

mini einstein's

LEARNING CENTER SOUTH



720 80th St SW, Bldg A Everett, WA 98203 425-388-5060



Emergency Management 2811 Oakes Ave Everett, WA 98201 425-257-7965



Communicable Disease Outreach Program 3020 Rucker Ave, Ste #300 Everett, WA 98201 425-339-5278

Mini Einstein's Learning Center Disaster Response Handbook

The purpose of this handbook is to give child care center personnel 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, "Director" means the center director or the person-in-charge at the time of the incident or disaster. "Parent" means the child's parent or legal guardian.

This handbook was written by Snohomish County Department of Emergency Management and Everett Office of Emergency Management, and reviewed and edited by Snohomish Health District Communicable Disease Outreach Program and the Washington State Department of Early Learning. Each child care center has a responsibility to individualize the plan to suit their particular circumstances.

This policy was last reviewed and updated on: January 2020

OUR CENTER'S ADDRESS IS: 6717 212th St SW Lynnwood, WA 98036

OUR CENTER'S PHONE NUMBER IS: 206-533-8896

OUR NEAREST CROSS-STREETS ARE: 212th St SW / 67th AVE W

OUR OUT – OF – AREA CONTACT IS: Barney Sciacca
Phone Number: 954-687-7741

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Emergency Phone Numbers

Emergency Assistance	Number(s)	
Police	911	_
Fire/EMS	911	
Steven Hospital Emergency Room	425-640-4000	
Poison Control Center	1-800-222-1222	
PUD (Electricity)	425-783-1000	
Puget Sound Energy (Gas)	1-888-225-5773	
KRKO Radio – 1380AM	425-304-1381 ext. 117	
KOMO Radio – 1000 AM	206-404-5666	
KSER Radio – 90.7 FM	425-303-9070	
KIRO Radio – 97.3 FM / 770 AM	206-726-7000	
Director Home Phone	425-269-1101	
Out-of-Area Contact		
DCYF (CPS) Intake Line		
Child Care Licensor: Everett Office	425-740-6871	
Snohomish County Health Department	425-339-5278	

Alternate Site Location (Near Child Care Center) New Vision Church 21110 66th Ave W Lynnwood, WA 98036

Alternate Site Location (Evacuation Site) 6717 212th St (Field) Lynnwood, WA 98036

Introduction

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

Preparing for a disaster

This child care center has taken many steps to prepare the facility, children, staff, and parents, for the unexpected. Child care centers must follow WAC 110-300-0470 for disaster planning and for fire drills.

Conducting Drills

Drills are essential to provide staff with the skills necessary to respond in times of an emergency. There are 3 different emergency drills that should be practiced on a regular basis. Drills are recorded on DCYF Fire, Safety, Emergency Drills Record form.

- Fire (evacuation drill) must be practiced **monthly**, as required by WAC (WAC 110-300-0470)
- Earthquake (Drop, Cover, & Hold) should be practiced quarterly, minimum
- Lockdown (secure building, stay together) should be practiced at least once a year, minimum
- -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.
- -Evacuation maps are posted in each classroom.

Kits

Having adequate supplies is essential to 72-hour preparedness. See Appendix B for more information about recommended supplies.
☐ The center has gathered a 72-hour preparedness kit and has included a 72-hour supply of any medications or supplies for those with special needs. These kits are kept in each classroom.
☐ The center checks its emergency kits and emergency medication expiration dates on a regular basis. This is done quarterly.
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 or site and will be taken along if evacuation is required.
☐ Fire extinguishers are located throughout the center. The locations are each hallway and classroom. They are checked monthly and recharged prior to expiration.
☐ The center's smoke alarms are checked monthly.

	The center has a carbon monoxide alarm located in each hallway. It is checked monthly.
	Disaster supplies are kept in the Archive room (secondary supplies in outdoor storage/connex)
Con	nmunication
_	At least one corded phone is available to use if there is no electricity and we have located our nearest payphone.
□ E	Emergency phone numbers are posted by each phone in the center.
	The center has designated an out-of-area contact. This contact is Barney Sciacca (954) 687-7741
	Parents are instructed to call this number if they cannot get through to the center on the local phone grid.
_	Children will only be released to individuals listed on the child's emergency contact form. The Center must ensure parents keep these up-to-date.
_	The center has communicated with New Vision Church, who may be able to help out in the event of a major disaster.
Haz	ard Mitigation
For occuenvibasi	ard mitigation is the process reducing or eliminating the impacts of disasters before they occur. example, securing a bookcase to the wall before an earthquake can topple it and injure upants. An important step in disaster planning is to ensure you are operating in a safe ronment. Hazard mitigation plays a huge role when it comes to preventing injuries, both on a daily and during a disaster. See Appendix C for more information, resources for implementing gation measures, and a sample checklist.
П П	The center has undertaken hazard mitigation in all classrooms and main areas.
<u> </u>	The center conducts a hazard mitigation walk-through monthly.
_	Each activity involving exterior activities outside the normal daily operations of the center, will nave a center risk mitigation for filled out two weeks prior to the activity.
Trai	ning
	Staff have been trained on how and when to shut off all utilities.
	Older children are taught to call 911 if directed to do so by a staff member.
_	At least one staff member trained in CPR and first-aid is with each group of children as required by licensing.

