

# Disaster Response Handbook

The purpose of this handbook is to give family home childcare providers step-by-step procedures on how to respond to disaster/crisis situations during the first 30 minutes. Following the listed instructions in sequential order will help to prioritize notification of emergency response personnel and to limit escalation and injury during the initial impact of the situation. In this document, "Provider" means the staff or the assistant. "Parent" means the child's parent or legal guardian.

This handbook was written by Snohomish County Department of Emergency Management, reviewed and edited by Snohomish Health District Child Care Health Program, and individualized by the childcare center.

This policy was last reviewed and updated on: 7/1/2020

**OUR ADDRESS IS: 700 Sharon Ave E.  
Moses Lake WA, 98837**

**OUR PHONE NUMBER IS: 509-764-8536**

**OUR NEAREST CROSS-STREETS ARE: Monroe & Division**

# Table of Contents

<b>Table of Contents</b> .....	<b>2</b>
<b>Emergency Phone Numbers</b> .....	<b>3</b>
<b>Introduction</b> .....	<b>3</b>
<u>Preparing your child care for a disaster</u> .....	3
<u>Practicing for a disaster</u> .....	4
<u>Take care of your own family</u> .....	5
<b>Steps to Take During a Disaster</b> .....	<b>5</b>
<u>Building and Site Evacuation</u> .....	5
<i>Building Evacuation:</i> .....	5
<i>Site Evacuation:</i> .....	6
<u>Shelter-in-Place Procedure</u> .....	7
<u>Fire Alarm/Emergency</u> .....	8
<u>Gas Leak</u> .....	9
<u>External Hazardous Materials Accident</u> .....	9
<u>Internal Hazardous Materials Accident</u> .....	10
<u>Power Outage</u> .....	10
<u>Storms &amp; Snow</u> .....	11
<u>Earthquake</u> .....	11
<u>Volcanic Eruption</u> .....	13
<u>Flooding</u> .....	14
<u>Landslides</u> .....	14
<u>Missing Child</u> .....	15
<u>Kidnapping</u> .....	15
<u>Child Abuse</u> .....	16
<u>Assault on Child or Staff</u> .....	16
<u>Intruder Alert Procedure / Lockdown / Building Lockout</u> .....	17
<i>Intruder Alert / Lockdown</i> .....	17
<i>Building Lockout</i> .....	18
<u>Flu Outbreak</u> .....	19
<u>Field Trip Incident</u> .....	20
<u>Bomb Threat</u> .....	21
<u>Suspicious Mail or Package</u> .....	22

# Emergency Phone Numbers

<b>Emergency Assistance</b>	<b>Number(s)</b>
Police	911
Fire/Medics	911
Samaritan Hospital Emergency Room	509-764-2933
Poison Control Center	1.800.222.1222
PUD (Electricity)	(509) 766-2505
Cascade Natural Gas	1-888-522-1130
Trask Insurance Agency	509-765-0241
Provider's Cell Phone (Josh)	509-989-6429
Provider's Home Phone (Kast House)	509-765-1738
Out-of-Area Contact (Leigh Ramsey)	425-931-3894
Child Protective Services	1-800-562-5624
Child Care Licensor: Alma Bustos	509-665-5288
Alternate Site Location (Moses Lake High School)	509-766-2666

Located Across the Street from Children Are Special

## Introduction

In order to ensure the safety of all the children who attend this childcare center (*and the staff who work here*), this provider has developed a comprehensive Crisis/Disaster Response plan. By putting together this plan and sharing it with parents, we hope to be prepared when disaster strikes.

### Preparing your childcare Center for a disaster

This childcare has taken many steps to prepare the center, children, staff, and parents, for the unexpected.

#### Drills

- \* The center conducts fire drills on a monthly basis and records the dates as required by licensing.
- \* The center conducts disaster drills on a quarterly basis and records the dates.
- \* There are two designated escape routes from each area. Evacuation maps are posted *in each classroom*

## Kits

- The childcare has gathered a 72-hour preparedness kit and has included a 72-hour supply of any medications or supplies for those with special needs. This kit is kept *in the back-storage area*.
- The provider checks the emergency kits and emergency medication expiration dates on a regular basis. This is done *annually in January every year*.
- For those with special needs or life-threatening health conditions, who require medication or supplies on a regular basis or on an as-needed basis, those medications or supplies are kept on-site and will be taken with if evacuation is required.
- Fire extinguisher(s) are located *next to every classroom, in the kitchen and in the storage room*. They are checked monthly and recharged *yearly*.
- The center's smoke alarms are checked annually.

