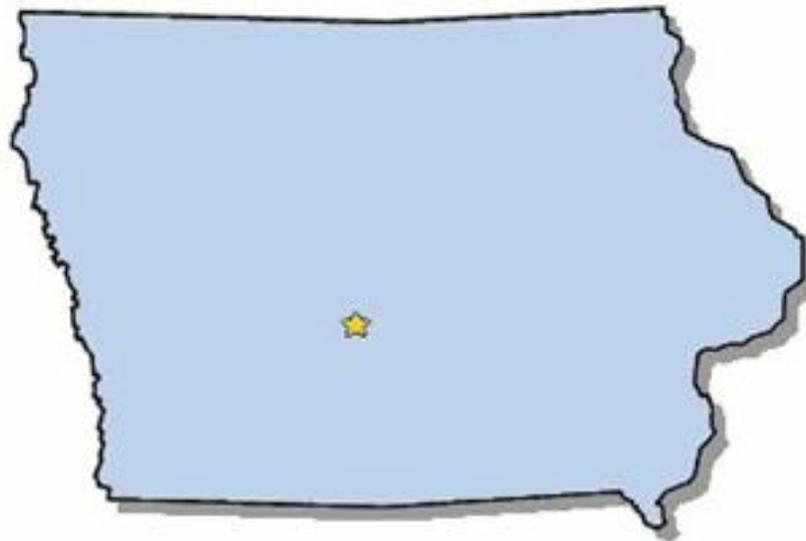


Emergency Preparedness Planning Document For Iowa Child Care Providers: Preschools & Centers



Why Is An Emergency Plan Important?

The responsibility of caring for children on a daily basis keeps child care providers very busy, making it difficult to prioritize planning for what could happen. However, those child care programs that take the time to thoughtfully make a plan and implement steps to be prepared are better able to protect lives and return to normal operation in a shorter period of time when an emergency does happen. Young children, families and communities depend on child care to protect their children and to be available so parents have a safe place for their children while they restore the community.

Don't We Already Do This As Part of Licensing Regulations?

An emergency preparedness plan is not an entirely new concept for child care businesses. The Department of Human Services regulations require the following written policies:

109.10(15) Emergency plans.

- a. The center shall have written emergency plans for responding to fire, tornado, flood (if area is susceptible to flood), intruders within the center, intoxicated parents and lost or abducted children. In addition, the center shall have guidelines for responding or evacuating in case of blizzards, power failures, bomb threats, chemical spills, earthquakes, or other disasters that could create structural damage to the center or pose health hazards. If the center is located within a ten-mile radius of a nuclear power plant or research facility, the center shall also have plans for nuclear evacuations. Emergency plans shall include written procedures including plans for transporting children and notifying parents, emergency telephone numbers, diagrams, and specific considerations for immobile children.*
- b. Emergency instructions, telephone numbers, and diagrams for fire, tornado, and flood (if area is susceptible to floods) shall be visibly posted by all program and outdoor exits. Emergency plan procedures shall be practiced and documented at least once a month for fire and for tornado. Records on the practice of fire and tornado drills shall be maintained for the current and previous year.*
- c. The center shall develop procedures for annual staff training on these emergency plans and shall include information on responding to fire, tornadoes, intruders, intoxicated parents and lost or abducted children in the orientation provided to new employees.*
- d. The center shall conduct a daily check to ensure that all exits are unobstructed.*

This plan is intended to build on the basic DHS requirements, providing a comprehensive, site specific plan for

- 1) Sheltering in place,
- 2) Evacuating,

- 3) Relocating,
- 4) Communicating,
- 5) Providing for those with special needs and
- 6) Reunifying families

In addition to be complete, this plan requires a minimum of 24 hours of emergency supplies for each child and staff member typically present in the facility. Agreements or contracts will be needed for transportation services, if the facility does not have vehicles, and for securing shelter sites to assure that the plan decided on can actually be implemented.

This emergency plan can not likely be written in one sitting. It should not be written by one person, but by a team consisting of staff, board members (where applicable), corporate team members (where applicable), and parents. In addition, having community members such as: Local Emergency Management, a member of EMS, DHS Licensing Consultant, a Child Care Nurse Consultant or CCR&R Consultant review your plan and provide guidance would be beneficial. These agencies or staff are not “approving” your plan but can provide you with assistance, resources, and ideas for you to consider. You should also consider seeking advice from your legal counsel on areas dealing with parental rights, laws, liability, contracts, legal interpretations, etc.

Center directors may feel additional training is needed prior to the center writing this comprehensive plan. Training is available specifically for Iowa child care providers on emergency preparedness through Child Care Resource & Referral Agencies. Please contact your local CCR&R office or CCNC for training and/or consultation. www.iowaccrr.org

How is Planning For the Unique Needs of Children Different From the General Guidance Available? And Our Facility Cares For Children With Special Needs - Is There Additional Planning We Should Do?

Facilities are more and more likely to be caring for children with special needs and/or employing staff with special needs. Some of these special needs may come to mind quickly such as chronic health conditions like a seizure disorder, diabetes, or g-tube. Other special needs may be readily recognized as well, such as a developmental delay, individuals with mobility or visual impairments. In addition though, infants and young children have special needs related to emergency situations including being completely dependent on competent adults to remove them from dangerous situations and to provide for their needs.

If your plan utilizes an egress window as a primary or secondary exit are all staff and children able to exit out the egress window? Do you have staff members whose physical size, mobility, strength, or health condition causes you to question their ability to assist young children and then climb out the egress window? Can they adequately and quickly assist the children to assure safety? Can the staff member climb out of the egress window and then continue the evacuation plan with the children? Are they able to lift and carry the child who typically uses a wheelchair? Are staff members physically capable

of performing their duties during an emergency, but mentally or emotionally unable? Have you practiced unannounced drills, observing staff in a more authentic situation? Does a staff member freeze, and become unable to safely evacuate the children or panic and abandon the children?

If a staff member is not able to perform this duty, what is your plan for ensuring the health and safety of the children and staff? What is your plan in a lock down situation to keep infants and young children quiet, so as to not alert the intruder of their location? Without a plan, a staff member could panic and unintentionally smother an infant in attempt to keep her quiet.

Supplies are an additional area to plan for in being prepared for children and staff with special needs. Critical medication, medical equipment (glucose monitor, nebulizer, tubing), medical supplies (test strips, adaptive equipment, communication device, adapted utensils), required food (allergen free, enteral nutrition for feeding tubes) and supplies needed for infants and toddlers such as formula, bottles, diapers, safety equipment, comfort items, etc. are examples of supplies you will need to consider for your facility.

Young children will have additional developmental and social-emotional special needs due to their age and the way they process what is happening. Planning and practicing with children and staff evacuating and relocating will decrease anxiety. Put together a lesson plan of activities and have the minimal supplies need for those activities, so that staff can quickly transition the children into songs, stories, finger-plays and other activities that will distract and keep the children busy and feeling secure. Planning ahead and providing lots of ideas, doesn't leave staff repeating 3 songs from memory, fumbling to think of ideas with increasing anxiety.

Why Do We Need To Encourage Staff to Have A Family Plan?

Developing a comprehensive plan is an important step for a child care business, and the most critical resource in the plan is the child care providers. Encouraging staff to have an emergency preparedness plan for their family will help staff feel more confident that their loved ones are safe and prepared for as they provide care for children in the child care facility during an emergency. It is in everyone's best interest to be ready, and a child care facility can use this preparation time to share guidance, ideas and encourage family and staff preparedness, too.