Gather information from parents

Make sure that all parents have reviewed the disaster plan and understand the steps that the center will take in the event of an emergency. All parents need to be given the center's out-of-area contact number and should in turn provide the center with an out-of-area contact for their family (see Appendix A).

Discuss with parents their plans and availability to pick up a child after a major disaster. Some parents work nearby, while others have a long commute. If roads are blocked, it could be quite some time before the parents are able to pick up their children.

Practicing for a disaster

Child care centers 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 center 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. A disaster drill log has been included in Appendix D of this document. Some situations are difficult to practice for during normal operation of the center. For such scenarios involving site evacuation, it is a good idea to run through the situation verbally as a group during a staff meeting. In this way, questions can be answered and possible hurdles can be overcome.

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, there could be a lot of confusion at the center. Consider conducting periodic drills without giving staff members warning. They need to be able to react, even when not mentally prepared for the situation.

All staff should receive regular training on disaster preparedness. The entire plan should be reviewed at least annually, and with all new staff as they start work. Use this handbook during staff meetings to review procedures for various disasters. Make sure you have discussed roles and responsibilities for different scenarios. Staff should be familiar with how to use a fire extinguisher and it is best if they have had practice actually using one. Make sure all staff that is required to have CPR and First Aid training is up to date on their certification. Teach staff how to shut off any utilities, such as natural gas.

Take care of staff

Disasters affect all of us. Center staff members will likely be concerned about their own family members, but will also be needed at the center to help the children in their care. Child Care Center Leadership should provide staff with information and assistance in preparing their own families for times of disaster. Each staff should have an out-of-area contact for their family, disaster supplies at home and in their personal vehicle (including a 3-day supply of their own medications), and a plan for connecting with their other family members. If staff members are individually prepared, their personal worries will be reduced and they will be better able to focus on helping the children in their care who rely on them.

Also ensure you have emergency contact information for your staff, in the event something happens to a staff member during work hours. Be sure to keep this information in your go-kits along with emergency contact information for the children.

Steps to Take During a Disaster

Building and Site Evacuation

Building Evacuation:
☐ Make a quick assessment of the situation in the classroom and of any injuries to the children or adults.
☐ Director/Designee evaluates the evacuation route to be sure that it appears clear of obstructions.
☐ Director/Designee gives instruction to evacuate.
☐ If possible and time allows, have children take jackets and coats.
Staff should take the following items:
 first-aid kit (go-bag) walkie talkies class/staff attendance sheets children's emergency and medical information, supplies, and medication stored in Go-Bags (red first aid bags in every classroom) cell phone, if available.
 Staff should assemble children to evacuate the building (preferably one teacher leading the children and one teacher following behind). Infants will be evacuated by: being placed into rolling evacuation cribs.) Young toddlers will be evacuated by: utilizing the centers wagons for children who cannot walk independently. Take attendance; if safe to do so, search the building 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
occurs, have teachers move children to the pre-designated area or no less than one block from the child care. The pre-designated location is the far end of the field adjacent to the rear of the school.
Director will evaluate the situation with the help of responding agencies (fire, police, etc.) and determine if it is safe to enter the building. If not, determine if it is necessary to move to the alternate site location (follow <i>Site Evacuation</i> procedure in this plan), or to stay put until it is safe to re-enter the building.
☐ Director/Designee will notify parents immediately via Procare Parent Engagement app SMS emergency alert if evacuation looks to be long term or if children are moved to alternate site location; parents will be notified via Procare Parent Engagement app. Parents can communicate with MELC through Procare Parent Engagement app.
☐ Director/Designee will report incident to licensor at earliest convenience.
☐ Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office.
☐ All parents will be notified of incident.

Site Evacuation:

It is important to have at least 2 alternate locations for your site to evacuate to. In the event of a large scale disaster, one or both, of your alternate sites may not be available. When choosing alternate locations:

Make sure you talk to that site to ensure that you can use it during a disaster.

emergency alerts with parents and coordinate pick-up of children.

reports are stored in the front office.

Director/Designee will report incident to licensor at earliest convenience.