## Communication

- Staff Cell Phones are available to use if there is no electricity.
- Emergency phone numbers are posted by main phone in the childcare center.
- The center has designated an out-of-area contact. This contact is *Leigh Ramsey*. Parents are instructed to call this number if they cannot get through to the childcare on the local phone grid.
- Children will only be released to individuals listed on the child's emergency contact form. Parents need to ensure these are kept up to date.

## Practicing for a disaster

Childcares are required by licensing to conduct monthly fire drills and record the date and time of each. Disaster drills need to be conducted at least quarterly. It is up to the childcare to choose which type of disaster they will practice for each time. It is advisable to practice earthquake drills frequently. Periodic practicing of lockdowns and shelter in place is also important. Some situations are difficult to practice for during normal operation of the childcare. For such scenarios involving site evacuation, it is a good idea to run through the situation in your mind or with a friend, colleague, or family member. In this way, you may be able to figure out possible hurdles.

When practicing fire or disaster drills, make sure to vary the time of day and day of the week. You cannot predict when a disaster will happen and if you've never practiced during pick-up time or lunch time.

All providers should receive regular training on disaster preparedness. The entire plan should be reviewed at least annually, and with any new assistants as they start work. Make sure you have discussed roles and responsibilities for different scenarios.

Providers should be familiar with how to use a fire extinguisher and it is best if they have had practice using one. Make sure that CPR and First Aid training is up to date. Learn how to shut off any utilities, such as natural gas.

## Take care of your own family

Disasters affect all of us. You will likely be concerned about your own family members but will also be needed to help the children in your care. Obtain information and assistance in preparing your own family for times of disaster. Have an out-of-area contact for your family and make sure everyone carries the number with them, have disaster supplies at home and in each family member's personal vehicle, and have a plan for connecting with other family members. If your family members are prepared, your personal worries will be reduced, and you will be better able to focus on helping the children in your care who rely on you.

# Steps to Take During a Disaster

## Building and Site Evacuation

### ***Building Evacuation:***

- Make a quick assessment of the situation in the center and of any injuries to the children or adults.
- Provider evaluates the evacuation route to be sure that it appears clear of obstructions.
- Provider gives instruction to evacuate.
- If possible and time allows, have children take jackets and coats.
- Provider should take the following items:
  - Disaster supplies which are stored *in the back-storage area*.
  - Health care checklist.
  - Children's emergency and medical information/supplies.
  - Cell phone, if available.
- Provider should assemble children 2 by 2 to evacuate the center (preferably one adult leading the children and one adult following behind). Infants will be evacuated using our evacuation crib. Young toddlers will be evacuated by our 6-passenger stroller if time allows, otherwise many adults will assist with evacuation.
- Take attendance; if safe to do so, have another adult search the center for anyone missing.
- Have children sit down if possible.
- If a gas leak or other incident that requires individuals be located further away from the child care center, move children to the pre-designated area or no less than one block from the child care; the pre-designated location is *the Moses Lake High School Gym area*.
- Provider will evaluate the situation with the help of responding agencies (fire, police, etc.) and determine if it is safe to enter the center. If not, determine if it is necessary to move to the alternate site location (follow *Site Evacuation* procedure in this plan), or to stay put until it is safe to go back inside.
- Provider will notify parents immediately if evacuation looks to be long term or if children are moved to alternate site location; parents will be notified *by an automated phone message*.

- Provider will report incident to licensor.
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored *at Children Are Special*.
- All parents will be notified of incident.

### **Site Evacuation:**

Provider should bring the following items to the alternate sites:

- disaster supplies which are stored *in the back-storage area*
- attendance sheets
- children's emergency and medical information/supplies
- cell phone, if available
- Children will be taken to the alternate site location by: *walking*
- Once at the alternate site location, take attendance again. The provider must remain with the children until all children are picked up by parents or emergency contacts.
- Provider will continue to communicate with parents and coordinate pick-up of children
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

### **Shelter-in-Place Procedure**

Shelter-In-Place should be conducted when you are instructed to do so by emergency personnel or your radio or television; or if you see a vapor cloud or smell an unusual odor outside.