I. Child Care Program Information	
Name of program	
Street address	
City	
State	
Zip code	
Telephone number	
Alternate phone number	
E-mail address	
Emergency out of area telephone number	
	Director's Emergency Contact Info
Center Director	
Director's emergency contact information (Specific number or categories not required, at least 3 people recommended)	
	Members of Our Emergency Planning Team
Center Director	
Staff member	
Parent	
Board Member	
Board Member	
Other (Emergency Management Office, DHS licensing, CCNC, CCR&R, EMS)	
Other (legal counsel)	
	Contact Information for Others With Whom This Plan is Coordinated
(Neighbors)	
(Businesses; schools)	
Local Emergency Management	
EMS (fire, police and rescue)	
CCR&R	
Insurance provider	
Others	

*This introductory paragraph can be deleted from your plan – it has been provided to assist those writing the plan. **Shelter-in-Place** is the term used when there is an emergency, typically weather related, that makes it unsafe to leave the facility. Examples: Winter storm, severe thunderstorm/wind storm, tornado, etc. The **shelter-in-place manager** is the person in charge of what happens in the sheltering area. You will define the responsibilities for that person, which can include overseeing that supplies are stocked and the area is prepared in advance of needing the shelter, unlocking the area, supervising children and staff in the shelter area and leading the chain of command in decision making, etc. The **alternate** shelter-in-place manager ensures that if the primary person is not at the facility there is another person who understands the role and can function equally in that role.*

*A **lock down** is typically a shelter-in-place to protect children and staff from a violent situation outside or in a portion of the facility. Examples: Domestic violence between a staff member and a partner, non-custodial parent attempts to pick up child and situation is escalating, escaped prisoner or mentally ill patient in neighborhood, armed student or staff member, a riot outside, etc. In this situation, calling parents to pick up children will most likely never be the option - weather, police or the situation will prevent them from coming or bringing parents to the situation will be putting parents and the children/facility in additional danger. Having a locked facility will not always prevent someone from gaining access to the facility. All facilities need to plan for this type of event.*

In addition, parents wanting to pick up their child, while the facility is in lock down, or sheltering will be an additional problem to think through. Parents have open access to their children; however, what risk will the facility put staff and all the other children in to allow parents' access to their child at that precarious moment.

You may add additional lines or criteria, as needed for your program. A thorough response is required for each criterion (QRS).

II. Shelter-in-Place Plan	
Shelter-in-place manager and alternate	
Shelter-in-place manager responsibilities	
Procedure for alerting all staff and children to take shelter (field trips, outside if alarm doesn't sound outside, etc.)	
Special needs of staff and children and plan for accommodating and adapting shelter in place to meet those needs	
Persons able to handle medical emergencies and the emergencies they are able to manage	
Storm shelter location(s)	
Person(s) responsible for inventory, maintaining, and refreshing emergency supplies	
Location of emergency supplies for shelter in place	

Procedures and person(s) responsible for preparing the shelter in place area when a weather watch is issued or other indication is given that safe room may be needed	
Procedures for assuring medications, medical or adaptive equipment and supplies for children and staff with special needs are secured in the shelter in place location	
Procedure for accounting for all children and staff during a shelter in place emergency and procedures to be followed if a child or adult is left out of the safe room	
Procedure for communicating with parents, family members, or other emergency contacts that facility is sheltering-in-place	
Procedure for parent/ guardian or emergency contact attempting to pick up or drop off child during shelter in place. (Will you leave safe area to unlock door-to protect parent, or to release a child? What if parent demands?)	
Person responsible for issuing all-clear and procedures for issuing all-clear to all staff:	
How and when shelter in place warning system will be tested and procedures for exercising the shelter in place plan. (how often, staff advance notification?, rotation of times to include all staff, procedure for sounding alarm)	
Procedures for evaluating the shelter in place exercise (who and how evaluated; how changes are implemented in plan based on findings of exercise)	
	Lock Down
Procedures to assure rapid lock down of the facility in the event of an intruder, hostage situation, or other violent situation.(including procedures for	

internal intruder and external)	
Procedure for rapidly or simultaneously alerting all staff and children of lock down (including those on field trips, outside if alarm doesn't sound outside, etc.)	
Special needs of staff and children and plan for accommodating lock down to protect all individuals	
Procedures for assuring critical medications, medical or adaptive equipment and supplies for children and staff with special needs is secured in the lock down location	
Procedures for when and how lock-down will be practiced. The lock-down drill must simulate an intruder or other emergency likely to occur	
Procedures for accounting for all children and staff during a lock down emergency and procedures to be followed if a child(ren) or adult(s) have been locked out of safe areas	
Procedures to be followed if there are hostages, wounded or deceased staff or children	
Procedures for lock-down off site (field trip, in vehicle, etc.)	
Person responsible for issuing all-clear and procedures for issuing all-clear to all staff	
Procedure for communicating with parents, family members, or other emergency contacts that facility is in lock down	
Procedure for parent/guardian or emergency contact attempting to pick up or drop off child during lock down	
Procedures for communicating with licensing/registration staff that facility has needed to utilize lock down	

*This introductory paragraph can be deleted from your plan – it has been provided to assist those writing the plan. **Evacuation** refers to getting out of the facility building. It may also include leaving the facility property if circumstances indicate the need to be further away from the building. **Assembly site** refers to the place children and staff go after evacuating the building. This is adjacent to the building or the property and is a temporary situation. An assembly site is not a long term solution, if the evacuation is due to an emergency (versus a drill or false alarm) a relocation site will become necessary-you will describe your plan for relocating in the next section of this plan. **Evacuation Warning System** – fire alarm, PA system announcement, ringing bell, or however the facility alerts staff to evacuate. Utilize the system that will be used in a real emergency so that staff and children become accustomed to that noise/system.*

Criteria may be moved or combined for clarity but all require a thorough response unless otherwise stated (QRS). Delete italicized informational cues as needed or once plan is completed.

III. Evacuation Plan	
Evacuation manager & alternate	
Evacuation manager responsibilities	
Assembly site manager and alternate	
Responsibilities of assembly site manager	
Person responsible for posting and maintaining building floor plan that includes primary and secondary routes of evacuation; location of fire alarm/pull boxes, fire extinguisher, interior safe room, and exterior assembly area in each classroom/area of facility	
Person(s) responsible, procedures and locations for assuring essential equipment is evacuated with children and staff (special needs equipment, emergency medications, first aid supplies, emergency supplies)	
Persons able to handle medical emergencies: list at least those trained in CPR/First Aid	
Procedures for attending to injuries during evacuation and documenting the injuries and care given	
Location of fire extinguishers, first aid kits, and emergency (ready to go) kits	
Procedures and person(s) responsible for securing essential documents to be carried off site on immediate notice	

