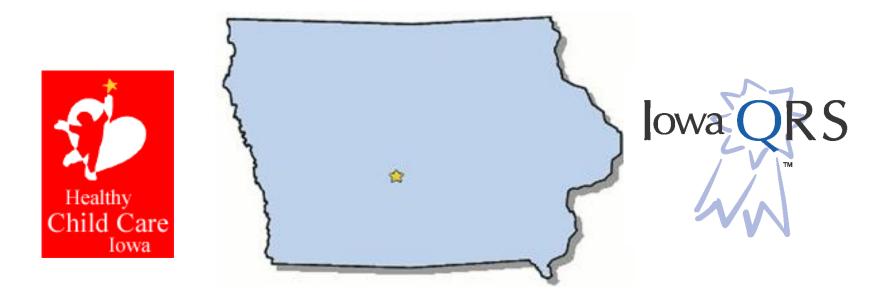
# Emergency Preparedness Planning Document

# For Iowa Child Development Home Providers & Child Care Homes



#### 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*. In addition, small family child care providers and the children in their care are particularly vulnerable in emergency situations for the following reasons:

- Providers are often alone with multiple dependent young children.
- Providers are often somewhat isolated, spending the majority of the day alone with the children. If the provider becomes severely injured or ill and is unable to care for their self or the children, that event can become the emergency situation, and it could be many hours before anyone becomes aware that there is a problem.
- Emergency services may not be aware of the large number of young children in the home or adult to young child ratio, and therefore, not bring enough supplies or be prepared to search and rescue 6-8 dependent young children.
- Providers may experience divided loyalties with family members, children in care, family pets, personal property, and business/income property to protect and consider during an emergency situation.
- Providers may have limited income, may not see themselves as operating a business, and may not be fully insured as a child care business.

However, child care providers 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 vulnerable children and to be available so parents have a safe place for their children while they restore the community.

#### Don't I Already Have To Do This To Be Registered?

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

#### 441-110.5(1) health and safety

*j.* Emergency plans in case of man-made or natural disaster shall be written and posted by the primary and secondary exits. The plans shall clearly map building evacuation routes and tornado and flood shelter areas.

*k.* Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file.

*v*. The provider shall have written policy and procedures for responding to health-related emergencies.

*w*. The provider shall document all injuries that require first aid or medical care using an injury report form. The form shall be completed on the date of occurrence, shared with the parent, and maintained in the child's file.

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 adult typically present in the home. Agreements will be needed for transportation services, if you do not have your own vehicle to transport, and for securing shelter sites to assure that the plan decided on can actually be implemented.

#### Who Can Help Me In Developing This Plan?

This emergency plan cannot likely be written in one sitting. It should not be written by one person, but by a small team consisting of the provider, the provider's spouse or other adults in the home, and possibly a parent. In addition, having a community member such as: Local Emergency Management or a member of EMS, a Child Care Nurse Consultant, or CCR&R Consultant review your plan and provide guidance would be beneficial. You may want to seek advice from your legal counsel on areas dealing with parental rights, laws, liability, contracts, legal interpretations, etc. These agencies or staff are not "approving" your plan but can provide you with assistance, resources, and ideas for you to consider.

You may feel you need additional training or information prior to writing this 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 for training and/or consultation. <u>www.iowaccrr.org</u>

#### I Care For Children With Special Needs - Is There Additional Planning I Should Do?

Providers are more and more likely to be caring for children with special needs. In addition, you or someone in your household may also have special needs. Some of these special needs may come to mind quickly such as chronic health conditions, developmental delays, and individuals with mobility or visual impairments. Infants and young children also have special needs in 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 you, your family members and the children in care all able to exit out the egress window? Do you have the physical size, mobility, strength, and health to fully and quickly assist all the children out the egress window to assure the children's safety? Can you climb out of the egress window and continue the evacuation plan with the children? Have you practiced full drills, actually lifting everyone out and then climbing out and timing yourself to see how long it took and what problems you encountered? These are all things you may want to consider.

Supplies are an additional area to plan for in being prepared for children 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 determine if they apply to you and the children you serve.

Young children will have additional developmental and social-emotional needs due to their age and the way they process what is happening. Planning and practicing with children evacuating and relocating will decrease anxiety. Putting together a lesson plan of activities with the minimal supplies needed for those activities can help quickly transition the children into songs, stories, finger-plays and other activities that will distract and keep the children busy and feeling secure.