- Gather all children inside into one room, preferably one with few exterior windows and doors. This location is Classrooms B and Classrooms D.
- Call 911 if you haven't already done so; provider or designee should turn on and listen to the radio; Listen for emergency information from your local fire or police department.
- Turn off all fans, heating, cooling, or ventilation systems and clothes dryers.
- Close and lock windows and doors (Locked windows seal better) and close as many interior doors as possible.
- Close off non-essential rooms such as storage areas, laundry room, etc.
- Seal gaps around windows, doors, heating/air conditioning vents, bathroom and kitchen exhaust fans, stove, and dryer vents with pre-cut plastic sheeting, wax paper, or aluminum foil and duct tape.
- Stay alert to loudspeaker announcements; emergency personnel from your local police or fire departments may give you specific instructions via loudspeaker or door-to-door.
- If determined necessary, you can provide a minimal amount of breathing protection by covering mouths and noses with a damp clothes.
- If you are told there is danger of explosion, close the window shades, blinds, or curtains; to avoid injuries, keep children away from windows.
- Provider should stay in touch with responding agencies/emergency personnel.

- Provider and emergency personnel in charge will determine whether to stay sheltered in place or to evacuate.
- Advise parents not to pick children up from the childcare until the incident is over. The presence of parents searching for their children will only cause confusion and may lead to exposure to toxic chemicals. Once sheltered in place you will not want to open the door to let parents in and out.
- Have emergency disaster supplies and emergency contact cards handy.
- Once the incident is over; inform parents, take down plastic, turn ventilation system back on.
- Provider will report incident to licensor.
- Provider will complete a written incident report at that earliest opportunity; Incident reports are stored at Children Are Special.

## Fire Alarm/Emergency

If smoke or fire is seen or if there is another emergency requiring evacuation:

- Activate fire alarm if not sounding
- Evacuate children and other individuals in the home (follow *Building Evacuation procedure* in this plan); drop and crawl to avoid smoke and close doors behind you; take the following items with you:
  - disaster supplies which are stored in the back-storage area
  - attendance sheets
  - children's emergency and medical information/supplies
  - cell phone, if available
- Call 911 from outside the center.
- Take attendance; if safe to do so, search the home for anyone missing.
- Provider or designee will check area of concern and use fire extinguisher if safe to do so.

Have the following items ready for police and fire personnel:

- Number of children in care, staff, volunteers, and visitors
- Knowledge of anyone remaining in the home
- Floor plan and internal systems information (see *Appendix C*)
- If it is determined that the building is unsafe, move children to alternate site location; follow *Site Evacuation procedure* in this plan.
- Provider will notify parents of evacuation and alternate site location, if applicable.
- Provider will report incident to licensor.
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.
- All parents will be notified of incident.

## Gas Leak

If gas odor is detected:

- DO NOT activate the fire alarm system or any other electrical equipment
- Evacuate children and other individuals in the home (see *Building Evacuation procedure* in this plan) and close doors behind you but leave a window open; take

the following items with you:

- disaster supplies which are stored in the back-storage area
  - attendance sheets
  - children's emergency and medical information/supplies
  - cell phone, if available
- Call 911 from outside the building.
  - Move children to a designated area no less than one block from the childcare; this location is *The Moses Lake High School Gym*.
  - Take attendance
  - If possible, turn gas off with the wrench stored in the back-storage area.
  - Have the following items ready for police and fire personnel:
    - Location of leak, if known
    - Number of children in care, assistants, family members, volunteers, and visitors.
    - Knowledge of anyone remaining in the home
    - Floor plan and internal systems information (see *Appendix C*)
  - Provider will notify parents immediately if evacuation looks to be long term or if children are moved to alternate site location, if necessary to move to the alternate site location, follow *Site Evacuation procedure* in this plan
  - Provider will report incident to licensor.
  - Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.
  - All parents will be notified of incident.