Procedures for accounting for all children and staff during an emergency including the procedures to be followed if a child or adult is missing	<i>(Simply stating a head count is not enough – how often, how often <u>name to face</u>, who is responsible for this duty – what other duties are they also responsible for at the same time?, how is it documented that it is being done so that when someone is missing you have a quick & reliable way of knowing how long that person has been missing)</i>
Procedures for ensuring adequate supervision of the children during emergencies, including while at the assembly site	<i>(Consider where placement of assembly site, often facilities will place assembly site in a corner of playground with exits that require going through the building or up by the building. If building is on fire you may be trapped, or if someone is injured, there may not be adequate clearance for rescue vehicle/personnel. Others place assembly site in front parking lot or sidewalk, in direct path of arriving emergency vehicles-loud, scary, dangerous and curious kids hard to manage situation.)</i>
Procedures for shutting off the utilities including the locations for utility shut-off for gas, electric, and water, and the phone numbers of the utility companies & person(s) responsible & alternates. Seek guidance from utility company as needed for shut off procedures	<i>(equipment needed?)</i>
Procedure for alerting all staff and children of evacuation (field trips, outside if alarm doesn't sound outside, etc.)	
Procedure for pets	<i>(N/A if <u>no</u> pets are onsite, children/staff can be very attached to pets and may refuse to leave without them, stall evacuation procedures or run back in after pets, endangering self and others – plan ahead)</i>
Person responsible for issuing all-clear and procedures for issuing all-clear to all staff	
Alter personnel to reflect your facility:	Other staff responsibilities during evacuation: <i>(Be specific)</i>
Assistant Director	
Maintenance Director	
Lead Teacher in each room	
Assistant Teacher in each room	
Student Teacher/volunteers	
Cook	
Receptionist	
Other	

<p>How and when evacuation warning system will be tested and procedures for exercising the evacuation plan. (how often, staff advance notification?, rotation of times to include all staff, procedure for sounding alarm)</p>	<p><i>(Be specific)</i></p>
<p>Procedures for evaluating the evacuation exercise (who and how evaluated; how changes are implemented in plan based on findings of exercise)</p>	<p><i>(Be specific)</i></p>

This introductory paragraph can be deleted from your plan – it has been provided to assist those writing the plan. Most child care facilities would prefer to not have to relocate on a temporary basis, they would prefer to call parents to pick up their children. However, that will not always be possible. A situation can arise such as rapidly rising flood waters, a tanker truck spill of hazard materials, a bomb threat at a neighboring building, etc. The facility may be able to evacuate safely and then a situation may escalate and they will be separated from the families for a significant period of time. If severe weather similar to the Parkersburg tornado were to happen again around 3:30pm on a Tuesday, with a series of storms. A center may lose power due to a wind storm and safely relocate the children to their mid-distance site in a neighboring community during a lull in the storm. Twenty minutes later a major tornado goes through the hometown, devastating it. Parents are not able to get to their children for 24 hours or more.

Primary – first choice. **Alternate** – second choice. A primary and an additional alternate site (not in same location) are necessary to increase the likelihood that a safe relocation site will be available during an emergency. More than one alternate can be secured, to increase your chances that a site will be available [undamaged, etc.] As part of this plan a signed contract or Memorandum of Agreement is required, to assure that both parties agree that the relocation site will be available, and what is included in the provision and use of the site. Often individuals assume they can use a public facility such as a school building, or public library without checking in advance to see if that is permitted. In addition, the MOA or contract should include what supplies will be available at the site, contact information for the owner or building supervisor, how to access the site, responsibilities of each party, cost to child care facility, etc.

Nearby: Walking distance, this is for building specific emergencies, a fire without explosion risk, heat/boiler failure, broken water pipe, etc. Is the route you are planning an easy route in the summer-out the playground back fence, across a parking lot to a church, but difficult in the winter because the church piles all the snow from their parking lot into an impassible mountain there? **Mid-distance:** Transportation will be required to relocate to this site. Depending on the location of the facility, this may be in another part of the metropolitan area, or in a neighboring community. Plan your mid-distance relocation site to serve your facility for neighborhood events. Choose an alternate in the opposite direction of your primary when possible. Consider natural and man-made hazards in the area, and the types of emergencies your facility/neighborhood is most prone to and plan to avoid those. If near a river, highway, train tracks, etc. the emergency is likely to come from that direction, plan to move in the opposite direction. **Distant:** Transportation will be required to relocate to the distant site, used for community wide emergencies (consider 50 miles or more). This site will most likely need to be located in a neighboring community or farther, but could be on the outskirts of a larger metropolitan area to ensure you have a safe place far enough away from the emergency situation. **Host site/host facility:** The building/facility the child care facility has relocated to. **Chain of command:** Order in which authority, information and responsibility flow for the facility and staff.

A thorough response is required for each criterion, unless otherwise indicated (QRS).

IV. Relocation Plan	
Person(s) responsible and procedure for obtaining and maintaining parent/guardian	

permission to relocate children in the event of an emergency		
Person(s) responsible and procedure for maintaining current picture of each child enrolled at center to aid in identification and reunification		
	Primary Nearby Relocation Site	Alternate Nearby Relocation Site
Location to which we will evacuate that is nearby (street address, phone number, contact person, e-mail, fax number)		
Name of business, contact information, contact person, map/directions to each relocation site; hours of operation; procedure for accessing facility if locked		
If location is not set up for safe child care, procedures for setting up relocation site for child care. Including location of supplies for set up (brought with, provided by location, stored at location). Prioritization for set up, and person responsible for managing/supervising set up. Person(s) assigned to site set up. Site layout and directions for set up attached	<i>(attach site layout for area to be used for child care and directions for set up)</i>	<i>(attach site layout for area to be used for child care and directions for set up)</i>
List of known and anticipated hazards at relocation site and temporary measures for assuring safety. Note the location of hazards on the attached site layout	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>
Procedures for assuring children are safe, closely supervised, and appropriately cared for during site set up. Person responsible for managing/supervising child care during set up. Person(s) assigned to caring for children during set up	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>

Plan of activities (plan for limited or no toys; scared children, commotion of set up) and operations (diapering, food prep, sanitation, napping) for children while site set up is being completed		
Procedure if necessary items are missing/needed. How items will be obtained and person(s) responsible for obtaining items		
Post Set Up	Primary Nearby Relocation Site	Alternate Nearby Relocation Site
Plan of activities, and behavior and mental health support strategies		
Procedures for food preparation and serving		
Procedures for sleeping		
Procedures for ill or injured children/staff	<i>Impact on ratio, monitoring for increasing severity, is away from other children feasible?)</i>	<i>Impact on ratio, monitoring for increasing severity, is away from other children feasible?)</i>
Site specific chain of command for decision making	<i>(How much of this is included in your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>	<i>(How much of this is included in your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>
Roles and responsibilities of host facility and host facility employees/residents/visitors	<i>(How much of this is included in your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>	<i>(How much of this is included in your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>
Procedures for assuring no child is lost, and for assuring no unauthorized person has access to children (residents, general public, volunteers, host employees, etc.) at relocation sites	<i>(be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate)</i>	<i>(be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate)</i>
Procedures for extended care including staff sleeping & breaks; safely conserving food, water, and sanitation supplies		
A plan and procedures for non-essential staff to rotate leave to check on and care for their own families, as possible.		

