIMINAL ACTS

ACTS IN PROGRESS:

(Examples: Intrusion, hostage situations, physical violence, theft)

Call local emergency services (e.g. 911)

MISSING OR ABDUCTED CHILD

Conduct roll call & begin lockdown protocol
Search for 3 minutes and then go to next step.

Call local emergency services (e.g. 911)

Continue to search until police arrive

SIGNS OF BREAK-IN OR THEFT

Ensure safety of yourself, staff and children

Call local police non-emergency phone number **OR**
Call local emergency services (e.g. 911)

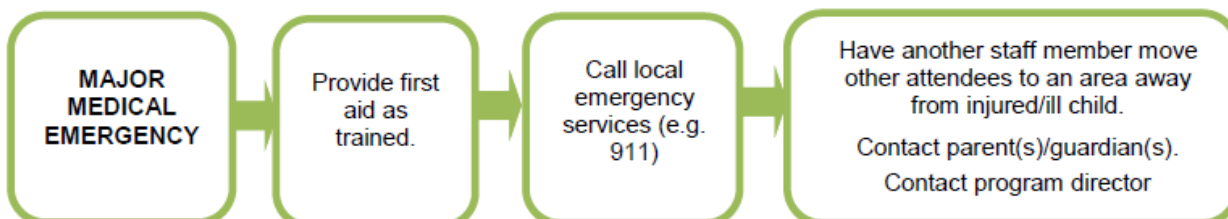
BOMB THREAT (Verbal, written, phone call, or suspicious package or letter found)

Follow bomb threat protocols
Gather as much information as possible from the caller
Evacuate the area as indicated

Call local emergency services (e.g. 911)

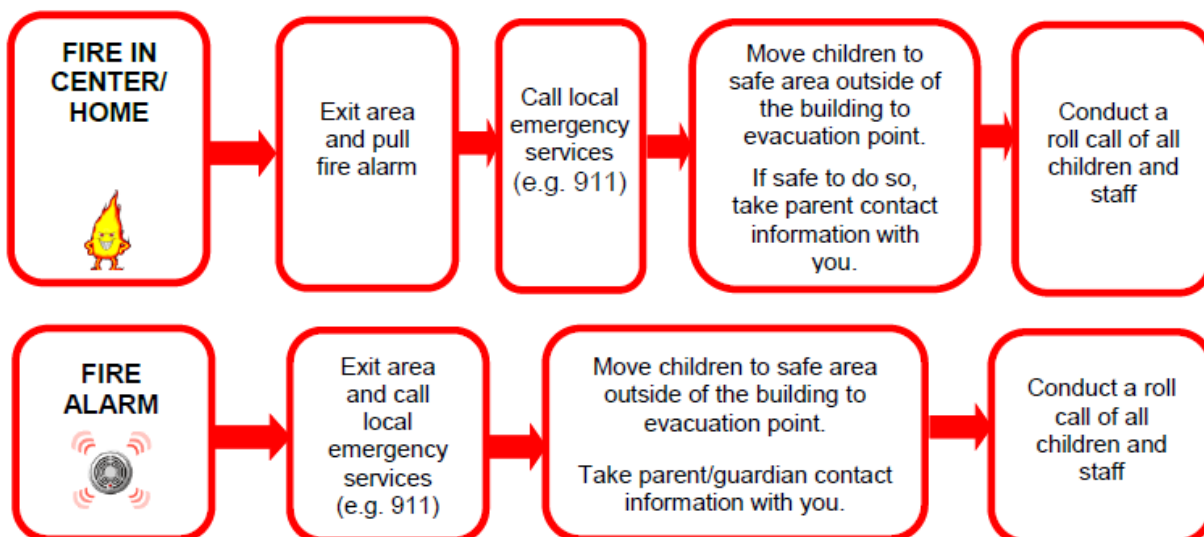
Appendix 12: Child Care Center/Child Care Home Incident Response Reference Guide (continued)

MEDICAL EMERGENCY



Note: For minor injuries evaluate the situation and follow center/home policy and procedures.

ACTUAL FIRE OR FIRE ALARM



NATURAL DISASTER/INCLEMENT WEATHER



Appendix 13: Lock Down Procedure Reference Sheet

Lock-down procedures may be activated in situations involving dangerous intruders or other incidents that may result in harm to persons inside child care center building/home.