- Make sure the alternate site will be able to handle the number of children/staff you will have.
- e

 Make sure the alternate site is accessible to you during the hours that your center is open.
If it is determined that staff and children will be moved to the alternate site location distant from the child care, assign children to a designated teacher.
 Staff should bring the following items to the alternate sites: ■ first-aid kit (go-bag) ■ walkie talkies ■ class/staff attendance sheets ■ children's emergency and medical information, supplies, and medication stored in Go-Bags (red first aid bags in every classroom) ■ cell phone, if available.
☐ Children will be taken to the alternate site location by: walking/evacuation crib/wagons.
Once at the alternate site location, take attendance again. Teachers must remain with their group of children until the children are picked up by parents or emergency contacts.
☐ Director/Designee will continue to communicate via Procare Parent Engagement app SMS

Director/Designee will complete a written incident report at the earliest opportunity; incident

Shelter-in-Place Procedure

En	relter-In-Place should be conducted when you are instructed to do so by emergency personnel or nergency Alert System (EAS) broadcasts on your radio or television; or if you see a vapor cloud or nell an unusual odor outside.
	Gather all children inside in a location that is easiest to seal off from the outside, such as a room or two with few exterior windows and doors. This location is the current classroom they are located in.
	Call 911 if you haven't already done so. Director or designee should turn on and listen to the radio Listen for emergency information from your local fire or police department.
	Director or facility maintenance person should 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 cloth.
	If you are told there is danger of explosion, close the window shades, blinds or curtains; to avoid injuries, keep children away from windows.
	Director/Designee should stay in touch with responding agencies/emergency personnel.
	Director/Designee 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 child care 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 via Procare Parent Engagement app SMS
	emergency alert, take down plastic, turn ventilation system back on.
	Director/Designee will report incident to licensor at earliest convenience.
	Director/Designee will complete a written incident report at that earliest opportunity. Incident reports are stored in the front office.

Fire Alarm/Emergency
If smoke or fire is seen or if there is another emergency requiring evacuation:
☐ Activate fire alarm if not sounding-Use pull stations.
 Evacuate children, visitors, and staff (follow Building Evacuation procedure in this plan, minus removal of disaster supplies); drop and crawl to avoid smoke and close doors behind you; take the following items with you: first-aid kit (go-bag) walkie talkies class/staff attendance sheets children's emergency and medical information, supplies, and medication stored in Go-Bags (red first aid bags in every classroom) cell phone, if available.
Call 911 from outside the building.
☐ Take attendance.
☐ Director or staff member 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, assistants, family members, volunteers, and visitors Knowledge of anyone remaining in the building Floor plan and internal systems information.
☐ If it is determined that the building is unsafe, move children to alternate site location; follow <i>Site Evacuation procedure</i> in this plan.
☐ Director/Designee will notify parents of evacuation and alternate site location, if applicable.
Communication will be done via Procare Parent Engagement app SMS emergency alert.
☐ Director/Designee will report incident to licensor at earliest convenience.
☐ Director/Designee will complete a written incident report at the earliest opportunity; incident
reports are stored in the front office.
☐ All parents will be notified of incident via Procare Parent Engagement app SMS emergency
alert.

Gas Leak

All staff should know where the main gas valve is for your facility, prior to any emergency If gas odor is detected:
☐ DO NOT activate the fire alarm system or any other electrical equipment.
☐ Notify center Director/Designee.
 Evacuate children and staff (see Building Evacuation procedure in this plan) and close doors behind you but leave a window open; take the following items with you: first aid kits which are stored in every classroom. class/staff attendance sheets children's emergency and medical information/supplies located go-bags. cell phone, if available.
Call 911 from outside the building.
☐ Move children to a designated area no less than one block from the child care. This location is
the New Vision Church. Across the street on the far side of church building.
Take attendance.
☐ If possible, turn gas off with the wrench stored in the supply closet.
 Have the following items ready for police and fire personnel: Location of leak, if known Number of children in care, staff, volunteers, and visitors Knowledge of anyone remaining in the building Floor plan and internal systems information.
☐ Director/Designee 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 <i>Site Evacuation procedure</i> in this plan. Communication will be done via Procare Parent Engagement app SMS emergency alert.
☐ Director/Designee will report incident to licensor at earliest convenience.
☐ Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office.
All parents will be notified of incident via Procare Parent Engagement app SMS emergency alert.

 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, staff, volunteers, and visitors Floor plan and internal systems information.
☐ 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 and staff to alternate child care site;
our transportation resource are staff personal vehicles.
☐ Notify parents of move to alternate site location. Communication done via Procare Parent
Engagement app SMS emergency alert.
☐ If Shelter-in-Place occurs, and media attention is significant, contact parents to let them know of situation. Communication done via Procare Parent Engagement app SMS emergency alert.
☐ Director/Designee will report incident to licensor at earliest convenience.
☐ Director/Designee will complete a written incident report at the earliest opportunity; incident
reports are stored in the front office.
☐ All parents will be notified of incident.
precautions posted on-site or listed on the container. Call 911 or the hospital emergency room for
Hazardous Materials Accident
Internal additional instruction. Contact poison control center for common household product poisonings.
 In the event a person comes into direct contact with a suspected hazardous material, follow safety Call 911 if not already done so.
☐ Director/Designee will report incident to licensor at earliest convenience.
☐ Director/Designee will complete a written incident report at the earliest opportunity; incident
reports are stored in the front office.
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
Director or designee will try to locate the problem and activate alternate lighting system; flashlight and batteries are located in every classroom.
Call 911 if concerned about a fire or safety hazard.
☐ Unplug all electrical equipment; turn off all but one light.
☐ Director/Designee to contact property manager, if needed.
☐ Director/Designee to call PUD (425-783-1000) to report outage and/or get additional information.
 Call Snohomish Health District to help determine if center 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? Do you have warm water for hand washing?
☐ All parents will be notified if power outage is prolonged. Communication via Procare Parent
Engagement app SMS emergency alert.
☐ Director/Designee will report incident to licensor at earliest convenience.
 Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office.
Storms & Snow Director/Designee will determine prior to opening hours, whether or not to open the center; families will be notified by Parent Engagement app SMS alert and posting popup on website.
☐ If the child care must close during hours of operation because of snow or storm, the on shift manager will notify parents by telephone.
If weather conditions prevent a parent or legal guardian from reaching the facility to recover a child, the center staff 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 center closing, the
Director/Designee will contact the police. Child may be transported to Child Protective Services if necessary.
☐ Director/Designee will report incident to licensor at earliest convenience.
 Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office.