## **External Hazardous Materials Accident**

- Call 911 immediately; have staff initiate the *Shelter in Place procedure* in this plan unless directed to do otherwise by emergency personnel via the dispatcher.

Have the following items ready for police and fire personnel:

- Location and description (liquid, gas) of hazard, if known
  - Number of children in care, assistants, family members, volunteers, and visitors
  - Floor plan and internal systems information (see *appendix C*)
- Follow instructions given by responding agency for either *Shelter in Place procedure* or *Building and Site Evacuation procedure* in this plan.
  - If evacuated, call on transportation resource to take children to alternate site; our transportation resource is *the Moses Lake Bus Garage*.
  - Notify parents of move to alternate site location.
  - If Shelter-in-Place occurs, and media attention is significant, call parents to let them know of situation.
  - Provider will report incident to licensor.
  - Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.
  - All parents will be notified of incident.



## **Internal Hazardous Materials Accident**

In the event a person comes into direct contact with a suspected hazardous material, follow safety precautions posted on-site or listed on the container. Call the hospital emergency room for additional instruction. Contact poison control center for common household product poisonings.

- Call 911 if additional assistance is needed
- Provider will report incident to licenser
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special

It is strongly suggested that all potentially hazardous materials be removed from within the center. Household toxic chemicals should be stored separately, locked up, and stationary so as not to fall over in the event of an earthquake.

## **Power Outage**

Provider or designee will try to locate the problem and activate alternate lighting system; flashlights and batteries are in *all classrooms*

Call 911 if concerned about a fire or safety hazard

Unplug all electrical equipment; turn off all but one light

Provider to contact property manager/landlord, if needed

Provider to call PUD

Call Grant County Health District to help determine if childcare needs to be closed. Also, consider the following items in making your decision:

- Can you safely prepare/store food?
- Do you need to move to an alternate site?
- Can you safely transport the children?
- How will you notify parents?

All parents will be notified if power outage is prolonged

Provider will report incident to licenser

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special

## **Storms & Snow**

Provider will determine prior to opening hours, whether to open the childcare center; families will be notified by automated phone call prior to 6:00 AM. We may decide to close for the day or possibly delay our opening time to make sure all staff and families are able to commute to work and daycare safely.

If weather conditions prevent a parent or legal guardian from reaching the child care to recover a child, the provider will care for the child (maintaining proper child: staff ratios) until such time as the parent, legal guardian, or emergency contact person can safely claim the child. The disaster supplies will be used as needed.

If the above persons cannot claim the child within 72 hours of the childcare closing, the provider will contact police. Child may be transported to a Child Protective Services care site if necessary.

Provider will report incident to licensor

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

## **Earthquake**

In the event of ground movement, the following procedures should be carried out:

Provider and assistants “drop, cover, and hold.” Direct all children to “**DROP, COVER and HOLD**” and remain that way until the earth stops moving – stay away from windows, bookcases, and filing cabinets. Hold onto the item you are using as a cover, if it moves, move with it. Keep talking to children until it is safe to move.

If no items are available for cover, crouch by a load-bearing wall and cover your head with your arms. Instruct children to do the same.

If outside “drop, cover and hold,” keeping away from glass, bricks, and power lines. If you are outside near a building and there is no safer location, take cover in a doorway to protect yourself and children.

### **When the earthquake stops the following procedures should be carried out:**

Provider and other adults check themselves and children for any injuries

Check evacuation routes for damage (also see *Tsunami procedure* if in a Tsunami area)

Evacuate children and adults (see *Building Evacuation* section of this plan if necessary) and close doors behind you; take the following items with you:

- disaster supplies which are stored in the back-storage area
- attendance sheets
- children’s emergency and medical information/supplies
- cell phone, if available

Adults will render first aid to those who need it

Provider will take attendance outside to account for all children and adults

Check utilities for disruption/damage (gas, water, sewer) if you smell gas, turn the gas off with the wrench stored in the back-storage area. Also, see *Gas Leak* section of this plan.

Have an individual familiar with building assessment inspect the exterior of the building following the post-earthquake damage assessment list in *Appendix C* and report findings to the Provider.

Determine if it is safe for someone to go into center to locate anyone missing or injured.