- ☐ Child Care Center/Child Care Home Director or designee will notify local law enforcement (e.g. 911) and initiate Lock-Down procedures by announcing warning over PA system, sending a messenger to each classroom, or sounding bells.
- ☐ PA announcement may be an announcement to “start lock down procedure” or code word/phrase (see Warning and Notification section below for code word).
- ☐ Direct all attendees, staff, and visitors into classrooms or other designated safe areas.
- ☐ Lock classroom doors, turn off lights, and cover all classroom windows.
- ☐ Move all persons away from windows and doors (hide under desks or behind cabinets).
- ☐ Engage in quiet story time activities.
- ☐ Stay in classroom until notified that it is safe to leave.

WARNING AND NOTIFICATION

The Lock-Down Procedure code word/phrase is: _____

and will be used to inform staff of the initiation of the Lock Down Procedures.

Appendix 14: Emergency Evacuation Tool for Child Care Centers/Child Care Homes

CHILD CARE CENTER/CHILD CARE HOME INFORMATION	
Center/Home Director Name	
Center/Home Director Phone Numbers	
Address of Center/Home	
On-Site Emergency Phone Number	
Off-Site Emergency Phone Number	
Transportation Arrangements BUS VAN CAR	

EVACUATION SITES		
TYPE	LOCATION/ADDRESS	WALKING DIRECTIONS TO SITES
On-site evacuation site #1 (within the center/home)		
On-site evacuation site #2 (within the center/home)		
On-site evacuation site #1 (On center/home property)		
On-site evacuation site #2 (On center/home property)		
Off-site evacuation site #1		
Off-site evacuation site #2		
Shelter in place site #1 (tornado)		
Shelter in place site #2 (Lockdown)		

Appendix 14: Emergency Evacuation Tool for Child Care Centers/Child Care Homes (continued)

STAFF RESPONSIBILITY ASSIGNMENTS		
TASK	PRIMARY PERSON RESPONSIBLE	BACK UP PERSON RESPONSIBLE
	CONTACT PHONE NUMBER	CONTACT PHONE NUMBER
Notify emergency services (e.g. Call 911).		
Maintain an accurate and up-to-date building attendance list and bring the list when evacuating or sheltering in place.		
Carry off-site the Emergency Supply Pack(s).		
Ensure that the first aid kit is present during an emergency.		
Provide first aid if needed.		
Dispense medications to child care attendees and staff.		
Lead evacuation lines.		
Evacuate all children and ensure accommodations are made for special needs children.		
Take off-site the emergency contact information for all child care attendees and staff.		
Ensure all child care attendees, staff, and guests are accounted for and complete roll call.		
Ensure that everyone has left the building. Check restrooms, vacant rooms, storage areas, and other spaces children may be hiding.		
Close windows and doors before evacuating. Place notice of evacuation location at entrance.		
Organize and document information at the designated child care attendee pick-up point.		
Prepare messages for and notify parent(s)/guardian(s).		
Verify identification of parent/guardian/ designated adult, discharge children to and complete documentation.		

Appendix 15: Bomb Threat Information Form for Child Care Centers/Child Care Homes

EXACT TIME OF THREAT: _____ DATE OF THREAT: _____
 PERSON RECEIVING THREAT: _____
 HOW THREAT RECEIVED: ☐ Phone call ☐ In writing ☐ In person ☐ Social media ☐ Other: _____
 PHONE NUMBER CALL RECEIVED ON: _____ LENGTH OF CALL: _____

EXACT WORDS OF THREAT:

QUESTIONS TO ASK CALLER:

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

DESCRIBE THE CALLER:

Gender: ☐ Male ☐ Female Approximate Age: _____ Race/Ethnicity/Accent: _____

Voice:

Calm	Disguised	Nasal	Angry	Broken	Stutter	Slow
Sincere	Lisp	Rapid	Giggling	Deep	Crying	Squeaky
Excited	Stressed	Loud	Slurred	Normal	Accent	

If voice is familiar, whom did it sound like? _____

Threat Language:

Well-spoken	Irrational	Foul/vulgar	Incoherent	Taped/Recorded
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Background noise:

Street noises	Booth	Factory noises	PA System	Music
Voices	Motor	Machinery	Animals	Static

Other: _____

Appendix 16: Department of Homeland Security (DHS) National Terrorism Advisory System: Recommendations for Child Care Centers/Child Care Homes

The National Terrorism Advisory System (NTAS) is a system designed to effectively communicate information about terrorist threats by providing timely, detailed information to the public, government agencies, first responders, airports and other transportation hubs, and the private sector.

It recognizes that Americans all share responsibility for the nation's security, and should always be aware of the heightened risk of terrorist attack in the United States and what they should do.

The DHS NTAS informs the public and relevant government and private sector partners about potential or actual threats, by indicating whether there is an “*imminent*” or “*elevated*” threat.