Earth	quake
In the	event of ground movement the following procedures should be carried out:
way	If "drop, cover, and hold." Direct all children to " DROP, COVER and HOLD " and remain that until the earth stops moving – stay away from windows, bookcases, and filing cabinets. Hold the item you are using as a cover, if it moves, move with it. Keep talking to children until it is to move.
_	o items are available for cover, crouch by an interior wall and cover your head with your arms. cruct children to do the same.
_ out	utside "drop, cover and hold," keeping away from glass, bricks, and power lines. If you are side near a building and there is no safer location, take cover in a doorway to protect yourself I children.
When	the earthquake stops, the following procedures should be carried out:
☐ Tea	chers and staff check themselves and children for any injuries.
☐ Che are	eck evacuation routes for damage (also see <i>Tsunami procedure</i> if in a Tsunami inundation a)
_	class/staff attendance sheets children's emergency and medical information, supplies, and medication stored in Go-Bags (red first aid bags in every classroom)
☐ Sta	ff will render first aid to those who need it.
☐ Dire	ector/Designee will take attendance outside to account for all children and adults.
_	eck utilities for disruption/damage (gas, water, sewer); if you smell gas, turn the gas off with the nch stored in the supply closet. Also see <i>Gas Leak</i> section of this plan.
☐ List	en to radio for information on the surrounding area.
☐ Det	ermine status of emergency supplies and equipment.
_	child care's out-of-area contact with information on the center's status (injuries, evacuation, dren remaining in care, children who have been picked up).
_ and	is decided to evacuate to an alternate location, post a notice indicating your new location, date time you left; follow the <i>Site Evacuation</i> procedure in this plan. The notice will be posted ordingly.
	parents with center status information; if not possible, report center status information to KRKO, MO, KSER and/or KIRO radio station for announcement over the air KIRO Radio – 206-726-7000.
	arents cannot be contacted after 4 hours, the child's out-of-area contact will be called if sible.
_	ector/Designee will report incident to the licensor, at earliest convenience, and will complete a ten incident report at the earliest opportunity; incident reports are stored in the front office.

Flooding
If center is in a flood prone area:
During severe weather, director or designee will listen to radio for flood watch and flood warning
reports.
☐ If a flood warning is issued, move children and staff to the alternate site location; follow <i>Site</i>
Evacuation procedure in this plan.
☐ Director/Designee will notify all parents immediately via Procare Parent Engagement app SMS
emergency alert.
☐ Director/Designee will report incident to licensor at earliest convenience.
☐ Director/Designee will complete a written incident report at the earliest opportunity; incident
reports are stored in the front office.
☐ Director/Designee will call insurance company (if needed).

Α١	olcanic Eruption volcanic eruption will likely also be accompanied by other disasters such as flooding, landslides or udflows (also known as lahars).
	When notified of possible eruption (if within lahar hazard area) designee will listen to 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.
	Director/Designee will notify all parents immediately if evacuation takes place. Communication
wil	l be done via Procare Parent Engagement app SMS emergency alert.
	If not in the inundation area but volcanic ash fall is imminent close doors, windows and vents.
	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 main section of the child care facility.
	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

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

☐ Director/Designee will complete a written incident report at the earliest opportunity; incident

reports are stored in the front office.

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

☐ Director/Designee will call insurance company (if needed).

roofs.

LandslidesIf center is in landslide

If center is in landslide prone area: MELC IS NOT IN A LANDSLIDE AREA
☐ During severe weather, Director or Designee will monitor the media for watch and warning reports,
especially during snowmelt and saturating rain events.
☐ Staff 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 through media or local authorities, move
children and staff to the alternate site location; follow Site Evacuation procedure in this plan.
☐ Director/Designee will notify all parents immediately. Communication will be done via Procare
Parent Engagement app SMS emergency alert.
Director/Designee will report incident to licensor at earliest convenience.
 Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office.
Director/Designee will call insurance company (if needed).
Tsunami If center is in a Tsunami inundation area as defined by your local emergency management office or the US Geological Survey (USGS): MELC IS NOT IN A TSUNAMI AREA
☐ If you feel the ground shake, follow the <i>Earthquake</i> procedure in this plan; some earthquakes may cause a tsunami to form. Treat all earthquakes as if they'll cause a tsunami since we cannot instantly determine which type of earthquake has occurred.
Once the ground stops shaking and all staff and children have been accounted for and if your facility is in a Tsunami inundation area, immediately move to high ground or inland. Do not wait for an official warning.
Move children and staff to an inland alternate site location or a location at least 50 feet above sea level. This location is at the facility. Follow the <i>Site Evacuation</i> procedures in this plan. If you don have time to travel to high ground, but are in or near a multi-story building, go up to the top level of the building.
☐ Director/Designee will notify parents immediately of the incident, the evacuation and location if children are moved to an alternate site location.
☐ Director/Designee will report incident to licensor at earliest convenience.
☐ Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office.
☐ Director/Designee will call insurance company (if needed).