Listen to the radio for information on the surrounding area.

Determine status of emergency supplies and equipment.

Call childcare's out-of-area contact with information on the childcare's status (injuries, evacuation, children remaining in care, children who have been picked up)

Have individual familiar with building assessment evaluate the interior of the building and determine if it is safe to move children back into the building or to whether it is best to evacuate; follow the post-earthquake damage assessment list in *Appendix C* in this plan and report findings to the Provider.

If it is decided to evacuate to an alternate location, post a notice indicating your new location, date and time you left; follow the *Site Evacuation* procedure in this plan. The notice will be posted on the front door.

Call parents with childcare status information.

If parents cannot be contacted after 4 hours, the child's out-of-area contact will be called if possible.

Provider will report incident to licensor.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

“DROP, COVER and HOLD” should be taught and practiced with the children at least once a month.

## **Volcanic Eruption**

A volcanic eruption will likely also be accompanied by other disasters such as earthquakes, flooding, landslides or mudflows (also known as lahars).

When notified of possible eruption (if within inundation area), provider or designee will listen to the radio for volcano/lahar warning reports and evacuation directions.

If a lahar warning is issued and evacuation directives given, move children and staff to

the alternate site location; follow *Site Evacuation* procedure in this plan.

Provider will notify all parents immediately if evacuation takes place.

If not in the inundation area but volcanic ash fall is imminent close doors, windows and dampers. Place damp towels at door thresholds and other draft sources, tape drafty windows.

Protect dust sensitive electronics (e.g., computers, machinery)

Dust often using vacuum attachments rather than dust cloths, which may become abrasive.

Remove outdoor clothing before entering the building if possible – ask parents to remove their shoes and shake off as much ash as they can before entering the lobby of the childcare center.

When going outside use dust masks and eye protection. If you don't have a dust mask, use a wet handkerchief.

Prior to sweeping, dampen ash to ease removal. Be careful to not wash ash into drainpipes, sewers, storm drains etc. Seek advice from officials regarding disposal of volcanic ash in your community.

Keep children indoors; discourage active play in dusty settings. Dust masks do not fit well on small children.

The weight of ash can cause roofs to collapse. Since most roofs cannot support more than four inches of wet ash, keep roofs free of thick accumulation. Once ash fall stops, sweep or shovel ash from roof's and gutters. A one-inch layer of ash weighs 5-10 pounds per square foot when dry, but 10-15 pounds per square foot when wet. Wear a dust mask and use precautions on ladders and roofs.

Put stoppers in the tops of your drainpipes (at the gutters)

Minimize driving (change oil and air filters frequently) use ample windshield washer fluid.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

Provider will call insurance company (if needed)

## **Flooding**

If the childcare is in a flood prone area:

During severe weather, provider or designee will listen to the radio for flood watch and

flood warning reports

If a flood warning is issued, move children to the alternate site location; follow *Site Evacuation* procedure in this plan.

Provider will notify all parents immediately.

Provider will report incident to licensor.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

Provider will call insurance company (if needed)

## **Landslides**

If the childcare is in landslide prone area:

During severe weather, provider or designee will listen to radio for watch and warning reports, especially during snowmelt and saturating rain events.

Provider will keep an eye out for increased water/mud flow downhill, tree movement/leaning, and sounds of earth movement.

If a landslide seems imminent or a warning is issued, move children to the alternate site location; follow *Site Evacuation* procedure in this plan.

Provider will notify all parents immediately.

Provider will report incident to licensor.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

Provider will call insurance company (if needed)

## **Missing Child**

Call 911 immediately; provide the following information:

- Child's name and age
- Address
- Physical and clothing description of the child, including any distinguishing marks such as visible scars or birthmarks
- Medical status, if appropriate
- Time and location the child was last seen
- Person with whom the child was last seen

Search home and premises again.

Have child's information including picture, if possible, available for the police upon their arrival.

Provider will notify parents of missing child and attempt confirmation that child is with family; if not - inform parents of situation and steps taken.

Provider will report incident to licensor and Child Protective Services.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

## **Kidnapping**

Call 911 immediately; provide the following information:

- Child's name and age
- Address
- Physical and clothing description of the child, including any distinguishing marks such as visible scars or birthmarks
- Physical and clothing description of the suspect
- Medical status, if appropriate
- Time and location the child was last seen
- Vehicle information and direction of travel

Follow *Emergency Lockdown procedure* in this plan.

