EMERGENCY PREPAREDNESS PLAN

Name of Child Day Center

A. The center shall have a written emergency preparedness plan that addresses staff responsibility and facility readiness with respect to emergency evacuation and relocation, shelter-in-place, and lockdown. The plan, which shall be developed in consultation with local or state authorities, shall include the most likely to occur emergency scenario or scenarios, including fire, severe storms, loss of utilities, natural disaster, chemical spills, intruder, violence at or near the center, terrorism specific to the locality, and other situations, including facility damage that requires evacuation, lockdown, or shelter-in-place.

B. The emergency preparedness plan shall contain procedural components for:

Sounding of alarms, such as intruder, evacuation, lockdown, and shelter-in-place for tornado or chemical hazards:

Emergency Communication:

Establishment of center emergency officer and back-up officer to include 24-hour contact telephone number for each:

Notification of local authorities, such as fire and rescue, law enforcement, emergency medical services, poison control, health department, and parents and local media:
Availability and primary use of communication tools:

Evacuation to include: (Evacuation drills shall be conducted monthly)

Assembly points, methods to account for all children at the assembly point and relocation site, primary and secondary means of egress, and complete evacuation of the buildings:

Securing of essential documents, including attendance records, parent contact information, emergency contact information, and information on allergies or food intolerances:

Methods to ensure any health care needs to include medications and care plans; emergency contact information for staff; and supplies are taken to the assembly point or relocation site:
Method of communication with parents and emergency responders:

Accommodations or special requirements for infants, toddlers, and children with special needs to ensure their safety during evacuation or relocation:

Procedures to reunite children with a parent or authorized person designated by the parent to pick up the child:

Shelter-in-place to include: (Shelter-in-place drills shall be conducted twice annually)

Scenario applicability, such as tornado or chemical spill, inside assembly points, methods to account for all children at the safe locations, and primary and secondary means of access and egress:

Securing of essential documents, including attendance records, parent contact information, emergency contact information, and information on allergies or food intolerances:
Methods to ensure any health care needs to include medications and care plans; emergency contact information for staff; and supplies are taken to the assembly point or relocation site:

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Method of communication with parents and emergency responders:

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Accommodations or special requirements for infants, toddlers, and children with special needs to ensure their safety during shelter-in-place:

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Procedures to reunite children with a parent or authorized person designated by the parent to pick up the child:

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**Lockdown to include:** (Lockdown drills shall be conducted annually)

Facility containment procedures, such as closing of fire doors or other barriers, scenario applicability, assembly points, and methods to account for all children at the safe locations:

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Method of communication with parents and emergency responders:

Accommodations or special requirements for infants, toddlers, and children with special needs to ensure their safety during lockdown:

Procedures to reunite children with a parent or authorized person designated by the parent to pick up the child:

**ADDITIONAL PROCEDURES:**

Continuity of operations to ensure that essential functions are maintained during an emergency:

Staff training requirement, drill frequency, and plan review and update:
Other special procedures developed with local authorities:

____________________________________________________________________

Plan review:
Date: ____________________________
Updates, if any: __________________________________________________________________________

Plan review:
Date: ____________________________
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Date: ____________________________
Updates, if any: __________________________________________________________________________