Missing Child	
• C • A • P so • M • T	ely; provide the following information: child's name and age ddress hysical and clothing description of the child, including any distinguishing marks such as visible cars or birthmarks ledical status, if appropriate ime and location child was last seen erson with whom the child was last seen.
☐ Notify Director/Des	signee immediately and search the facility again.
☐ Have child's inform	nation and, if possible, a picture for the police upon their arrival.
confirmation that	will contact by phone call to parents of missing child and attempt child is with family; if not - inform parents of situation and steps taken. will report incident to licensor at earliest convenience and Child Protective
Services.	
☐ Director/Designee reports are stored	will complete a written incident report at the earliest opportunity; incident in the front office.
 C A P S P M T 	ely; provide the following information: child's name and age ddress hysical and clothing description of the child, including any distinguishing marks such as visible cars or birthmarks hysical and clothing description of the suspect ledical status, if appropriate ime and location child was last seen fehicle information and direction of travel.
☐ Notify Director/Des	signee immediately.
☐ Follow Emergency	Lockdown procedure in this plan.
☐ Have child's inform	nation including picture, if possible, available for the police upon their arrival.
☐ Director/Designee	will contact via phone call of parents of missing child; inform parents of
situation and steps ta	ken. Director/Designee will report incident to licensor at earliest
convenience and Chil	d Protective Services.
☐ Director/Designee	will implement <i>Crisis Response procedure</i> in this plan.
☐ Director/Designee reports are stored	will complete a written incident report at the earliest opportunity; incident in the front office.

Abuse port abuse or suspected abuse to the Director.	
ctor will make a report to Child Protective Services and the licensor (see list under next item the type of information that may be asked).	1
ector 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 Children, Youth & Families (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 death and the identity of the perpetrator or perpetrators *Note: These reports may become legal documents. Confidentiality of these reports must be strictly observed.	
dent reports are stored in the front office. ult on Child or Staff	
911.	
ector/Designee will follow "Intruder Alert Procedure" in the <i>Intruder Alert / Lockdown procedu</i> nis plan.	re
ow <i>Lockdown</i> or <i>Lockout procedure</i> in this plan as appropriate.	
ff member or teacher will stay with the victim.	
im's family will be notified by the on shift manager, when safe to do so.	
ector/Designee will call Child Protective Services.	
ector/Designee will call Child Protective Services. ector/Designee will report incident to licensor at earliest convenience. ector/Designee will complete a written incident report at the earliest opportunity; incident	

Intruder Alert Procedure / Lockdown / Building Lockout

From time to time, schools and child cares have been faced with the threat of unauthorized individuals entering the facility. An intruder is defined as any unauthorized individual who, through act or deed, poses a perceived threat to the safety and welfare of children and employees. If at any time you are dealing with a person you feel uncomfortable around or are fearful for your safety or the safety of others, then you may be faced with an intruder situation. If the intruder is already in the building, initiate the intruder alert procedure and lockdown. Children will be locked down WITHIN their classrooms. If there is suspicious or criminal activity occurring outside the facility, the child care will go into a building lockout. Doors to the outside will be locked and access restricted, but staff and children will be allowed to move between the classrooms inside the building, if necessary.

There are key recommendations to implement regarding a lockdown, including those conducted because of an intruder:

- It is important that all members of the building's staff understand, support and participate in the Intruder Alert, lockdown, or lockout procedures.
- It is important to practice these procedures in the facility several times per year, just as you practice fire drills.
- Lockdown information will be given to parents upon enrollment. Parents will be notified of all lockdown/lockout drills and events. The facility will provide written materials for parents to help children understand and cope.
- Parents will be given a pre-designated alternate pick up site if children and staff are evacuated.
 Parents should not try to enter the facility during a lockdown or lockout and may be kept away from the child care until authorities determine it is safe.

