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*(Name of Facility)*

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# Child Care Emergency Checklists

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

These checklists support the (name of facility) Child Care emergency Plan. When filled in, they are confidential, and not to be released outside the facility, except to emergency response organizations.

## **CHECKLIST A: DIRECTION AND CONTROL OPERATIONS**

*The direction and control activities outlined in this annex apply to all emergency situations. Some of the activities, to include annotating when tasks are completed, may be assigned to individual staff. It is important that each person know what (s)he is responsible to do.*

| Completed<br>or N/A | Item  |
|---------------------|---|
|                     | <b>Senior On-site Facility Person</b><br><i>This designates the person</i>  |
|                     | ___ <i>(insert name of primary person in charge)</i> ___ is in charge of the facility   |
|                     | ___ <i>(insert name of secondary person in charge)</i> ___ is 2nd in charge of the facility   |
|                     | ___ <i>(insert name of third person in charge)</i> ___ is 3 <sup>rd</sup> in charge of the facility   |
|                     |   |
|                     | <b>Considerations for Protective Action Decision</b><br><i>Evacuation may not be the best decision. Sudden occurrences (explosions, tornadoes, etc.), violent storms/weather conditions, hazardous materials events and an armed intruder or suspicious person outside may make sheltering options the best choice.</i> |
|                     | Monitor Weather Radio.  |
|                     | Gather information from sources in the facility about the emergency.  |
|                     | Gather information from County/Local EMA & Emergency Services about the emergency.  |
|                     | Consider: Is there time to evacuate?  |
|                     | Consider: Is it safe outside?   |
|                     | Consider: Is there time to send the children home?  |
|                     | Consider: Are the children's homes in a danger area?  |
|                     | Consider: Can the children & staff be safe inside the building?   |
|                     | Consider: How long will this event last?  |
|                     | Identify children whose homes are not in safe areas.  |
|                     | Identify the appropriate protective action.   |
|                     | Notify parents and staff of protective action decision.   |
|                     | <b>Modified Activities</b><br><i>Emergencies may not affect those protected inside the facility, but may require adjustment of schedule, early dismissal or cancellation of certain activities.</i>   |
|                     | Cancel all out-of building activities.  |
|                     | Determine the extent of cancellations and schedule modifications.   |
|                     | Make provisions to keep those children whose homes are not in a safe area.  |

## CHECKLIST B: PROTECTIVE ACTIONS

*Procedures to accomplish one of five pre-planned protective actions: Lockdown, Immediate Shelter, Immediate Evacuation, Shelter in Place or Evacuation to Relocation Facility. NOTE: "Go-Kits" should be pre-prepared to accompany you wherever you need to go. Contents of go-kits are specified.*

| Completed or N/A | Item  |
|------------------|---|
|                  | <b>Lockdown</b>   |
|                  | /   |
|                  | Sound alarm ( <i>What will the signal be?</i> ) to lock all doors & shelter children at facility.   |
|                  | Notify 9-1-1.   |
|                  | Police search building to find intruder.  |
|                  | Notify parents.   |
|                  | Sound "All-Safe" signal ( <i>What will the signal be?</i> ).  |
| Completed or N/A | Item  |
|                  | <b>Immediate Shelter</b>  |
|                  | <i>If there is not sufficient time to move the children to the safest spot in the facility (tornado) whatever shelter is available at or near the children's classroom should be used.</i>  |
|                  | Sound Alarm.  |
|                  | Unlock doors to closets and utility spaces designated as shelters.  |
|                  | Move the children to the closest shelter areas.   |
|                  | Move "Go Kits," medications and special needs equipment to shelter area (time permitting).  |
|                  | Close air intakes for HVAC (time permitting).   |
|                  | Turn off utilities to avoid fire/explosion (if situation warrants).   |
|                  | Close windows, blinds, drapes & doors to block debris from becoming missiles.   |
|                  | Notify 9-1-1.   |
|                  | Take attendance as soon as the immediate hazard passes.   |
|                  | Maintains control of the children until instructed to move to another location.   |
|                  | Brief emergency services when they arrive on-site.  |
|                  | Search building for hazards.  |
|                  | Sound "All-Safe" signal ( <i>What will the signal be?</i> ).  |
| Completed or N/A | Item  |
|                  | <b>Immediate Evacuation</b>   |
|                  | <i>Some emergencies require that everyone leave the facility as soon as possible. There normally isn't time to arrange transportation or get to another facility. Immediate activation moves everyone to a safe "assembly area" outside, but near the facility.</i> |
|                  | Sound Alarm.  |
|                  | Ensure that the pre-designated assembly area ( <i>location</i> ) is safe.   |
|                  | Post evacuation monitors in hallways and at doors.  |
|                  | Name: <i>(list name of staff member)</i> Location: <i>(list location)</i>   |
|                  | Name: <i>(list name of staff member)</i> Location: <i>(list location)</i>   |