#### Why Do I Need To Involve My Own Family In Developing The Plan?

Developing a plan for your child care business will also benefit your own family. The planning and actions you would take with the children in your care are similar, in many ways, to the ones you would take with your own family. Having an emergency preparedness plan that includes your family will help you feel more confident that your loved ones are safe and prepared for as you plan for your business and the children in your care.

I. Child Care Provider's Information		
Child care provider's Name/Name of program		
Street address		
City		
State		
Zip code		
Telephone number		
Alternate phone number		
E-mail address		
Emergency out of area telephone number		
(Specific number or categories not required)	Members of My Emergency Planning Team	
Other household adult		
Child care parent		
Other (legal counsel)		
	Contact Information for Others With Whom This Plan is Coordinated	
(Neighbors)		
(Businesses; schools)		
Local Emergency Management		
CCR&R		
Insurance provider		
Others		

This introductory paragraph can be deleted from your plan – it has been provided to assist you in writing the plan: **Shelter-in-Place** is the term used when there is an emergency, typically weather related, that makes it unsafe to leave your home. Examples: Winter storm, severe thunderstorm/wind storm, tornado, etc. For home providers where transporting the number of children in care may not be possible, and especially for rural providers shelter-in-place will likely be one of the most often used and most feasibly planned for emergencies. This plan requires that you have on hand 24 hours-worth of supplies, if you know from past experience that roads to your area are typically not cleared after storms for longer than that, etc. you will want to have more than 24 hours of supplies on hand at all times. Through careful planning, being trained in first aid and CPR, having plenty of supplies on hand, having a generator or a wood stove to supply your home with heat in the winter, and properly maintaining and operating these types of equipment will mean you can care for yourself, your household and the children in your care for an extended period of time when necessary.

A second variation of shelter-in-place is a lock down. A **lock down** is typically a shelter-in-place to protect you and the children from a violent situation outside. Examples: Domestic violence between two parents, non-custodial parent attempts to pick up child and situation is escalating, escaped prisoner or mentally ill patient in neighborhood, 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 in additional danger. Everyone needs to plan for this type of event.

In addition, parents wanting to pick up their child, while you are in lock down, sealed in or not available to open the door will be an additional problem to think through. Parents have open access to their children; however, what risk will you put yourself, your family and all the other children in to allow parents' access to their child at that precarious moment.

II. Shelter-in-Place Plan		
Storm shelter location(s)		
Procedure for alerting children and household to		
take shelter. If you have children and household		
members in different areas of the home how will		
you prioritize getting them and how will you get		
them all to your shelter-in-place location. How long		
will it take?		
Special needs of children and household members		
and plan for accommodating and adapting shelter-		
in-place to meet those needs		
What medical emergencies are you able to handle		
Person responsible for inventory, maintaining, and		
refreshing emergency supplies and how often are		

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

supplies checked	
Location of emergency supplies for shelter-in-place	
Procedure and person 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. How will you prepare the room	
while maintaining supervision and other child care	
duties?	
Procedures for assuring medications, medical or	
adaptive equipment and supplies for children with	
special needs are secured in the shelter-in-place	
location	
Procedure for accounting for all children and	
household during a shelter-in-place emergency and	
procedures to be followed if a child or household	
member (including a pet) gets left out of the safe	
room	
Procedure for communicating with parents, family	
members, or other emergency contacts that child	
care 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?)	
How will you determine it is safe to leave the	
shelter-in-place area? Who makes the final decision?	
How and when shelter-in-place warning system	
will be tested and procedures for testing the shelter-	
in-place plan. (how often, rotation of times to	
include household members, 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 test)	
	Lock Down
Procedures to assure rapid lock down of the home,	
or an area of the home in the event of an intruder,	
hostage situation, or other violent situation.	
(Include procedures for internal threat and external)	
Procedure for rapidly or simultaneously alerting	
household members and all children of lock down	
(If some are located outside, or in different area of	
house, etc.)	
Special needs of household members 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 household members 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	
household members during a lock down emergency	
and procedures to be followed if a child or	
household member has been locked out of safe	
areas	
Procedures to be followed if there are hostages,	
wounded or deceased household members or	
children	
Procedures for lock-down off site (field trip, in	
vehicle, etc.)	
How will you determine it is safe to leave/end the	
lockdown? Who makes the final decision?	
Procedure for communicating with parents, family	
members, or other emergency contacts that facility	

is in lock down and help is needed	
Procedure for parent/guardian or emergency contact attempting to pick up or drop off child during lock down	
Procedures for communicating with registration staff that you needed to utilize lock down	

*This introductory paragraph can be deleted from your plan – it has been provided to assist you in writing the plan:* 

**Evacuation** refers to getting out of the house (structure). It may also include leaving the property if circumstances indicate the need to be further away from the building. Assembly site refers to the place you all 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 plan for relocating in the next section of this plan. **Evacuation Warning System** – fire alarm, ringing a bell, or however you alert household to evacuate. Utilize the way that will be used in a real emergency so that children and household become accustomed to that noise and way of being alerted.