Have child's information including picture, if possible, available for the police upon their arrival.

Provider will notify parents of missing child; inform parents of situation and steps taken.

Provider will report incident to licensor and Child Protective Services.

Provider will implement *Crisis Response procedure* in this plan.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

## **Child Abuse**

Provider will make a report to Child Protective Services and the licensor (see list under next item for the type of information that may be asked).

Provider and appropriate staff will write down the following information on an incident report\*:

- Date and time of calls to Child Protective Services and Department of Early Learning (licensor)
- Child's name
- Child's age/birthdate
- Address
- Name and address of parent or guardian and other children in the home (if known)
- Any statements made by the child (but do NOT interview them)

- The nature and extent of the injury or injuries, neglect, and/or sexual abuse
  - Any evidence of previous incidences of abuse or neglect including nature and extent
  - Any other information which may be helpful in establishing the cause of the child's injury or injuries, neglect or death and the identity of the perpetrator or perpetrators
- \*Note: These reports may become legal documents. Confidentiality of these reports must be strictly observed.

Incident reports are stored at Children Are Special.

### **Assault on Child or Staff**

Call 911 if any medical treatment is needed or if police are required (if in doubt – go ahead and call)

Provider will follow “Intruder Alert Procedure” in the *Intruder Alert / Lockdown procedure* in this plan.

Follow *Lockdown or Lockout procedure* in this plan as appropriate.

An adult will stay with the victim.

Victim's family will be notified by *staff of Children Are Special* when safe to do so.

If medical treatment is required, provider will call Child Protective Services.

Provider will report incident to licensor.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

### ***Intruder Alert / Lockdown***

If a person(s) comes into your center, assess the situation. If you are uneasy or suspicious of the person(s) immediately have someone call 911.

**If a weapon is present, DO NOT CONFRONT. Call 911.** Initiate a lockdown if possible.

If a weapon is **suspected**, confront the intruder in the following manner:

- Provider should try to engage the intruder in conversation, directing toward an exterior door of the home
- Inform the individual of the policy that all visitors need to sign in and guide him/her to the area where that is done.
- Remain calm and avoid sudden moves or gestures
- Try not to raise your voice – but, if necessary, do so decisively and with clarity.
- Call 911 as soon as possible (or direct another individual to do so).

- Initiate Intruder Alert / Lockdown Procedure

If **no weapon** is suspected, confront the intruder in the following manner:

- Approach the individual in a non-confrontational manner; bring another adult with you if possible.
- Introduce yourself and the person with you to the individual in a non-confrontational way.
- Ask the individual who they are and how you can be of assistance.
- Inform the individual of the policy that all visitors need to sign in and guide him/her to an area far away from the children.
- If the individual refuses, do not confront him/her.
- Call 911 as soon as possible or direct another individual to do so.
- Initiate Intruder Alert / Lockdown procedure.

If it is determined that the safety and health of children and staff are in jeopardy begin the *Intruder Alert procedure*.

If the intruder is already inside the home, call 911.

Gather all the children into one room away from the intruder

Lock all doors, close and lock all windows, cover windows, and turn off lights; use a doorstop or other wedge to keep the door closed from the inside.

Keep children away from windows and doors; position children in a safe place against walls or on the floor; position children behind a bookcase or turn a table on its side to use as a buffer.

Maintain as calm an atmosphere as you can. Provide quiet toys/items to help keep children quiet.

Upon arrival, the local police, in conjunction with the Provider, will assume controlling responsibility and may evacuate the childcare per police standard operating procedures.

When “All Clear” announcement is made by emergency personnel, normal activities should be resumed as soon as possible.

### ***Building Lockout***

If the suspected intruder is not yet in the building, a lockout will be initiated.

Any children outside in the yard must be brought inside immediately.

Immediately lock all exterior doors, close and lock all windows, and cover all windows.

Provider or designee will immediately call 911 and stay on the phone until help arrives; await further instructions from emergency response personnel.



Keep children away from windows and exterior doors.