Intruder Alert / Lockdown

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

- If a weapon is present, or suspected, DO NOT CONFRONT give pre-determined hand signal to another staff member for them to call 911 immediately. This signal is the pointer and middle finger extended, thumb vertical, and ring and pinky finger curled into palm ("Gun" shape). Initiate Intruder Alert / Lockdown Procedure. Walkie code: "Can we have SKOOKUM in the [location]"
- If **no** weapon is suspected, confront the intruder in the following manner:
 - Approach the individual in a non-confrontational manner with the assistance of another staff member
 - 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 the area where that is done.
 - If the individual refuses, do not confront him/her. Give the other staff member the predesignated hand signal to call 911
 - 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 building, a hand signal (which has been predetermined and is known by all staff) shall be made to the first staff member seen. That staff member will pass on the hand signal to others throughout the building and will call 911. This hand signal is the pointer and middle finger extended with the remaining finger curled into palm.
•	on hearing the chosen intruder alert announcement the following steps must be plemented:
	Director or designee will immediately call 911 (if it has not been done already) and stay on the phone until help arrives. Await further instructions from emergency response personnel.
	Staff should quickly check the hall and restrooms closest to their classrooms to get children into the rooms.
	Lock all doors to classrooms (this includes exterior and interior doors), close and lock all windows cover all windows and doors, 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 classroom table on its side to use as a buffer.
	Staff will maintain (as best they can) a calm atmosphere in the room, keeping alert to emotional needs of the children. (Tip: gather in a story circle behind the table and gather infants into one or two cribs (preferably on wheels) along with items to help keep them quiet, such as bottles, pacifiers, and small, quiet toys).
me	Teachers will keep all children in the classroom until an all clear signal has been given via SMS essage to teacher's personal cell phones (kept in emergency backpacks or clipboards). Do not spond to all clear on walkies.
	Emergency personnel will inform the site when it is safe to move about and release children from classrooms. Children should not be released to parents until an "all clear" has been called.
	Upon arrival, the local police, in conjunction with the Director/Designee, will assume controlling responsibility and may evacuate the building per police standard operating procedures.
	When "All Clear" is heard, the Director/Designee will apprise the staff of the situation and counsel
	with children. When the threat has been eliminated, normal activities should be resumed as soon as possible as instructed by the Director/Designee.
	Director/Designee will apprise parents of all "lockdowns" whether practice or real.

Building Lockout If the suspected intruder is not yet in the building, an announcement will be made (or a bell sounded) which alerts the staff of potential danger. The announcement will be "Classroom Lockdown"
☐ Any children outside the facility on the playground must be brought inside immediately.
☐ Immediately lock all exterior doors by turning of keyless entry, close and lock all windows, and cover all windows, turn off all lights.
☐ Director 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 doors.
☐ Staff will maintain (as best they can) a calm atmosphere in the building, keeping alert to emotional needs of the children. Activity within the building may continue, but no access to the outside is permitted.
☐ Teachers will keep all children in the building until an all-clear signal has been given via walkies.
☐ Upon arrival, the local police, in conjunction with the Director/Designee will assume controlling
responsibility and may evacuate the building per police standard operating procedures or may allow parents to pick up children if deemed safe.
Any individuals outside the building wishing to gain admittance must be escorted by law enforcement personnel.
☐ When "All Clear" is heard via walkies, the Director/Designee will apprise the staff of the situation and counsel children. When the threat has been eliminated, normal activities should be resumed as soon as possible as instructed by the Director/Designee.
☐ Director/Designee will apprise parents of all lockdowns or lockouts whether practice or real
via Procare message
☐ Director/Designee will report incident to licensor at earliest convenience.
 □ Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office. Suspicious Mail or Package □ Do not touch, smell, or taste unknown substances.
Cover substance with paper, trash can, clothes, or other material.
☐ Evacuate room, seal off room, and mark room as "Dangerous".
☐ Wash hands thoroughly.
☐ Call 911.
☐ Make a list of all staff and children present in the room at the time of the incident to provide to local health authorities and the police.

☐ Director/Designee will inform all parents via Procare Emergency SMS messaging and email/

☐ Director/Designee will complete a written incident report at the earliest opportunity; incident

reports are stored in the front office.

call DCYF licensor of the incident.

Communicable Disease Outbreak

Symptoms of flu, for example, 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 child care. Any children who have these symptoms should not be permitted to stay at the child care and should be asked to leave with the parent/guardian.
All staff, parents, and children should wash their hands with soap and warm water upon entering the child care.
If a child or staff member develops flu-like symptoms while at the child care, physically separate the sick person.
Call the parent/guardian to arrange for pick-up of the ill child. Insist that they come immediately.
Send sick staff home and provide for paid sick-leave.
Sick children will stay in the isolation area located in the front office, until a parent or guardian is able to pick them up.
The person in charge of caring for ill children in the isolation area is on shift manager. This person will limit contact with the ill child to the greatest extent possible.
Plenty of fluids will be provided to ill children.
Children and staff with symptoms will be asked to wear a mask. The staff member caring for the ill child will wear a mask.
All persons at the child care should carefully follow recommendations for hand hygiene after contact with an infected person or the environment in which the infected person was.
Those persons who are not involved in caring for the ill child will not enter the isolation area.
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 staff member or child who has been in the child care with a sick individual is at risk for developing influenza. Monitor staff and children 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 child care licensor to determine if and when the child care should be closed.
Director/Designee will complete a written incident report at the earliest opportunity; Incident reports are stored in the front office.
Field Trip Incident
 Before leaving for a field trip, make sure the trip coordinator 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 driver, vehicle license number, confirm vehicle emergency supplies List of important phone numbers significant to the trip (including children's emergency contact information and chaperon 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.
Contact center and provide update and actions being taken; center should consider deploying
personnel to the scene, hospital, or to appropriate locations.
☐ Director/Designee will contact by phone call to parents and give update of actions being taken;
indicate meeting locations or pick-up times at the child care. Director/Designee will report incident to licensor at earliest convenience.
Director/Designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office.
Director/Designee will call insurance company (if needed).