*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			
Person responsible for posting and maintaining			
building floor plan that includes primary and			
secondary routes of evacuation; location of fire alarm,			
fire extinguisher, interior safe room, and exterior			
assembly area.			
Person responsible, procedures and locations for			
assuring essential equipment is evacuated with			
children and household members (special needs			
equipment, emergency medications, first aid			
supplies, emergency supplies)			
Household members and persons (substitutes) 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			
Procedure and person responsible for securing			
essential documents to be carried off site on			
immediate notice			
Procedure for accounting for all children and	(Simply stating a head count is not enough – how often, how often <u>name</u>		

household members during an emergency including the procedures to be followed if a child or adult is missing	<u>to face</u> , 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)
Procedures for ensuring adequate supervision of the children during emergencies, including while at the assembly site	(Consider where placement of assembly site, often providers will place assembly site in a corner of fenced playground with exits that require going near house. If house 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 at sidewalk in front of house near busy streets, in driveway, this can also place children in direct path of arriving emergency vehicles-loud, scary, dangerous and curious kids hard to manage situation.)
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	(Equipment needed?)
Procedure for alerting all household members, staff and children of evacuation (outside if alarm doesn't sound outside, etc.)	
Procedure for pets	(N/A if <u>no</u> pets are onsite, children and household members 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)
How will you determine it is safe to go back inside? Who makes the final decision?	(What steps will you take in making the decision)
Alter to reflect your household:	Other household members' responsibilities during evacuation: (Be specific)
Example: Spouse	
Example: 15 year old daughter	
Example; 8 year old son	
How and when evacuation warning system will be tested and procedures for exercising the evacuation plan. (how often, household advance notification?, rotation of times to include household, procedure for sounding alarm)	(Be specific)
Procedures for evaluating the evacuation exercise (who and how evaluated; how changes are implemented in plan based on findings of exercise)	(Be specific)

*This introductory paragraph can be deleted from your plan – it has been provided to assist you in writing the plan:* 

Most child care providers would prefer to not have to relocate on a temporary basis, they would prefer to call parents to pick up the 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. You may be able to evacuate safely and then a situation may escalate and you 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. Your home may lose power due to a wind storm and you safely relocate the children to your 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 contract or signed written 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 written agreement 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 provider, etc.

*Nearby:* Walking distance, this is for building (home, property) specific emergencies, a fire without explosion risk, heat 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? For rural providers it is possible that a walking distance relocation site will not be available, the closest neighbor may be a mile or more away. If rural providers have other buildings on the property with separate utilities that might be a viable option if power or water is cut off to the house, that might be one of the nearby relocation sites with the alternate being a neighbor, etc. These are general guidelines, each situation is unique, and the principles will need to be applied in the manner most appropriate. The most important factor will be to keep health and safety the foremost concern, and that appropriate options are thoroughly planned out in advance.

*Mid-distance:* Transportation will be required to relocate to this site. Depending on the location of your home, this may be in another part of the metropolitan area, or in a neighboring community. Plan your mid-distance relocation site to cover you for neighborhood type events. Choose an alternate in the opposite direction of your primary when possible. Consider natural and man-made hazards in your area, and the types of emergencies your home and neighborhood are 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. 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 you relocate to. Chain of command: Order in which authority, information and responsibility flow for your business.

IV. Relocation Plan		
	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, and fax number). Name/business, contact information,		
map/directions to each relocation site; hours		
of operation-if applicable; procedure for		
accessing building 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		(Attach site layout of area to be
set up (brought with, provided by location,	(Attach site layout of area to be used	used for child care and directions for set
stored at location). Prioritization for set up,	for child care and directions for set up).	up).
and person responsible for set up. Site layout		
and directions for set up attached.		
List of known and anticipated hazards at relocation site and temporary measures for	(Be specific, simply stating children	(Be specific, simply stating
assuring safety. Note the location of hazards on the attached site layout.	will be closely supervised is not adequate).	<i>children will be closely supervised is not adequate).</i>
Procedures for assuring children are safe,		(De anosifie, simply stating
closely supervised, and appropriately cared	(Be specific, simply stating children	<i>(Be specific, simply stating children will be closely supervised is</i>
for during site set up.	will be closely supervised is not adequate).	not adequate).
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.		