Reunification Plan	Primary Nearby Relocation Site	Alternate Nearby Relocation Site
Entrance parents, guardians, and emergency contacts will use to pick up their children from this location and how it will be designated		
Procedures to be followed for the release of children to adults from this location including measures to route parents to the location of their child while keeping it secure from general public. (Will additional staff be taken out of ratio to control access into facility?)		
Procedures for identification of parents, guardians, or emergency contacts during times of disaster. (Will i.d. be required? A code or "safe word"? signature form?)		
Procedure for how, when, and to whom the child will be released if the parent, guardian, or emergency contacts cannot be reached. Plan for follow-up on child's and parent's wellbeing if this procedure is utilized and designated person for follow up		
	Primary Mid-distance Relocation Site	Alternate Mid-distance Relocation Site <i>(strongly recommended – not required for QRS)</i>
Location to which we will evacuate that is mid-distance (street address, phone number, contact person, e-mail, fax number)		
Name of business, contact information, contact person, map/ directions to each relocation site; hours of operation; procedure for accessing facility if locked		
If location is not set up for safe child care, procedures for setting up relocation site for child care. Including location of supplies for	<i>(attach site layout for area to be used for child care and directions for set up)</i>	<i>(attach site layout for area to be used for child care and directions for set up)</i>

set up (brought with, provided by location, stored at location). Prioritization for set up, and person responsible for managing/supervising set up. Person(s) assigned to site set up. Site layout and directions for set up attached		
List of known and anticipated hazards at relocation site and temporary measures for assuring safety. Note the location of hazards on the attached site layout.	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>
Procedures for assuring children are safe, closely supervised, and appropriately cared for during site set up, Person(s) responsible for managing care of children and person(s) assigned to child care duties	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>
Plan of activities (plan for limited or no toys; scared children, commotion of set up) and operations (diapering, food prep, sanitation, napping) for children while site set up is being completed		
Procedure if necessary items are missing/needed. How items will be obtained and person(s) responsible for obtaining items		
Post Set Up	Primary Mid-distance Relocation Site	Alternate Mid-distance Relocation <i>(strongly recommended - not required for QRS)</i>
Plan of activities, behavior and mental health support strategies.		
Procedures for food preparation and serving		
Procedures for sleeping children		
Procedures for ill or injured children/staff	<i>Impact on ratio, monitoring for increasing severity, is away from other children feasible?)</i>	
Site specific chain of command for decision	<i>(How much of this is included in</i>	

making	<i>your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>	
Roles and responsibilities of host facility and host facility employees/residents/visitors	<i>(How much of this is included in your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>	
Procedures for assuring no child is lost, and for assuring no unauthorized person has access to children (residents, general public, volunteers, host employees, etc.) at relocation sites	<i>(be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate)</i>	
Procedures for extended care including staff sleeping & breaks; safely conserving food, water, and sanitation supplies		
A plan and procedures for non-essential staff to rotate leave to check on and care for their own families, as possible.		
	Reunification Plan	
Entrance parents, guardians, and emergency contacts will use to pick up their children from this location and how it will be designated		
Procedures to be followed for the release of children to adults from this location including measures to route parents to the location of their child while keeping it secure from general public. (Will additional staff be taken out of ratio to control access into facility?)		
Procedures for identification of parents, guardians, or emergency contacts during times of disaster. (Will i.d. be required? A code or "safe word"? signature form?)		
Procedure for how, when, and to whom the child will be released if the parent, guardian, or emergency contacts cannot be reached.		

Plan for follow-up on child's and parent's wellbeing if this procedure is utilized and designated person for follow up		
	Primary Distant Relocation Site	Alternate Distant Relocation <i>(strongly recommended – not required for QRS)</i>
Location to which we will evacuate that at a farther distance (street address, phone number, contact person, e-mail, fax number)		
Name of business, contact information, contact person, map/ directions to each relocation site; hours of operation; procedure for accessing facility if locked		
If location is not set up for safe child care, procedures for setting up relocation site for child care. Including location of supplies for set up (brought with, provided by location, stored at location). Prioritization for set up, and person responsible for managing/supervising set up. Person(s) assigned to site set up. Site layout and directions for set up attached	<i>(attach site layout for area to be used for child care and directions for set up)</i>	
List of known and anticipated hazards at relocation site and temporary measures for assuring safety. Note the location of hazards on the attached site layout	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>	
Procedures for assuring children are safe, closely supervised, and appropriately cared for during site set up, Person(s) responsible for managing care of children and person(s) assigned to child care duties	<i>(be specific, simply stating children will be closely supervised is not adequate)</i>	
Plan of activities (plan for limited or no toys; scared children, commotion of set up) and operations (diapering, food prep, sanitation, napping) for children while site set up is being completed		

Procedure if necessary items are missing/needed. How items will be obtained and person(s) responsible for obtaining items		
	Post Set Up	
Plan of activities, behavior and mental health support strategies		
Procedures for food preparation and serving		
Procedures for sleeping		
Procedures for ill or injured children/staff	<i>Impact on ratio, monitoring for increasing severity, is away from other children feasible?)</i>	
Site specific chain of command for decision making	<i>(How much of this is included in your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>	
Roles and responsibilities of host facility and host facility employees/residents/visitors	<i>(How much of this is included in your MOA or contract, how clearly is it communicated and mutually agreed to?)</i>	
Procedures for assuring no child is lost, and for assuring no unauthorized person has access to children (residents, general public, volunteers, host employees, etc.) at relocation sites	<i>(be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate)</i>	
Procedures for extended care including staff sleeping & breaks; safely conserving food, water, and sanitation supplies.		
A plan and procedures for non-essential staff to rotate leave to check on and care for their own families, as possible.		
	Reunification Plan	
Entrance parents, guardians, and emergency contacts will use to pick up their children from this location and how it will be designated		
Procedures to be followed for the release of		

<p>children to adults from this location including measures to route parents to the location of their child while keeping it secure from general public (Will additional staff be taken out of ratio to control access into facility?)</p>		
<p>Procedures for identification of parents, guardians, or emergency contacts during times of disaster. (will i.d. be required? A code or "safe word"? signature form)</p>		
<p>Procedure for how, when, and to whom the child will be released if the parent, guardian, or emergency contacts cannot be reached. Plan for follow-up on child's and parent's wellbeing if this procedure is utilized and designated person for follow up</p>		

This introductory paragraph can be deleted from your plan – it has been provided to assist those writing the plan. As part of this plan a signed written agreement is required if using non-facility owned transportation to assure that both parties agree that the transportation will be provided to the relocation sites during an emergency situation, and what is included in the provision of the transportation. Often facilities assume they can use a public transportation such as school buses, city buses, transit services, cabs, or that emergency management will provide transportation in the event of an emergency without checking in advance to see what the community plan is for those vehicles during an emergency. In addition, the written agreement should include what supplies will be available in the vehicle, contact information for the owner or supervisor of the vehicle fleet, how to access the vehicles, responsibilities of each party, cost to child care facility, etc.

Child care providers are encouraged to contact public transportation providers to see if this service can be arranged, where public transportation exists and to carefully and thoroughly document through written agreement the service if a provider does agree. Child care providers are encouraged to consult with legal counsel in making this decision.

Currently, the status of emergency transportation options that can accommodate child care providers with multiple young children (from 5 to over 400) are scarce in Iowa. Therefore, providers may make several good faith attempts to make arrangements to safely transport children in advance and be unable to do so. Especially for providers considering completing this plan to earn points for QRS, the QRS Oversight Team did not want this very real current barrier in the state to cause providers to disregard the other important planning and preparation included in this plan because they are unable to find transportation. If your facility does not have transportation to accommodate the number of children in care and is unable to locate transportation in your community, you may complete the alternate plan below.

A thorough response is required for each criterion, unless otherwise indicated (QRS).