Provider and other adults will maintain (as best they can) a calm atmosphere in the home, keeping alert to emotional needs of the children. Activity within the home may continue, but no access to the outside is permitted.

Provider will keep all children in the home until an all-clear signal has been given.

Upon arrival, the local police, in conjunction with the Provider will assume controlling responsibility and may evacuate the home per police standard operating procedures.

When “All Clear” is heard, the provider will apprise other individuals in the home of the situation and counsel children. When the threat has been eliminated, normal activities should be resumed as soon as possible.

Provider will apprise parents of all lockdowns or lockouts whether practice or real.

Provider will report incident to licensor.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

## **Flu Outbreak**

Symptoms of flu include fever, headache, extreme tiredness, dry cough, sore throat, runny or stuffy nose, and muscle aches. Nausea, vomiting, and diarrhea are also common in children with the flu. Flu is spread from person to person through coughs and sneezes and indirectly through contaminated objects. For this reason, it is very important to isolate children with flu symptoms and have their parents or guardians pick them up as soon as possible. During a flu outbreak, as determined by the local health authority, additional steps should be taken to prevent the spread of disease. Make sure to keep emergency disaster supplies and emergency contact cards handy.

Check all children upon arrival for flu symptoms before the parents leave the childcare. Any children who have these symptoms should not be permitted to stay at the childcare and should be asked to leave with the parent/guardian.

All individuals, including staff, parents, and children, should wash their hands with soap and warm water upon entering the childcare home.

If a child or staff member develops flu-like symptoms while at the childcare, physically separate the sick person. Sick children will stay in an isolation area located *in the lobby area* until a parent or guardian is able to pick them up. Limit contact with the ill child to the greatest extent possible.

Call the parent/guardian to arrange for pick-up of the ill child. Insist that they come immediately.

Send sick assistants' home.

Plenty of fluids will be provided to ill children.

All persons at the childcare should carefully follow recommendations for hand hygiene after contact with an infected person or the environment in which the infected person was.

Place all used tissues in a bag and dispose of with other waste. A bag will be placed next to the ill child in the isolation area for this purpose.

All parents will be notified of the illness.

Sanitize the environment in which the sick child/staff had been located. Sanitize any toys or objects the sick child handled. Other cleaning and sanitizing activities should be done at the normal times.

Wash and sanitize any bedding that was used by the sick child. Care should be taken when handling soiled laundry (i.e. avoid holding the laundry close to your body) to avoid self-contamination. Wash hands after doing laundry.

Soiled dishes and eating utensils should be cleaned and sanitized as usual.

Any adult or child who has been in the childcare with a sick individual is at risk for developing influenza. Monitor individuals continually for flu symptoms. Consult with healthcare providers to determine whether a flu vaccine, if available or antiviral prophylaxis should be considered.

Keep in contact with the local health authority and the childcare licensor to determine if and when the childcare should be closed.

Provider will complete a written incident report at the earliest opportunity; Incident reports are stored at Children Are Special.

## **Field Trip Incident**

Before leaving for a field trip, make sure the provider has the following information:

- Child list by assigned vehicle.
- Supervisor/Chaperone list by assigned vehicle.
- Map of intended route
- Children's emergency and medical information/supplies.
- Name and license number of the driver, vehicle license number.
- List of important phone numbers significant to the trip (including children's emergency contact information and chaperone cell phone numbers).
- First aid kit

Attend to any medical needs if there are injuries or complaints of pain

Call 911 if emergency medical treatment or police are required

Provider will contact parents and give update of actions being taken; indicate meeting locations or pick-up times at the childcare

Provider will report incident to licensor

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special

Provider will call insurance company (if needed)

## **Bomb Threat**

During the Bomb Threat Call:

- **DO NOT HANG UP!** Keep the conversation going and attempt to get the following information:
  - Where is the bomb?
  - What time will it go off?
  - What kind of bomb is it?
  - Who are you?
  - Why is this going to happen?

Listen for the following:

- Voice of male or female.
- Speech impediment or accent.
- What kind of background noise is there?
- Cell phone or land-line.

Note the following: Time \_\_\_\_\_ Date \_\_\_\_\_

Try to get the attention of another adult and have that person call 911 and initiate a lockdown.