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

Procedure if necessary items are missing or needed. How items will be obtained.		
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.	Impact on ratio, monitoring for increasing severity, is away from other children feasible?)	Impact on ratio, monitoring for increasing severity, is away from other children feasible?)
Site specific chain of command for decision making.	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)
Roles and responsibilities of host facility and host facility employees/residents/visitors.	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)
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.	(Be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate).	(Be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate).
Procedures for extended care including provider sleeping & breaks; safely conserving food, water, and sanitation supplies.		
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.		

<ul> <li>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.</li> <li>Procedures for identification of parents, guardians, or emergency contacts during times of disaster. (Will i.d. be required? A code or "safe word"?)</li> </ul>		
Procedure for how, when, and to whom the child will be released if the parent, guardian, or emergency contacts cannot be reached.		
	Primary Mid-distance Relocation Site	Alternate Mid-distance Relocation Site
Location to which we will evacuate that is mid-distance (street address, phone number, contact person, e-mail, and fax number).		
Name/business, contact information, map/directions to each relocation site; hours of operation-if applicable; procedure for accessing building 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 set up. Site layout and directions for set up attached.	(Attach site layout of area to be used for child care and directions for set up).	(Attach site layout of area to be used for child care and directions for set up).
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.	(Be specific, simply stating children will be closely supervised is not adequate)	(Be specific, simply stating children will be closely supervised is not adequate)
Procedures for assuring children are safe, closely supervised, and appropriately cared	(Be specific, simply stating children will be closely supervised is not adequate)	(Be specific, simply stating children will be closely supervised is

for during site set up.		not adequate)
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 or		
needed. How items will be obtained.		
Post Set Up	Primary Mid-distance Relocation Site	Alternate Mid-distance Relocation (strongly recommended – not required for QRS)
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.	Impact on ratio, monitoring for increasing severity, is away from other children feasible?)	Impact on ratio, monitoring for increasing severity, is away from other children feasible?)
Site specific chain of command for decision making.	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)
Roles and responsibilities of host facility and host facility employees/residents/visitors.	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)	(How much of this is included in your written agreement, how clearly is it communicated and mutually agreed to?)
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.	(Be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate).	(Be specific, simply stating children will be closely supervised or that unauthorized access won't be allowed is not adequate).
Procedures for extended care including provider sleeping & breaks; safely conserving food, water, and sanitation		

supplies.		
	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.		
Procedures for identification of parents, guardians, or emergency contacts during times of disaster. (Will i.d. be required? A code or "safe word"?)		
Procedure for how, when, and to whom the child will be released if the parent, guardian, or emergency contacts cannot be reached.		
	Primary Distant Relocation Site	Alternate Distant Relocation (Strongly recommended – not required for QRS)
Name/business, contact information, map/directions to each relocation site; hours of operation-if applicable; procedure for accessing building 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 set up. Site layout and directions for set up attached.	(Attach site layout of area to be used for child care and directions for set up).	

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.	(Be specific, simply stating children will be closely supervised is not adequate)	
Procedures for assuring children are safe, closely supervised, and appropriately cared for during site set up.	(Be specific, simply stating children will be closely supervised is not adequate)	
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 or needed. How items will be obtained.		
Name/business, contact information, map/directions to each relocation site; hours of operation-if applicable; procedure for accessing building if locked.		
	Post Se	et Up
Plan of activities, and behavior and mental health support strategies.	Post Se	et Up
Plan of activities, and behavior and mental	Post Se	et Up
Plan of activities, and behavior and mental health support strategies.		et Up
Plan of activities, and behavior and mental health support strategies. Procedures for food preparation and serving.	Post Se (Impact on ratio, monitoring for increasing severity, is away from other children feasible?)	et Up
Plan of activities, and behavior and mental health support strategies. Procedures for food preparation and serving. Procedures for sleeping.	(Impact on ratio, monitoring for increasing severity, is away from other	et Up
<ul> <li>Plan of activities, and behavior and mental health support strategies.</li> <li>Procedures for food preparation and serving.</li> <li>Procedures for sleeping.</li> <li>Procedures for ill or injured children/staff.</li> <li>Site specific chain of command for decision</li> </ul>	(Impact on ratio, monitoring for increasing severity, is away from other children feasible?) (How much of this is included in your written agreement, how clearly is it	et Up

access to children (residents, general public,	unauthorized access won't be allowed is	
volunteers, host employees, etc.) at	not adequate)	
relocation sites.		
Procedures for extended care including		
provider sleeping & breaks; safely		
conserving food, water, and sanitation		
supplies.		
	Reunificati	ion 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.		
Procedures for identification of parents,		
guardians, or emergency contacts during		
times of disaster. (Will i.d. be required? A		
code or "safe word"?)		
Procedure for how, when, and to whom the		
child will be released if the parent, guardian,		
or emergency contacts cannot be reached.		