V. Transportation Plan		
	Primary Transportation	Alternate Transportation <i>(strongly recommended – not required for QRS)</i>
Plan for transportation of children and staff to relocation site and an alternate means of transportation		
Person(s) responsible for coordinating and pre-arranging for evacuation transportation and procedure for accessing transportation when an evacuation is necessary	<i>(Requires detailed response for either facility or non-facility owned transportation)</i>	
Date of original formal agreement for transportation services (if using non-facility owned transportation)	<i>(May be N/A)</i>	

and when agreement is to be updated		
Estimated time for transportation to arrive/be ready to evacuate children and staff. Roles and responsibilities of staff while awaiting evacuation transportation	<i>(Requires detailed response for either facility or non-facility owned transportation)</i>	
Vehicle capacity and procedures for evacuation (loading order; prioritization process; staff roles and responsibilities; if more than one trip or vehicle is necessary what are staff procedures for each group)	<i>(Requires detailed response for either facility or non-facility owned transportation)</i>	
If facility owned vehicle(s) will be used: Procedure for the provision of child passenger safety restraints; procedure for assuring the restraints are in safe working order, appropriate for the size of the child, maintained according to manufacturer's requirements; and installed properly	<i>(May be N/A)</i>	
If facility owned vehicle(s) will be used for evacuation transportation: Procedures for maintaining vehicle(s)	<i>(May be N/A)</i>	
If children and staff will be evacuated in a non-facility owned vehicle(s): Procedure for the provision of child passenger safety restraints; procedure for assuring the restraints are in safe working order, appropriate for the size of the child, maintained according to manufacturer's requirements; and installed properly	<i>(May be N/A)</i>	
Roles and responsibilities of evacuation vehicle driver(s), driver qualifications, and procedure for assuring qualified driver(s) availability for evacuation transportation	<i>(Requires detailed response for either facility or non-facility owned transportation)</i>	
Procedure and person(s) responsible for assuring evacuation transportation is stocked with necessary supplies (first aid, water, etc.)	<i>(Requires detailed response for either facility or non-facility owned transportation)</i>	

Procedure for staff when emergency medical transportation is needed including maintenance of ratio; staff roles and responsibilities-will a staff member accompany the child or other staff member in the ambulance, etc.		
Person(s) responsible for and procedure for acquiring and maintaining current parent permission for emergency transportation plan. (signed permissions slips, etc.)		

V. Transportation Plan Alternative

1. Contact 2-4 agencies to attempt to arrange a transportation plan.	<p><i>List each agency and explain why you did not contract with them for transportation.</i></p> <p><i>List barriers such as too expensive (list cost); wait time too long to get to your house; inadequate services; legal counsel advised against (provide documentation).</i></p>
2. If Center provides care for 10 or fewer children, contact 2-4 individuals to attempt to arrange a transportation plan.	<p><i>List each individual and explain why you did not contract with them for transportation.</i></p> <p><i>List barriers such as snowbird – only available May – October will use for part of the year; discover traffic violations that make you uncomfortable, legal counsel advised against (provide documentation).</i></p>
<p>3. Contact your local Emergency Management Office/ Agency.</p> <p>Share your situation and concern related to providing for the children in your care during an emergency situation.</p> <p>Are home based child care providers included in the community emergency preparedness plan? If not, are there plans to include providers? <i>If you would like to get involved in moving that forward, ask how you can get involved.</i></p>	<p><i>What do they recommend? What resources do they refer you to?</i></p> <p><i>If providers are included in the community plan, what are the instructions for you?</i></p>

*This introductory paragraph can be deleted from your plan – it has been provided to assist those writing the plan. Ongoing review, seeking input and practicing the emergency preparedness plan will ensure solid understanding and the ability to carry out the plan when needed. **Non-electronic communication method** - communication method that does not rely on electronic technology such as fax, email, text, phone, tv, cell phone, websites, etc. Examples: sign on door, a physical location, posted at the public library, etc. One child care center has designated that if there is a major disaster and they were not able to relocate to their pre-determined relocation site they will post information on the door of the facility. If the facility is destroyed they will post information at the northeast corner of the cross street in front of the building. If that is not accessible the instructions are that the information will be at the nearest northeast corner that is accessible. If the center is located at the corner of 11th St and 11th Ave, the info would move up 11th ave – 10th, 9th, 8th, 7th St. wherever the facility and parents could get to the information and be posted in the northeast corner on a building or light post, telephone pole, etc.*

A thorough response is required for each criterion, unless otherwise indicated (QRS).

VI. Communication Plan	
	Non-Emergency Communication
How and when we will communicate/review our emergency plans with staff	
How and when we will communicate our emergency plans with the children	
How and when we will communicate our emergency plans with parents/guardians	
Person responsible and procedure for communicating emergency plan with local emergency services and emergency management	
	Emergency Communications
Procedure for when and how we will communicate with parents when children have been evacuated	
Procedure for when and how we will communicate with licensing/registration when children have been evacuated	
Procedure for when and how we will communicate with children and staff not at facility (group on field trip, school-age children, off duty staff) when children have been evacuated	
Procedure for when and how we will communicate	

with parent/guardians when children have been relocated	
Alternate ways of notifying parents, with at least one non-electronic method, when children have been relocated	
Procedure for when and how we will communicate with licensing/registration when children have been relocated and alternate ways of notifying, including a non-electronic method	
Procedure for when and how we will communicate with children and staff not at facility (group on a field trip, school-age children, off duty staff) when children have been relocated	
Alternate ways of notifying children and staff not at facility (field trip, school-age children, off duty staff), with at least one non-electronic method , when children have been relocated	
	Cyber Security
How we will protect our computer hardware	<i>(May be N/A if computers are not used)</i>
How we will protect our computer software	<i>(May be N/A if computers are not used)</i>
If our computers are destroyed, where we will use back-up computers	<i>(May be N/A if computers are not used)</i>
Procedure for storage of logins and passwords securely for access to hardware, software and internet after an emergency (with other important paperwork, internet site, etc.)	<i>(May be N/A if computers are not used)</i>
	Back-Up of Records
Person responsible for backing up critical records including children’s records, payroll, accounts, etc.	
Where back-up records including a copy of insurance policies, facility plans, bank account records, and computer back-ups are stored onsite	
How the program will provide for continuity if the accounting and payroll records are destroyed	

Emergency Contact Information Annual Review	
Person(s) responsible and procedure for updating emergency contact information for each child and staff	
Date the emergency plan will be reviewed and updated	

What Emergency Supplies Are Needed?

Emergency preparedness professionals recommend everyone have 72 hours of emergency supplies on hand to provide for their needs and those of the people in their care at all times. The list provided is basic supplies for infants, young children and staff for approximately 24 hours, and is designed to be scaled to the specific number, ages and needs of the children and staff in the facility.

Child care facilities may choose to purchase the supplies needed as part of the business and track those as a business expense. However, facilities may decide that to purchase all the supplies at this time is not a feasible expense and choose to have families share in the expense through a fee, or by supplying items. Additional options are to seek donations from civic, religious or community organizations, board members, fundraisers or request funding through local foundations and community resources.

Rotating food, water, medication, and other items is important so that the items are usable when needed and still meet the needs of the children in care (diapers fit, etc.). Procedures should be determined in advance for how supplies will be inventoried, rotated and maintained. A person should be assigned to ensure these tasks are completed and documented. Store the emergency supply items in or adjacent to the emergency shelter for access in an emergency situation. If the facility currently does not have any emergency supplies, start by collecting 24 hours worth of supplies and plan for acquiring the additional supplies to the full 72 hours, as soon as possible. In addition to the emergency supplies stored onsite, the facility will want to assemble an emergency kit that is very portable.