|                         |  |
|-------------------------|--|
|                         | Lead children in an orderly fashion out of the building to the designated assembly area.   |
|                         | Ensure that children/staff who need help getting out have been evacuated.  |
|                         | Take attendance as soon as the children arrive in the assembly area.   |
|                         | Move "Go Kits" medications and special needs equipment to assembly area (time permitting).   |
|                         | Notify 9-1-1.  |
|                         | Move to another shelter if the assembly area is exposed to inclement weather.  |
|                         | Maintain control of the children until instructed to return to facility, or go to another location.  |
|                         | If safe, search building to ensure that everyone is out<br>Search Team Members: <u>    (list name of staff members)    </u><br><u>    (list name of staff member)    </u>  |
|                         | Brief emergency services when they arrive on-site.   |
|                         | Determine building is safe from any hazards prior to returning to the facility (request expert advice/assistance as appropriate).  |
|                         | Sound "All-Safe" signal ( <u>    What will the signal be?    </u> ).   |
|                         | Brief emergency services regarding final status.   |
| <b>Completed or N/A</b> | <b>Item</b>  |
| <b>Completed or N/A</b> | <b>Shelter in Place</b><br><i>If the emergency makes it unsafe to go outside and there is sufficient warning time, it's best to move the children to a spot in the facility that offers the best protection. It may be necessary to stay there for several hours – or even a few days.</i> |
|                         |  |
|                         | Ensure that designated shelter areas are ready to receive and shelter children and staff.  |
|                         | Staff move their assigned children to the pre-designated shelter areas.  |
|                         | Ensure that children/staff who need help moving have arrived in shelter areas.   |
|                         | Take attendance to establish accountability for all children and staff.  |
|                         | Remain in place and await further instructions from designated staff person or emergency services.   |
|                         | Notify 9-1-1.  |
|                         | "Go Kits," medications and special needs equipment moved to shelter areas.   |
|                         | Maintain control of the group until instructed to move to another location.  |
|                         | Close windows, blinds, drapes & doors to impede debris from becoming missiles.   |
|                         | Close air intakes for HVAC.  |
|                         | Reduce all other sources of external air.  |
|                         | Staff take attendance as soon as they arrive in the shelter area.  |
|                         | Time permitting, place food and beverages in closed containers.  |
|                         | Brief emergency services when they arrive on-site.   |
|                         | Provide meals/snacks to sheltered children and staff if the duration of the emergency warrants.  |
|                         | Determine building is safe from any hazards prior to returning to normal operations (request expert advice/assistance as appropriate)..  |
|                         | Sound "All-Safe" signal ( <u>    What will the signal be?    </u> ).   |