This introductory paragraph can be deleted from your plan – it has been provided to assist you in writing the plan. As part of this plan a signed written agreement is needed if a vehicle other than a personally owned vehicle will be necessary. The agreement will ensure 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. The written agreement should address the responsibilities of each party, including what supplies will be available in the vehicle, contact information for the owner or supervisor of the vehicle, how to access the vehicle, cost to the provider, etc. Often providers assume they can use 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.

Where public transportation exists, child care providers are encouraged to contact public transportation providers to see if this service can be arranged and to thoroughly document the services a transportation provider is agreeing to provide. Informal providers (neighbors, friends, relatives) may be an option in an emergency situation. If using an informal transportation provider, child care providers need to think through how the other person's vehicle is maintained, who will drive, are there adequate care seats, how long it will take the person to get to the provider's location, etc. and document the agreed upon answers to these questions in a written agreement. You may want to discuss any transportation arrangement with your legal counsel and insurance agent to assess liability issues or concerns.

Currently, the availability of emergency transportation providers that can accommodate small business owners with multiple young children is scarce in Iowa. Therefore, provides may make several good faith attempts to arrange safe transport in advance for the children in their care and be unable to do so. Providers considering completing this plan to earn points for QRS are encouraged to not let this barrier, should it exist, prevent them from continuing with the other important planning and preparedness of this plan. Document the unsuccessful efforts made to arrange alternate transportation. If your personal vehicle does not accommodate the number of children in care and you are unable to locate transportation in your community, you may complete the alternate plan below.

V. Transportation Plan		
	<b>Primary Transportation</b>	<b>Alternate Transportation</b> (Strongly recommended – not required for QRS)
Plan for transportation of children and household		
members to relocation site and an alternate means of		
transportation		
Person responsible for coordinating and pre-	(Requires detailed response for	
arranging for evacuation transportation and	either personally owned or non-	
procedure for accessing transportation when an	owned transportation)	

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

evacuation is necessary		
Date of original written agreement for transportation		
services (if not using personal vehicle) and when	(May be N/A)	
	(IVILLY DE INTA)	
agreement is to be updated Estimated time for transportation to arrive/be ready		
to evacuate children and staff. Roles and	(Dequines detailed normanics if	
	(Requires detailed response if	
responsibilities of staff while awaiting evacuation	not personal vehicle)	
transportation		
Vehicle capacity and procedures for evacuation		
(loading order; prioritization process; household	(Requires detailed response)	
member responsibilities; if more than one trip or		
vehicle is necessary how is that accomplished)		
If personally owned vehicle(s) will be used:		
Procedure for the provision of child passenger safety		
restraints; procedure for assuring the restraints are	(May be N/A, if using	
in safe working order, appropriate for the size of the	someone else's vehicle)	
child, maintained according to manufacturer's		
requirements; and installed properly		
If personally owned vehicle(s) will be used for	(May be N/A, if using	
evacuation transportation: Procedures for	someone else's vehicle)	
maintaining vehicle(s)	, 	
If children and staff will be evacuated in someone		
else's vehicle(s):		
Procedure for the provision of child passenger safety	(May be N/A if using personal	
restraints; procedure for assuring the restraints are	vehicle)	
in safe working order, appropriate for the size of the	· · · · · · · · · · · · · · · · · · ·	
child, maintained according to manufacturer's		
requirements; and installed properly		
Roles and responsibilities of evacuation vehicle	(Requires detailed response for	
driver(s), driver qualifications, and procedure for	either personal vehicle or someone	
assuring qualified driver(s) availability for	else's vehicle)	
evacuation transportation	·	
Procedure and person responsible for assuring	(Requires detailed response for	
evacuation transportation is stocked with necessary	either personal vehicle or someone	
	else's vehicle)	

supplies (first aid, water, etc.)	
Procedure for when emergency medical	
transportation is needed including maintenance of	
ratio; roles and responsibilities of provider and	
household members, etc.	