The following guidelines specific to Child Care Centers/Child Care Homes should be considered:

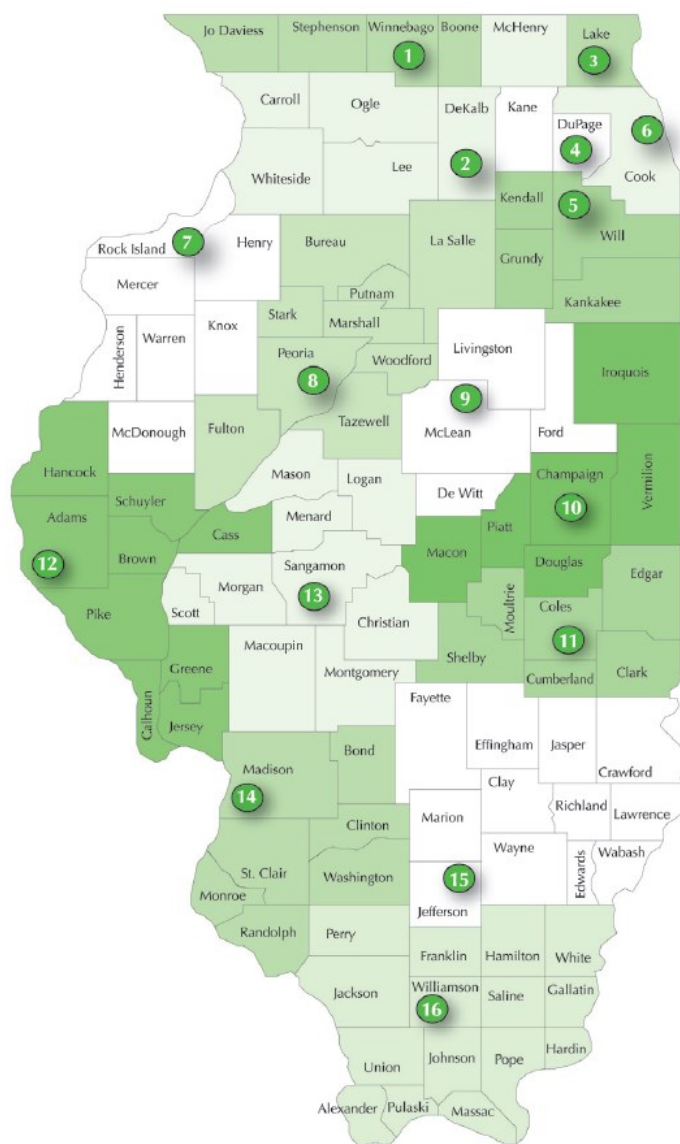
- ♦ **Imminent Threat Alert** is for very specific threats and may necessitate closing particular child care center/child care home(s) or federal building(s) depending on the threat.
- ♦ Threat Alerts will provide detail about the affected area. It is not blanket recommendation to close all child care centers region-wide or nationwide. If a federal building is open, safe and functioning then the child care center can remain open as well.
- ♦ The child care provider has the responsibility to ensure for the safety and well-being of their staff and the families they serve and they have the ability to make the decision to close. Consultation with the board of directors or sponsoring agency may be specified in the contract and is recommended. Closing child care centers/homes for indefinite periods of time could put the program out of business.
- ♦ If a city or building(s) goes to the **Imminent Threat Alert** and a decision is made to close a building(s) where a child care center/child care home is located, then the child care center/child care home should be notified that the building is closing and given sufficient time to notify parents and close down the operation.
- ♦ If a city or building(s) goes to the **Imminent Threat Alert** and a decision is made to close the building(s) where a child care center/child care home is located though, “essential” employees remain working, the child care center/child care home should be notified the building is closing and given sufficient time to notify parents and close down their operation.
- ♦ If a city or building(s) goes to the **Imminent Threat Alert** and a decision is made NOT to close a specific building where a child care center/child care home is located, then the child care center/child care home provider should be notified and THEY can decide whether to close or remain open.

If You See Something, Say Something.

Report suspicious activity to local law enforcement or call 911.

For more information, visit: <http://www.gsa.gov/portal/content/116799>

Appendix 17: Illinois Child Care Resource & Referral (CCR & R) Agencies: Service Delivery Areas



SDA 1

YWCA
Child Care Solutions
(Rockford)
888-225-7072
www.ywca.org/Rockford

SDA 2

4-C: Community Coordinated
Child Care
(DeKalb)
800-848-8727
&
(McHenry)
866-347-2277
www.four-c.org