Emergency Kit: The emergency kit should be taken with every time the facility is evacuated, each time the facility is relocated and every time a group leaves the facility (field trips, school pick up, etc.) so that staff are always prepared with basic supplies, and emergency contact information. Large centers will need more than one emergency kit. Consider a kit per classroom with food, water, extra clothing, blankets, diapers, contact information, first aid supplies, flashlights, etc. and a director’s kit with a weather radio, tools, credit card, extra keys, building floor plan, relocation site information, etc.

24 Hour General Emergency Supply List for Child Care+:

This list will provide supplies for 10 infants and young children for 24 hours -scale to number of children (and adults) in care.

Minimum Quantity	Description	Comment
<i>Infant and young toddler food (If infants and young toddlers are in care) per 10</i>		
<input type="checkbox"/> 32 oz	Each infants formula, packaged as “ready to feed” (already mixed with water)	Consider purchasing ready to feed formula in nipple ready bottles to eliminate needing to purchase and store additional bottles and eliminate pouring into bottles while sheltering.
Or		
<input type="checkbox"/> 320 oz	Formula, soy-based, ready to feed (already mixed with water)	Manufactured “ready to feed” - already mixed with water
<input type="checkbox"/> 320 oz	Formula, milk-based, ready to feed	Manufactured “ready to feed”
<input type="checkbox"/> 64 oz	Formula, hypoallergenic-hydrolyzed protein, ready to feed	Manufactured “ready to feed”
<input type="checkbox"/> 40	4 Bottles and nipples for formula per infant/toddler	If purchased ready to feed formula in nipple ready bottles, additional bottles will not be necessary.
<input type="checkbox"/> 40 Jars	Baby Food - Stage 2 (jar size is 3.5 - 4 oz) and either 4 spoons per infant/toddler or 1 spoon per infant/toddler that will need to be sanitized between feedings (using diluted bleach water - bleach is found under sanitizing supplies).	Combination of vegetables, fruits, cereals, meats
<input type="checkbox"/> 1 box (16oz)	Cereal - single grain cereal preferred (e.g. rice, barley, oatmeal)	Rice, barley, oatmeal or a combination of these grains
<input type="checkbox"/> 5 gallons	½ gallon Commercially bottled drinking water per infant/toddler	
Children and adults (per 10)		
<input type="checkbox"/> 10 gallons	1 gallon Commercially bottled drinking water per person	Date water supply and replenish once a year. Additional water will be needed. Water <u>not</u> intended for drinking can be self bottled-label “do not drink”.

<input type="checkbox"/> 100 portions	10 portions Non-perishable food per person: Ready-to-eat canned meats, fruits, vegetables, juices, soup, Peanut butter*, jelly, crackers, granola or cereal bars, *trail mix, Comfort foods-sweetened cereals, lollipops, fruit snacks.	*Consider food allergies and age appropriateness of foods. Peanut butter for children >3 years of age
<input type="checkbox"/>	Supply of disposable bowls, plates, cups, eating utensils, and a manually operated can opener.	Sippy cups may soothe younger children.
Sanitation Supplies		
<input type="checkbox"/> 200	Diaper wipes - fragrance free (hypoallergenic)	
<input type="checkbox"/> 120	12 correct size disposable diapers per child	Per child wearing diapers
<input type="checkbox"/> 40	XL disposable diapers; pull-ups; or Good Nites® - 4 per child	Per young potty trained child. Good Nites® have sizes that go up to 110 lbs; medical supply companies will also have disposable diapers in larger sizes.
<input type="checkbox"/> Sanitation supplies	<ul style="list-style-type: none"> • 4 rolls toilet paper; • 2-3 five-gallon buckets with lids • 3 garbage bags; • adult/staff sanitation products • 1-eight ounce bottles of liquid or foam soap • 400 paper towels • 1-eight ounce bottle of hand sanitizer 	Feminine hygiene supplies, special needs items, etc. should be added, as needed. One bucket is for toileting, one (2) is for waste water from handwashing. Infant, child & adult disposable diapers could be used instead of bucket toilet method.
<input type="checkbox"/> 1	Container of bleach	
Shelter and Safety Supplies		
<input type="checkbox"/> 10	At least 1 blanket per person	Combination of Mylar, regular material/size, "blankey" type and thick - sleeping bag or comforter.
<input type="checkbox"/> Optional: Enough to cover windows, doors, and air exchanges for your specific	Plastic sheeting, and duct tape (optional items)**	Consider having additional for other uses or to replace torn pieces. Consider a large tarp in case of damaged roof, etc.

shelter area		
<input type="checkbox"/> 1	Multiclass fire extinguisher	Do not need to necessarily multiply every 10 children, but need to have at least one per sheltering area. Can be the fire marshal/building code extinguisher for that designated area.
<input type="checkbox"/> 1	Toolkit that contains at least a crowbar, hammer, shovel, utility knife, rope, pliers, a set of screwdrivers, heavy duty gloves and a wrench.	Do not need to necessarily multiply a toolkit every 10 children, but need to have at least one per sheltering area, and consider additional supplies if for a larger group-additional gloves, tools, etc.
<input type="checkbox"/> 2	Working flashlights (battery back up and extra batteries/or self powering).	
<input type="checkbox"/> 1	Working weather radio (battery back up and extra batteries/or self powering) in each building used by children and at relocation site	Not multiplied by every 10 children, but need one per sheltering area.
<input type="checkbox"/> 1	Whistle	
<input type="checkbox"/> 1 kit	<p>First aid kit contents:</p> <ul style="list-style-type: none"> (1) first aid reference book (2) cold packs (10) assorted adhesive bandages (10) 4 in. by 4 in. compresses (5) roll gauze bandages (2) triangular bandages (1) sm, med, and large splints (5) steri-strips or butterfly bandages (1) scissor (1) tweezers (10) non-porous medical gloves (2) oval eye patches (1) rolls 1" cloth tape (1) rolls 2" cloth tape 	

	(3) dust masks (1) thermometer	
<input type="checkbox"/> 24 hr supply	Of all child and staff required medications, medical supplies, and supportive care items.	Include all critical medications, even those not typically given in childcare (taken in morning or at night). Include additional batteries for hearing aids; or other devices.
Other Supplies		
<input type="checkbox"/> Comfort Items <ul style="list-style-type: none"> <input type="checkbox"/> 10 Pacifiers (if care for infants and toddlers) <input type="checkbox"/> 10 Stuffed animals or soft/cuddly toys <input type="checkbox"/> Picture cards, felt stories, or other open-ended items <input type="checkbox"/> Games <input type="checkbox"/> Coloring items <input type="checkbox"/> Well liked compact toys <input type="checkbox"/> (1) roll masking tape <input type="checkbox"/> (2) permanent marking pens <input type="checkbox"/> Administrative Supplies <ul style="list-style-type: none"> <input type="checkbox"/> master keys to facility and supply container(s) <input type="checkbox"/> office supplies-pens, paper, clipboards, <input type="checkbox"/> copies of all necessary forms <ul style="list-style-type: none"> <input type="checkbox"/> incident report log/ forms <input type="checkbox"/> child release log <input type="checkbox"/> medication administration log <input type="checkbox"/> staff time log <input type="checkbox"/> communications log 		<p>Suggested forms – not all are required. Your facility may have additional forms that are required or important to include.</p> <p>⁺Supply list based on <i>National Commission on Children and Disasters</i> recommended caches of supplies to support the care of children in mass care shelters and emergency congregate care facilities and <i>Emergency/Disaster Preparedness Plan</i>, from the Seattle & King County Child Care Health Program and Seattle Emergency Management</p>

**Sealing the room during shelter in place for a chemical or biological hazard may not be the most productive or practical for a child care provider, especially if you are alone with multiple children. The effectiveness of our ability to seal out chemicals through plastic sheeting and duct tape much more than simply closing the window and turning off heating and air conditioning is questionable. Your added responsibility of caring for multiple young children makes this much more difficult. You will want to listen to your all hazards radio (weather radio) and follow the directions given by local emergency management officials.