Bomb Threat	
During the Bomb Threat Call: DO NOT HANG UP! Keep the conversation 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?	going and attempt to get the following information
Listen for the following: Voice of male or female Speech impediment or accent What kind of background noise the Cell phone or land-line	
☐ Note the following: Time☐ What does the Caller ID say:	_Date
☐ What does the Caller ID say:	.
☐ Try to get the attention of another staff members	er and have them initiate the next steps.
☐ Notify Center Director/Designee.	
☐ Call 911.	
☐ Initiate a lockdown; follow <i>Lockdown procedu</i>	re in this plan.
$\hfill \Box$ Confer with fire and police about evacuation.	
☐ Have floor plan ready for police/fire personne	I.
☐ Have teachers and staff glance around their a	area for suspicious items (DO NOT MOVE
SUSPICIOUS ITEMS).	
☐ If the decision is made to evacuate, follow Bu	ilding and Site Evacuation procedure in this
plan. Director/Designee will notify parents if e	vacuated or moved to alternate location.
☐ Director/Designee will report incident to licens	sor at earliest convenience.
☐ Director/Designee will complete a written incid	dent report at the earliest opportunity; incident
reports are stored in the front office.	

☐ All parents will be notified of incident via Procare Emergency SMS message.

Crisis Support

When a tragedy strikes, teachers and staff are torn between the need to deal with children's reactions at the same time they are coping with their own reactions. With some advanced planning, this process can be much smoother (and healthier) than when tragedy takes a child care center by surprise.

Crisis: A sudden, generally unanticipated event that profoundly and negatively affects a significant

segment of the child care population and often involves serious injury or death. The psychological and emotional impact will be moderate to severe. Outside assistance may be needed. Director/Designee will determine whether or not to maintain normal schedules or to set aside the normal schedule for an all out effort to deal with the crisis. Depending on the crisis, it may be necessary to close the center for the day. Center should be reopened as soon as appropriate to provide normalcy back into the lives of children, parents and staff. Center Director/Designee will coordinate activities with on scene police or fire if it is that type of emergency. Identify high risk children, staff and parents likely to be most affected by the news (e.g. children of the teacher who is deceased/injured or parents whose children are in the same class as the deceased, best friends, etc.). \urcorner Gather and inform closest friends of the victims, provide support and information to them before a general announcement is made. If close friends or classmates are absent, assure that a supportive adult gives the news to them, ensuring that they do not get initial information from the media. ☐ Give teachers the facts about the tragedy and instructions on how to share the information with the children in their care as well as suggestions for assisting children to cope (see information either included on the CD or as links with this plan on the website). Send a letter home to parents explaining the situation. Include specific factual information and information on how the child care is handling the situation. Include a handout on Typical Children's Reactions (see information either included on the CD or as links with this plan on the website). ☐ Some parents will need to be contacted by phone, particularly if their child's reaction to the crisis is severe. Talk directly with the person picking up the child about the situation and possible reactions (see "Words to Use" either included on the CD or as links with this plan on the website). Determine if additional community resources are needed to be on "stand by" to effectively manage the crisis. It is essential to minimize the number of "strangers" standing around but bring in extra staff to help with meals or other logistics so familiar staff are with the children. Trained Early Childhood Crisis Counselors can act as advisors to the staff. Facilitate a staff meeting and, if possible, a parent meeting to provide information related to the crisis (see "Parent Informational Evening" either included on the CD or as links with this plan on

- Assist with children's processing of information about the crisis
- Provide counselors comfortable with working with young children and trauma to work with children/staff individually or in groups in a variety of locations
- Provide support and counseling for parents

the website). The following are some suggested activities:

- Provide childcare while parents attend support activities
- Provide helpful, factual information to parents
- Have an individual assist with answering phones, providing information and handling non-media inquiries
- Maintain a record of offers of assistance and ensure that proper personnel respond
- Deal with the "empty chair/desk" problem. For example, a counselor would provide support while sitting in the child's chair. The chair would then be moved to the back of the classroom. Finally the chair would be removed. Make sure children are part of the entire process. Allow children to be part of taking down artwork that was done by the missing person or a picture of them and replacing it with something else. This can be done days or weeks later.