Call 911 immediately after the call.

Initiate a lockdown; follow *Lockdown procedure* in this plan.

Confer with fire and police about evacuation.

Have floor plan ready for police/fire personnel. (*see appendix C*)

Glance around the home for suspicious items. (DO NOT MOVE SUSPICIOUS ITEMS)

If the decision is made to evacuate, follow *Building and Site Evacuation procedure* in this plan.

Provider will notify parents if evacuated or moved to alternate location.

Provider will report incident to licensor.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.

All parents will be notified of incident.

## **Suspicious Mail or Package**

Do not touch, smell, or taste unknown substances.

Cover substance with paper, trash can, clothes, or other material.

Evacuate and seal off room.

Wash hands thoroughly.

Mark room as "Dangerous"

Call 911

Make a list of all adults and children present in the room at the time of the incident to provide to local health authorities and the police.

Provider will inform all parents of the incident.

Provider will report incident to licensor.

Provider will complete a written incident report at the earliest opportunity; incident reports are stored at Children Are Special.



## Emergency Response Information

Dear Parent or Family,

During a disaster, communication may become challenging. Often it is easier to contact a long-distance phone number than a local or cell number. Our childcare is establishing an out-of-area number to relay information throughout a disaster. Please put this number in a convenient and accessible place so that you are able to get information about your child should local calling become challenging. Our out-of-area contact is:

Name: Leigh Ramsey

Phone #: 425-931-3894

I encourage you to familiarize yourself with the disaster plans and policies established for our childcare. If you have not already been given this information, it will be provided for you by:

Date: \_\_\_\_\_

Please sign and return the following portion

I have received information regarding your childcare's out-of-area emergency contact.

I understand that your childcare has established policies to respond appropriately to a disaster.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please provide the following information for the childcare's emergency records:

Child's name: \_\_\_\_\_

Child's out-of-area contact (100+ miles away): \_\_\_\_\_

\_\_\_\_\_

Emergency contact (*friend, family or loved-one*): \_\_\_\_\_

Local contact (*the "nearest" acquaintance*): \_\_\_\_\_

## Appendix B: Disaster Supply Lists

### ***Our Disaster Kits contain the following items:***

Anti-diarrhea medicine  
Batteries  
Blankets (compact or space)  
Bleach, unscented  
Books or games  
Bucket  
Can opener (manual)  
Comfort kits for children (*see below*)  
Copies of important papers (insurance documents, utility account numbers, etc)  
Crowbar  
Disaster Plan (copy)  
Disposable diapers/wipes  
Disposable face masks

### **First Aid Kit (for disasters)**

- Adhesive bandages
- Acetaminophen (children's)
- Alcohol wipes
- Anti-diarrheal medication
- Bandages (roller gauze, elastic)
- Butterfly adhesive strips
- Cotton balls
- Eye drops (saline)
- First aid book
- Gauze dressing
- Gloves, disposable
- Medications or equipment for children/staff with special needs
- Pocket CPR mask
- Safety pins
- Sanitary napkins
- Scissors
- Splints
- Tape, 2" non-allergenic
- Tissue
- Thermometer
- Tweezers

Emergency information cards for children  
Extra clothing  
Eye dropper (for bleach)  
Flashlights  
Food (3 day supply)  
Gloves (heavy material/leather)  
Hand sanitizer  
Infant care supplies (bottles, formula, baby food, diapers)  
Lighter or matches  
Money, change and small bills

Office supplies (pen, paper, tape)  
 Paper towels  
 Pet supplies (if appropriate)  
 PineSol® or similar product  
 Plastic garbage bags (large, one per child for rain protection)  
 Plastic garbage bags (medium, for toilets)  
 Plastic kitchen supplies  
 Pliers  
 Radio (portable)  
 Soap  
 Tarp or tent  
 Tissues  
 Toilet paper  
 Water (3-day supply)  
 Whistle  
 Wrench

Emergency Kit Annual Check – Done Every January

Year	2020	2021	2022	2023	2024	2025	2026	2027	2028
Signature									

Annual Disaster Preparedness Trainings

Year	2020	2021	2022	2023	2024	2025	2026	2027	2028
Signature									