An Emergency Kit

1. The center must have an emergency kit to use during evacuations.

The kit must be assembled and transportable.

Staff members must be aware of where the kit is located and one or more staff members be assigned to maintain and transport it.

i. Location of kit: _____

ii. Staff member(s) assigned to maintaining it: _____

iii. Staff member and alternate assigned to transport it when the facility is evacuated: _____

The emergency kit should include disposable diapers and diaper pads, wet wipes and tissues, blankets, a radio and extra batteries, flashlights with extra batteries, a first aid kit, contact information and critical information (allergies, health conditions, medication permission forms) for each enrolled child, special equipment required for any child in care (medication, supplies, equipment), commercially bottled drinking water, disposable cups, concentrated ready-to-feed formula, baby food, other non-perishable foods with can opener if needed and money.

Child Care Program Emergency Contact List

This list will assist in closing the business, re-opening the business, and in the emergency situation. Copies of this form should be kept securely and confidentially at multiple locations (Examples: planned shelter sites; safety deposit box) and will need to be updated at least annually. Keep copies in a waterproof and fireproof container.

Organization	Name	Phone Number	Address	E-mail Address
Medical Emergency (EMS/Ambulance)		911 Non-emergency		
Police		911 Non-emergency		
Fire		911 Non-emergency		
Hospital				
Poison Control	Iowa Poison Control Center	1-800-222-1222		http://iowapoisson.org/
Local Emergency Management				
Electric Company				
Gas Company				
Water Company				
Waste Disposal				
Post disaster cleanup assistance				
Newspaper (<i>Alerting parents of location, etc.</i>)				
Television Station (<i>Alerting parents of location, etc.</i>)				
Radio Station (<i>Alerting parents of location, etc.</i>)				
CCR&R				
Department of Human Services				
Local Health Department				
Building Inspector				
Bank				

Checklist for Important Records and Documents

In addition to the original on file at the facility, at least two copies of the following current records shall be maintained. At least one hard/paper copy of the following current records and at least one electronic copy of items more easily stored electronically – securely and confidentially stored at a nearby location (not in the home nor in a building attached to or immediately adjacent to the home), and one out of the immediate area. If business does not maintain any electronic records hard copies at different offsite locations is acceptable

Records or Documents	Format & Date of Copy			Location of stored copy	
Children’s records	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Employees’ records	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Current picture of each child:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Child and Adult Food Program records (<i>may be N/A</i>)	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Accounts receivable (fees, subsidy requests, etc.)	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Accounts payable (debts, expenses)	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Insurance policies	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Rental agreements (<i>may be N/A</i>)	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Building/floor plans	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Bank records	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Supplier agreements (<i>may be N/A</i>)	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Service agreements (<i>may be N/A</i>)	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Inventory	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Tax records	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Pet vaccination and registration (<i>may be N/A</i>)	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		
Other:	<input type="checkbox"/> Hardcopy	<input type="checkbox"/> Electronic	Date		

Insurance Discussion Form

(Adapted from the Insurance Discussion Form at www.ready.gov)

Child care programs can use this form to discuss their insurance coverage with their insurance providers. Having adequate coverage will help programs recover more rapidly from catastrophes.

Programs should keep a copy of this form on the child care premises and at an off-site location.

Insurance Agent: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Insurance Policy Information				
Type of Insurance	Policy No.	Deductibles	Policy Limits	Coverage (General Description)

Does the business need flood insurance? Yes No

Does the business need earthquake insurance? Yes No

Does the business need business income and extra-expense insurance? Yes No

Other disaster-related insurance questions: _____

Parent Emergency Evacuation Information Form

(Given to parents at least annually)

Name of program	
Program address	
Emergency contact at program	
Phone number of emergency contact	
Cell phone of emergency contact	
<p>In the event the facility must be evacuated because of a confined emergency in our facility, the staff and children will leave the building and gather: _____</p> <p>If we cannot continue to use the facility or the immediate area becomes unsafe we will relocate to our Nearby Relocation Site or if that site is not safe we will relocate to the Alternate Nearby Relocation Site:</p>	<p>Nearby Relocation Site: <i>Name of facility)</i> <i>(address)</i> <i>(contact information)</i> <i>(additional instructions)</i></p> <p>Alternate Nearby Relocation Site(<i>name of facility</i>): <i>(address)</i> <i>(contact information)</i> <i>(additional instructions)</i></p>
<p>In the event the facility must be evacuated because of an emergency in the immediate area the children and staff will be transported by _____ to our Mid-distance Relocation Site or the Alternate Mid-distance Relocation Site:</p>	<p>Mid-distance Relocation Site: <i>(address)</i> <i>(contact information)</i> <i>(additional instructions)</i></p> <p>Alternate Mid-distance Relocation Site: <i>(address)</i> <i>(contact information)</i> <i>(additional instructions)</i></p>
<p>In the event the facility must be evacuated because of a widespread emergency the children and staff will be transported to our Distant Relocation Site or the Alternate Distant Relocation Site:</p>	<p>Distant Relocation Site: <i>(address)</i> <i>(contact person)</i> <i>(contact information)</i> <i>(additional instructions)</i></p> <p>Alternate Distant Relocation Site: <i>(address)</i> <i>(contact information)</i> <i>(additional instructions)</i></p>
<p>If we relocate and cannot reach one of our designated relocation sites, or are directed by authorities to a different site and cannot reach you by telephone, we will attempt to notify you by the following methods: <i>(list from your communication plan, include the non-electronic method plan)</i></p>	
<p>If we are directed by authorities to shelter in place or we need to lock down the facility due to a hazardous situation you will find the doors locked and <i>(describe)</i>. Due to the imminent danger, <i>(describe what parents are supposed to do, is there a safe place for them to go, etc.)</i></p>	

Child Identification Cards

(Fill out in advance of emergency, whenever contact information is updated. Consider laminating cards, to make water-proof.
To be placed out-of-sight on each child during relocation-safety pin to inside of shirt on back-where child cannot reach.
Consider a picture of child on back of card in case it comes off child.)