V. Transportation	n Plan Alternative
1. Contact 2-4 agencies to attempt to arrange a transportation plan.	<i>List each agency and explain why you did not contract with them for transportation.</i>
	<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>
2. Contact 2-4 individuals to attempt to arrange a transportation plan.	<i>List each individual and explain why you did not contract with them for transportation.</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).
3. Contact your local Emergency Management Office/Agency.	What do they recommend? What resources do they refer you to?
Share your situation and concern related to providing for the children in your care during an emergency situation.	<i>If providers are included in the community plan, what are the instructions for you?</i>
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 help in moving that forward, ask how you can get involved.</i>	

This introductory paragraph can be deleted from your plan – it has been provided to assist you in 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 11<sup>th</sup> St and 11<sup>th</sup> Ave, the info would move up 11<sup>th</sup> Ave – 10<sup>th</sup>, 9<sup>th</sup>, 8<sup>th</sup>, 7<sup>th</sup> 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.

VI. Communication Plan		
	Non-Emergency Communication	
How and when I will communicate/review our		
emergency plans with household members		
How and when I will communicate our emergency		
plans with the children in care		
How and when I will communicate our emergency		
plans with parents/guardians of children in care		
Procedure for communicating emergency plan with		
local emergency services and/or emergency		
management		
	<b>Emergency Communications</b>	
How and when parents will be notified when		
children have been evacuated.		
Alternate ways of notifying parents, with at least one		
non-electronic method.		
How and when DHS registration staff will be notified		
when children have been evacuated.		
How and when parents will be notified when		
children have been relocated.		
Alternate ways of notifying parents, with at least one		
non-electronic method, when children have been		

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

relocated.	
Procedure for how and when DHS registration staff	
will be notified that children have been relocated.	
How and when I will communicate with children and	
household members not at home when children have	
been relocated.	
Alternate ways of notifying children and household	
members not at home, with at least one non-	
electronic method, when children have been	
relocated and that home is no longer safe.	
	Cyber Security
How child care business computer hardware is being	(may be N/A)
protected.	(111119 06 1 1 1/2 1)
How child care business computer software is being	(may be N/A)
protected.	(muy be 14/11)
If child care business computer is destroyed, where I	(may be N/A)
will use back-up computers.	(muy be 14/11)
	Back-Up of Records
Person responsible for backing up critical records	
including children's records, payroll, accounts, etc.	
Describe how you assure that back-up records	
including a copy of insurance policies, home plans,	
bank account records, and computer back-ups are	
stored securely onsite, and that all people needing	
access know how to access them.	
How you will provide for continuity if your	
accounting records are destroyed.	
	<b>Emergency Contact Information</b>
	Annual Review
Your procedure for updating emergency contact	
information for each child.	
Date the emergency plan will be reviewed and	
updated	

#### What Emergency Supplies Do I Need?

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. The list below will provide basic supplies for infants, young children and your household for approximately 24 hours, and is designed to be scaled to the specific number, ages and needs of those in your care. As a child care provider you may choose to purchase the supplies needed and used as part of your child care business as part of your business and track those as a business expense. However, you may decide that to purchase all the supplies at this time is not a feasible expense for your business and 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, 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 you need them and still meet the needs of the children in care (diapers fit, etc.). Store the emergency supply items in or adjacent to your emergency shelter so that you have access to them in an emergency situation.

Providers considering completing this plan to earn points for QRS are encouraged not to let the volume of supplies be a barrier to you continuing with the other important planning and preparedness of this plan. If you currently do not have any emergency supplies, start by collecting 24 hours worth of supplies and come up with a plan for when you can expand that to 48 hrs and eventually to the full 72 hours.

**Emergency Kit:** In addition to the emergency supplies stored onsite, you will want to assemble an emergency kit that is very portable. The emergency kit should be taken with you every time you evacuate. It is recommended that you also take your kit when you leave home for field trips, school pick-up, etc. so that you are always prepared with basic supplies and emergency contact information.

<b>24 Hour General Emergency Supply List for Child Care+:</b> This list will provide supplies for <u>10</u> infants and young children for 24 hours - <u>scale to number of children (and adults) in care.</u>			
Minimum Quantity	Description	Comment	
	Infant and young toddler food (If infants and young	toddlers are in care) per 10	
□ 32 oz	<u>Each</u> 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		
□ 320 oz	Formula, soy-based, ready to feed (already mixed with water)	Manufactured "ready to feed" - already mixed with water	
□ 320 oz	Formula, milk-based, ready to feed	Manufactured "ready to feed"	
□ 64 oz	Formula, hypoallergenic-hydrolyzed protein, ready to feed	Manufactured "ready to feed"	
□ 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.	
□ 40 Jars	4 jars of Baby Food - Stage 2 (jar size is 3.5 - 4 oz) per infant/toddler 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	
□ 1 box (16oz)	Cereal - single grain cereal preferred (e.g. rice, barley, oatmeal)	Rice, barley, oatmeal or a combination of these grains	
□ 5 gallons	<sup>1</sup> /2 gallon <b>Commercially</b> bottled drinking water per infant/toddler		
	Children and adults (per 10)		
□ 10 gallons	1 gallon <b>Commercially</b> 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".	