| Completed or N/A | Item   |
|------------------|--|
|                  | <p style="text-align: center;"><b>Evacuation to a Relocation Facility</b></p> <p><i>If the entire neighborhood is in danger, it may be necessary to move the children and staff to another facility that is far enough away to not be in danger. It's convenient if that "relocation facility" is another child care center because it has facilities and equipment. If nothing else is available, the community may have evacuation shelters established.</i></p> |
|                  | Notify relocation Facility ( <u>  name  </u> , <u>  phone #  </u> ).   |
|                  | Call for pre-planned transportation vehicles (if needed).  |
|                  | Take attendance for accountability and to determine exact number of transport seats needed.  |
|                  | Transportation arrives at the facility.  |
|                  | Notify county EMA (ph # _____) of failure in transportation resources.   |
|                  | Give each driver a map to Relocation Facility in case vehicles get separated. Attach appropriate maps to this checklist.   |
|                  | Load "Go Kits" medications and special needs equipment are on transportation.  |
|                  | Ensure that all children and staff, including those who need assistance are aboard the transportation and arrive in shelter areas.   |
|                  | Post "Notice of Relocation" (Part III, Annex11).   |
|                  | Take attendance for accountability before transportation departs.  |
|                  | Transportation departs for Relocation Facility.  |
|                  | Take attendance for accountability when you arrive at relocation facility.   |
|                  | Move children to areas designated for their use at Relocation Facility.  |
|                  | Retain supervision and accountability for all children.  |
|                  | Take attendance and report numbers to designated staff person.   |
|                  | Notify parents of the relocation of children.  |

## CHECKLIST C: EMERGENCY SUPPORT FUNCTIONS

*Procedures to accomplish functions required to support emergency action.*

| Completed or N/A | Item   |
|------------------|--|
|                  | <b>Building Security</b>   |
|                  | Lock facilities, leaving only one entry/exit point.  |
|                  | Staff checkpoints to ensure there are no intruders (see diagram).  |
|                  | <b>Communications</b>  |
|                  | <b>Get information on hazards</b>  |
|                  | Monitor weather radio to find out about emergencies.   |
|                  | Monitor local radio/TV stations to stay aware the progress of an emergency                                 |
|                  | <b>Communicate with parents</b>  |
|                  | Use land-line telephone (primary means of communication).  |
|                  | Make backup communication system available (cell phones).  |
|                  | Time permitting post current facility status on the facility website (if available.)                       |
|                  | Use text messaging and social networking sites to notify parents   |
|                  | <b>Communicate within the facility</b>   |
|                  | Sound appropriate alarm for Protective Action decided (evacuate immediately, shelter or evacuate to host). |
|                  | Establish contact with relocation facility as soon as evacuation is considered.                            |
|                  | <b>Go Kits</b>   |
|                  | Contain emergency contact information and pick-up authorizations for all of the children.                  |
|                  | Contain medication and other equipment (with instructions for use) for the children and staff.             |
|                  | Contain special medical information, including allergies on children and staff.                            |
|                  | Contain first aid supplies.  |
|                  | Contain water & snacks for everyone (time permitting).   |
|                  | Contain important business records (second priority)   |
|                  | Other (specify _____)  |
|                  | <b>Medical Emergencies</b>   |
|                  | Render first aid as needed/feasible.   |
|                  | Brief Ambulance/EMS personnel when they arrive.  |
|                  | <b>Medical Procedures</b>  |
|                  | Review list of special needs children (lists in "go-kit").   |
|                  | Ensure individual staff are with children with special needs.  |
|                  | Take all medication to be moved if children relocate (in go-kit).  |
|                  | Take first aid supplies to accompany the children (first aid supplies in "go-kit").                        |
|                  | Examine all children/staff for injuries after emergency has passed.  |
|                  | Establish and maintain log of any medication administered.   |

|  |   |
|--|---|
|  | <b>Public Utilities</b>   |
|  | Shut off Electricity manually.  |
|  | Shut off Water manually.  |
|  | Shut off Gas manually.  |
|  | <b>Important Records</b>  |
|  | <i>When possible, important records, including business records should be backed up regularly and stored in a secure site away from the facility.</i> |
|  | Put emergency contact information and parental permissions, etc in "Go-Kit".  |
|  | Put business records (license, employee training, lease, etc.) in "Go-Kit".   |
|  | Put records relating to special needs (???, etc)  |
|  | <b>Recovery</b>   |
|  | Develop a plan based on damage survey to clean up the center and make it safe for reoccupation.   |
|  | Begin clean-up and repair.  |
|  | Keep records of costs for insurance reasons   |