Child's Name	
Date of Birth	
Parent/Guardian #1	
Primary phone:	
Cell phone:	
Parent/Guardian #2	
Primary phone:	
Cell phone:	
Child's Address	
Emergency Contact	
Home phone:	
Work/Day phone:	
Cell phone:	
Address:	
Child Care Provider's Name and phone	

Child's Name	
Date of Birth	
Parent/Guardian #1	
Work/Day phone:	
Cell phone:	
Parent/Guardian #2	
Work/Day phone:	
Cell phone:	
Address	
Emergency Contact	
Home phone:	
Work/Day phone:	
Cell phone:	
Address:	
Child Care Provider's Name and phone	

Child's Name	
Date of Birth	
Parent/Guardian #1	
Work/Day phone:	
Cell phone:	
Parent/Guardian #2	
Work/Day phone:	
Cell phone:	
Address	
Emergency Contact	
Home phone:	
Work/Day phone:	
Cell phone:	
Address:	
Child Care Provider's Name and phone	

Child's Name	
Date of Birth	
Parent/Guardian #1	
Work/Day phone:	
Cell phone:	
Parent/Guardian #2	
Work/Day phone:	
Cell phone:	
Address	
Emergency Contact	
Home phone:	
Work/Day phone:	
Cell phone:	
Address:	
Child Care Provider's Name and phone	

Glossary:

Adaptive equipment: Devices used to assist with completing activities of daily living.

All- clear: a signal, indicating that the danger is over.

Alternate: Second choice **Primary:** First choice

Assembly site manager: The person in charge of making sure everyone at the assembly site is safe, being adequately supervised and their needs are being met.

Assembly site: The place children and staff go after evacuating the building. This is adjacent to the building or the property and is a temporary situation. An assembly site is not a long term solution

Chain of command: Order in which authority, information and responsibility flow for the facility and staff.

Distant: Transportation will be required to relocate to the distant site, used for community wide emergencies. This site will most likely need to be located in a neighboring community or farther, but could be on the outskirts of a larger metropolitan area to ensure you have a safe place far enough away from the emergency situation. NACCRA & Save The Children National and State Guidelines recommend the location be at least 50 miles away.

Egress window: A window large enough, as defined by local building codes, for exit or entry in case of an emergency.

EMS: Emergency Medical Services – primarily ambulance. Sometimes term includes police, fire & rescue (ambulance).

Evacuation manager: The person in charge of making sure everyone gets out of the facility safely.

Evacuation Warning System: Fire alarm, PA system announcement, ringing bell, or however the facility alerts staff to evacuate.

Evacuation: Refers to getting out of the facility building. It may also include leaving the facility property if circumstances indicate the need to be further away from the building.

Exercise: Practicing the plan, a drill.

Extended care: Care provided longer than 10-12 continuous hours, possibly 24 hours or more.

Host site/host facility: The facility or organization receiving the children and staff during a relocation.

Local Emergency Management/Emergency Management Office/Agency: The local government agency responsible for coordinating response to disasters and other major emergencies in your county

Lock down: Shelter-in-place to protect from a violent situation outside or in a portion of a facility.

Memorandum of Agreement/MOA: A written statement, or record of agreement between agencies or individuals. Similar to a written contract, but without money exchanged.

Mid-distance: Transportation will be required to relocate to this site, approximately 15-30 minutes away.

Multiclass fire extinguisher: ABC (multi-purpose) powder fire extinguishers are the only ones suitable for all the standard classes of fire including Class C flammable gas fires. They will be red with a blue panel above the instructions.

Nearby relocation site: Walking distance, this is for building specific emergencies, a fire without explosion risk, heat/boiler failure, broken water pipe, etc.

Non-electronic communication method - Communication method that does not rely on electronic technology such as fax, email, text, phone, TV, cell phone, websites, etc. Examples: sign on door, a physical location, posted at the public library, etc

Primary: First choice **Alternate:** Second choice

Ready to feed formula: Formula that is manufactured premixed with water, and not concentrated, so that it requires no further preparation prior to feeding to an infant. Can be purchased in bottles that are “nipple ready”, where a nipple can be screwed onto the bottle and formula is ready to feed, eliminating the need to pour from a can into bottles to feed.

Reunification plan: A plan to ensure parents/guardians and children are safely and quickly brought together again.

Self powering flashlight or weather radio: Solar powered, crank powered or other mechanism that eliminates the need for batteries in the flashlight

Shelter-in-Place: Seeking shelter inside the facility, typically for severe weather.

Site layout: The arrangement or plan of the area to be used for child care. The site layout should include how the area is to be set up to provide care, outside access points, hazards, bathrooms, etc.

Special Needs: An individual with a health condition or disability, an access and/or functional need for assistance during an emergency.

Resources to Assist You in Developing an Emergency Preparedness Plan

In developing an Emergency Preparedness Plan for your child care business, you may want to consult your insurance agent, legal counsel, emergency medical services (EMS) and parents of children in care. Also, it is important to follow the registration rules for child development homes, and your local zoning and building laws.

In addition, local emergency management agencies may be able to assist you in reviewing your plan and provide guidance on how to address emergencies relevant for your location.

In addition to the resources listed on the following citations page of this template, these websites may be of interest or assistance to you in developing your emergency preparedness plan.

Iowa Child Care Resource and Referral agencies	www.iowaccrr.org
Healthy Child Care Iowa	www.idph.state.ia.us/hcci/
Iowa Emergency Management Services	www.iowahomelandsecurity.org/
County Emergency Management Services and Coordinators	www.iowahomelandsecurity.org/county_EM/county_EM_overview.html
American Red Cross of Iowa	www.iowa.redcross.org
Ready America	www.ready.gov
National Association of Child Care Resource & Referral	http://www.naccrra.org/disaster//
Small Business Administration	http://www.sba.gov/about-offices-content/1/2462

Citations:

Emergency/Disaster Preparedness Plan. Seattle & King County Child Care Health Program and Seattle Emergency Management. April 2009.

Emergency Planning Forms. ©NACCRRA 2006.

Is Child Care Ready?: A Disaster Planning Guide for Child Care Resource & Referral Agencies. © NACCRRA 2006.

Is Your Child Care Program Ready-A Disaster Planning Guide for Child Care Centers and Family Child Care Homes. ©NACCRRA 2006.

National Commission on Children and Disasters 2010 Report to the President and Congress. National Commission on Children and Disasters. October 2010.

Protecting Children in Child Care During Emergencies: Recommended State and National Regulatory and Accreditation Standards for Family Child Care Homes and Child Care Centers and Supporting Rationale. ©National Association of Child Care Resource & Referral Agencies and Save the Children, Domestic Emergencies Unit. December 2010.

www.ready.gov

For QRS Participation:

1. **Planning document fully completed** –attach copy with QRS application
2. **Signed, written agreement for each relocation site** - attach copies with QRS application
 Primary Nearby Alternate Nearby Primary Mid-distance Primary Distant
3. **Site layout for each relocation site** - attach copies with QRS application
 Primary Nearby Alternate Nearby Primary Mid-distance Primary Distant
4. **Signed, written agreement for transportation** - attach copies with QRS application
or providing transportation with own vehicle or completed Alternate Transportation Plan
5. **24 Hours of supplies for each child and adult typically present** - attach inventory with receipts, photos of supplies (photos of actual supplies in your home not stock photos of sample items), a combination or other proof of possession of required items in sufficient quantities to your QRS application
 Children in care ____ (number) Staff ____ (number) Household members ____ (number)
6. **Share plan with parents** – attach paragraph of how you shared your plan with parents, staff (where applicable) and household members with responsibilities in the plan. Attach proof that parents received the information, such as a copy of sent email, copy of signature page, minutes from parent meeting and signature of attendees, etc. to your QRS application
7. **Share plan with local Emergency Management Agency** – attach proof of sending to EMA – mail receipt, copy of sent email, etc.-no response or approval from EMA is required.