□ 100 portions	<ul> <li>10 portions non-perishable food per person:</li> <li>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.</li> <li>Supply of disposable bowls, plates, cups, eating</li> </ul>	*Consider food allergies and age appropriateness of foods. Peanut butter for children >3 years of age Sippy cups may soothe younger children.
	utensils, and a manually operated can opener.	
□ 200	Diaper wipes - fragrance free (hypoallergenic)	
□ 120	12 correct size disposable diapers per child	Per child wearing diapers
□ 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.
□ Sanitation supplies	<ul> <li>4 rolls toilet paper;</li> <li>2-3 five-gallon buckets with lids;</li> <li>3 garbage bags;</li> <li>adult/staff sanitation products</li> <li>1-eight ounce bottles of liquid or foam soap</li> <li>350 paper towels</li> <li>1-eight ounce bottle of hand sanitizer</li> </ul>	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.
	Small container of bleach	
	□Shelter and Safety Supp	plies
□ 10	At least 1 blanket per person	Combination of Mylar, regular material/size, "blankey" type and thick – sleeping bag or comforter.
□ 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 required extinguisher for that designated area.

□ 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 if you have more than 10 children, but need to have at least one per sheltering area.
□ 2	Working flashlights (battery backup and extra batteries/or self powering).	
<ul> <li>Optional:</li> <li>Enough to</li> <li>cover windows,</li> <li>doors, and air</li> <li>exchanges for</li> <li>your specific</li> <li>shelter area</li> </ul>	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.
	Working weather radio (battery backup 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.
	Whistle	
□ 1 kit	First aid kit contents: (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) small, medium, 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	

□ 24 hr supply	Of all child and household member required medications, medical supplies, and supportive care items.	Include all critical medications, even those not typically given in child care (taken in morning or at night). Include additional batteries for hearing aids; or other devices.
	□Other Supplies	
□ 1 Stuffed □ Picture ca □ Games □ Coloring	per infant/toddler animal or soft/cuddly toy per child ards, felt stories, or other open-ended items items d compact toys	
<ul> <li>□ (1) roll masking tape</li> <li>□ (2) permanent marking pens</li> <li>□ (10) safety pins – multiply by number of children in care – for ID cards</li> </ul>		Suggested forms – not all are required. You may have additional forms that you feel are required or important to include.
supply c □ office sup □ copies of □ inc □ chi □ me	Supplies t of keys to all areas of house, garage, property and ontainer(s) oplies-pens, paper, clipboards, all necessary forms cident report log/forms ild release log edication administration log mmunications log	<sup>+</sup> Supply list based on <i>National Commission on</i> <i>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

\*\*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. You need to have an emergency kit to use during evacuations.

- a. The kit must be assembled and transportable.
  - i. Household members, substitutes, etc. must be aware of where the kit is located
  - ii. Location of kit:
  - iii. Person assigned to maintaining it: \_\_\_\_
  - iv. How you make sure it is taken with you during an evacuation:
- b. The emergency kit must 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 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 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

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

Local Health					
Department					
Building Inspector					
Bank					
Insurance Agent					
Accountant (N/A)					
Child Care Food					
Program (N/A)					
Child Care Nurse					
Consultant					
Families					
Critical Steps in Reop	pening	Proce	dure	Notes	
Facility inspectio	n, repair, and				
registration					
Contacting familie	es and CCR&R				
Obtaining equipme	ent and supplies				
Setting up	rooms				
Restoring meal an	d snack service				
Othe	er:				

### **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

<b>Records or Documents</b>	Format & Date of Copy	Location of Stored Copy
Children's records	Hardcopy Electronic Date	
Child and Adult Food	Hardcopy Electronic Date	
Program records (may be		
N/A)		
Accounts receivable (fees,	Hardcopy Electronic Date	
subsidy requests, etc.)		
Accounts payable (debts,	Hardcopy Electronic Date	
expenses)		
Insurance policies	Hardcopy Electronic Date	
Rental agreements (may be	Hardcopy Electronic Date	
N/A)		
Building/floor plans	Hardcopy Electronic Date	
Bank records	Hardcopy Electronic Date	
Service agreements ( <i>may be</i>	Hardcopy Electronic Date	
N/A)		
Inventory	Hardcopy Electronic Date	
Tax records	Hardcopy Electronic Date	
Pet vaccination and	Hardcopy Electronic Date	
registration ( <i>may be N/A</i> )		
Other:	Hardcopy Electronic Date	

### **Inventory Form**

(Adapted from the Computer Inventory Form at <u>www.ready.gov</u>)

- Log equipment serial and model numbers. Attach a copy of the vendor documentation to this document.
- Record the name of the company from which the equipment was leased or purchased and the contact name to notify for repairs.