SDA 3

YWCA Lake County CCR&R
(Gurnee)
877-675-7992
www.ywcalakecounty.org

SDA 4

YWCA CCR&R
(Addison)
630-790-6600
www.ywcachicago.org

SDA 5

Joliet CCR&R
(Joliet)
800-552-5526
www.childcarehelp.com

SDA 6

Illinois Action for Children
(Chicago)
312-823-1100
www.actforchildren.org

SDA 7

Child Care Resource & Referral
of Midwestern Illinois
(Quad Cities)
866-324-3236
www.childcareillinois.org

SDA 8

SAL Child Care Connection
(Peoria)
800-421-4371
www.salchildcareconnection.org

SDA 9

CCR&R
(Bloomington)
800-437-8256
www.ccrn.com

SDA 10

Child Care Resource Service
University of Illinois
(Urbana)
800-325-5516
ccrs.illinois.edu

SDA 11

CCR&R
Eastern Illinois University
(Charleston)
800-545-7439
www.eiu.edu/~ccrr/home/index.php

SDA 12

West Central Child
Care Connection
(Quincy)
800-782-7318
www.wccccc.com

SDA 13

Community Child
Care Connection
(Springfield)
800-676-2805
www.ccccconnect.org

SDA 14

Children's Home + Aid
(Granite City)
800-467-9200
www.chasiccr.org

SDA 15

Project CHILD
(Mt. Vernon)
800-362-7257
www.rlc.edu/projectchild

SDA 16

CCR&R
John Logan College
(Carterville)
800-548-5563
www.jalc.edu/ccrr

Glossary*

Disaster: A disaster is an occurrence disrupting the normal conditions of existence and causing a level of suffering that exceeds the capacity of adjustment of the affected community.

Disaster Management: The process of planning and intervention to reduce the impact of disasters as well as the response and recovery measures.

Disaster Plan: A written plan that describes the practices and procedures used to prepare for and respond to emergency or disaster situations. Same as an Emergency Operations Plan.

Emergency Management Agency: Organizations (local, state and federal), that coordinate preparation, recognition, response and recovery for disaster incidents.

Emergency Operations Plan: A written plan that describes the practices and procedures used to prepare for and respond to emergency or disaster situations. Same as a disaster plan.

Federal Emergency Management Agency: FEMA's mission is to support our citizens and first responders to ensure that as a nation we work together to build, sustain and improve our capability to prepare for, protect against, respond to, recover from and mitigate all hazards.

Hazard: A dangerous event or circumstance that has the potential to lead to an emergency or disaster. Any physical phenomenon that has the potential to produce harm or other undesirable consequences to some person or thing.

Hazard Vulnerability Assessment: A hazard vulnerability analysis identifies the disasters most likely to strike an organization or facility, and estimates the potential impact of the disaster on the surrounding community. The goal of the analysis is to prioritize potential disasters that could affect a facility based on likelihood of occurrence and impact. The analysis can then be used as a starting point for emergency plans, enabling communities to use their resources most effectively.

Incident Command System: A standardized organizational structure used to command, control, and coordinate the use of resources and personnel that have responded to the scene of an emergency. The concepts and principles for ICS include common terminology, modular organization, integrated communication, unified command structure, consolidated action plan, manageable span of control, designated incident facilities, and comprehensive resource management.

Mitigation: Efforts to reduce loss of life and property by lessening the impact of disasters.

Planning: Plans describe how personnel, equipment, and other resources are used to support incident management response activities. Plans provide mechanisms and systems for setting priorities, integrating multiple entities and functions, and ensuring that communications and other systems are available and integrated in support of a full spectrum of incident management requirements.

Preparedness: Activities necessary to build, sustain, and improve readiness capabilities to prevent, protect against, respond to, and recover from natural or man-made incidents.

Recovery: Recovery involves actions, and the implementation of programs, needed to help individuals and communities return to normal. Recovery programs are designed to assist victims and their families, restore institutions to sustain economic growth and confidence, rebuild destroyed property, and reconstitute government operations and services. Recovery actions often extend long after the incident itself. Recovery programs include mitigation components designed to avoid damage from future incidents.

Response: Activities that address the short-term, direct effects of an incident, including immediate actions to save lives, protect property, and meet basic human needs. Response also includes the execution of emergency operations plans and incident mitigation activities designed to limit the loss of life, personal injury, property damage, and other unfavorable outcomes.

Weapons of Mass Destruction: Weapons that are capable of killing large numbers of people and/or causing a high-order magnitude of destruction, or weapons that are capable of being used in such a way as to cause mass casualties or create large-scale destruction. WMDs are generally considered to be nuclear, biological, chemical, and radiological devices, but WMDs can also be high-explosive devices.

* Guide to Emergency Management and Related Terms. (2008). <https://training.fema.gov/hiedu/docs/terms%20and%20definitions/terms%20and%20definitions.pdf>

NOTES