Hardware (CPU, Monitor, Printer, Scanner, Keyboard, Mouse)	Hardware Size, RAM & CPU Capacity	Model Purchased	Serial Number	Date Purchased	Cost
Equipment	Quantity	Model Number	Serial Number	Date Purchased	Cost

#### **Insurance Discussion Form**

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

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

Insurance Agent: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail:

Insurance Policy Information					
Type of Insurance	Policy No.	Deductibles	Policy Limits	Coverage (General Description)	
Does the business/provider need flood insurance?					
Does the business/provider need earthquake insurance?  Yes No					
Does the business/provider 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/Provider	
Provider's address	
Phone number	
Cell phone	
In the event we must evacuate because of a confined emergency in my home, the children and I will leave the house and gather:	Nearby Relocation Site: Name of facility) (address) (contact information) (additional instructions) Alternate Nearby Relocation Site(name of facility):
unsafe we will relocate to the Alternate Nearby Relocation Site:	(address) (contact information) (additional instructions)
In the event we must relocate because of an emergency in the immediate area the children and I go to our Mid-distance Relocation Site or the Alternate Mid-distance Relocation Site:	Mid-distance Relocation Site: (address) (contact information) (additional instructions) Alternate Mid-distance Relocation Site: (address) (contact information) (additional instructions)
In the event we must be relocated because of a widespread emergency the children and I will go to our Distant Relocation Site or the Alternate Distant Relocation Site:	Distant Relocation Site: (address) (contact person) (contact information) (additional instructions) Alternate Distant Relocation Site: (address) (contact information) (additional instructions)
If we must relocate and cannot reach one of our designated relocation s cannot reach you by telephone, I will attempt to notify you by the follo <i>the non-electronic method plan</i> )	
If we are directed by authorities to shelter-in-place or I need to lock doors locked and <i>(describe)</i> . Due to the imminent danger, <i>(describe)</i> (describe).	wn the house due to a hazardous situation you will find the lescribe what parents are supposed to do, is there a safe place for them

#### **Child Identification Cards**

(Fill out in advance of emergency, whenever contact information is updated. Consider laminating cards, so they are 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	
Home phone: Work/Day phone: Cell phone: Address: Child Care Provider's	

#### **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:** The place children, provider and household members go after evacuating the home. This is adjacent to the home 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 business and those involved in care.

**Distant:** Transportation will be required to relocate to the distant site, used for community wide emergencies. NACCRA & Save the Children's 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 Warning System:** Fire alarm, PA system announcement, ringing bell, or however the facility alerts staff to evacuate.

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

**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, provider, household members 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 home or property.

**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

**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 container 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 home, 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, these websites may be of interest or assistance to you in developing your emergency preparedness plan.

Iowa Child Care Resource and Referral	www.iowaccrr.org
agencies	
Healthy Child Care Iowa	www.idph.state.ia.us/hcci/
Iowa Emergency Management Services	www.iowahomelandsecurity.org/
County Emergency Management Services and	www.iowahomelandsecurity.org/county_EM/county_EM_overview.html
Coordinators	
American Red Cross of Iowa	www.iowa.redcross.org
Ready America	www.ready.gov
National Association of Child Care Resource &	http://www.naccrra.org/disaster//
Referral	
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. <b>Planning document fu</b>	1. <b>Planning document fully completed</b> – attach copy with QRS application					
2. Signed, written agreem	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 re	location site - attach copies	with QRS application				
Primary Nearby	Alternate Nearby	Primary Mid-distance	Primary Distant			
4. Signed, written agree	ment for transportation -	attach copies with QRS application				
OR 🗌 Providing transportation with own vehicle OR 🗌 Completed Alternate Transportation Plan						
5. <b>24 Hours of supplies for each child and adult typically present -</b> <i>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</i>						
Children in care (n	umber) Staff	_ (number)	ld 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 <u>sending</u> to EMA – mail receipt, copy of sent email, etc.-<u>no response or approval from EMA is required</u>.*