Assign a familiar staff to act as Family Liaison between the child care center and the family. When appropriate, contact the friends/family of the deceased to get information regarding funeral arrangements and pass on information to child care staff and parents who may wish to attend. If a parent feels it's appropriate for their own children to attend the funeral/memorial, they must attend with them and provide support to their own child.
Arrange with appropriate community resources for a Parent Informational Evening and child care/community support activities 48-72 hours after the event.
 Other considerations: Have designated locations for the use of media, family, friends and workers, as needed. Keep media separate from families, children, friends and workers. Have transportation available to assist the family Young members of the victim's family should be cared for if possible Children and staff should be given permission to feel a range of emotions. Typically, individuals go through a sequence of emotional reactions following a crisis: high anxiety, denial, anger, remorse, grief and reconciliation Provide for grief counseling through Hospice/Carousel Program. The phone number is (425) 261.4777.
Crisis Communications Communication in a crisis will help set the stage for effective response, help to manage parents and the community, and begin the healing process by providing appropriate information in a timely manner.
It should not be assumed that the Director will take on all the Crisis Communication activities. The Director may become the Spokesperson for the center with someone else assigned to the writing and coordination of communication activities.
Director/Designee will determine whether or not to maintain normal schedules or to set aside the normal schedule for an all out effort to deal with the crisis. Depending on the crisis, it may be necessary to close the center for the day. Center should be reopened as soon as appropriate to provide normalcy back into the lives of children, parents and staff.
Center Director/Designee will coordinate activities with on scene police or fire if it is that type of emergency.
If center is affiliated or shares a physical location with another organization, a college for instance, then the other organization should be notified immediately.
☐ Director/Designee will determine if parent notification becomes an item of priority or can wait for a

If center specific - Director/Designee will designate someone to keep the local radio stations

letter to go home in the evening.

informed as to the status of the child care so parents will have accurate information. Use a Spokesperson from your own staff or work with the Public Information Office of the responding agencies or affiliated organization.
Gather and inform closest friends of the victims, provide support and information to them before a general announcement is made. If close friends or classmates are absent, assure that a supportive adult gives the news to them, ensuring that they do not get initial information from the media.
Prepare a formal statement for initial announcement, include minimum details and note additional information will be forthcoming. Also prepare statements for telephone and media inquiries. Have someone who does not get overly emotional answer phones and direct them to not guess about information they don't have; stick to the facts that have been approved for release.
Give teachers the facts about the tragedy and instructions on how to share the information with the children in their care as well as suggestions for assisting children to cope (see information either included on the CD or as links with this plan on the website).
Send a letter home to parents explaining the situation. Include specific factual information and information on how the child care facility is handling the situation. Some parents will need to be contacted by phone, particularly if their child's reaction to the crisis is severe.
Plan on updating information frequently.
If possible, use multiple communications methods direct contact with parents, written fact sheets, media, social media, meetings and other methods.
Conduct a short Staff Informational meeting when children have all been released Give them current information, praise them for a difficult job well done and prepare them for the next steps.
Inform staff and parents about any planned Staff, Parent or Community meetings.
Program Director or Operations Manager will deal with media/reporters promptly and factually. Coordinate messaging with Public Information Officer from fire or police if they are on scene.
Provide appropriate information as requested by police, hospital, or other agencies.
Director/Designee will report incident to licensor at earliest convenience.
Director/Designee will report incident to Child Protective Services if necessary.
Director or designee will complete a written incident report at the earliest opportunity; incident reports are stored in the front office

Parent-Child Reunification

Once a child is left in the care of your program, the people who work in the center are responsible for the child until s/he is picked up by a parent/guardian or emergency contact. The process for tracking children after a disaster is different – and more difficult – than during normal, everyday operations.

There are various reasons why child release differs after a disaster. Children must be released only to family members or emergency contacts that have been pre-designated on the emergency contact list or registration forms. Each release must be documented, with information about with whom and where the child is going. The process also creates privacy, so if a child is injured, his/her family can be given the news away from other waiting families. This is not only more respectful towards

the family involved, but it also prevents other families from becoming more upset while waiting for their own children.

The success of your release procedures relies in large part on prior explanation and practice for staff. Everyone will respond better to this disaster procedure if they know about it ahead of time. It is important to explain to families that the reunification process may take longer after a disaster, and why that is.

- Think about a good place for parents/guardians and emergency contacts to check in
- A good place for a release area that is out of sight of the check-in gate
- Copy Child Release forms, and store them with copies of emergency contact forms and other needed supplies in a go-kit, such as:
 - Signs
 - o Pens
 - Clipboards
 - Extra paper
 - Tape

All Families should be reminded of the importance of listing emergency contacts and keeping those contacts updated. Encourage families to include at least one emergency contact that is within walking distance of your program, if possible. Remind parents/guardians that people listed as emergency contacts need to know that they are being counted on. They also need to know that everyone's ID will be checked for their child's, or children's, safety. Children will not be released to those not listed as emergency contacts. If people are concerned about not having ID during a disaster, offer to file pictures of emergency contacts, or copies of their ID's, with the child's emergency contact information.

It is important to thoroughly document how each child leaves the facility. In the event that a second adult shows up to pick up the child, you are then able to tell them where the child went and who picked them up. Having the adult tell you the destination is also very important so you can relay that to the other parent/guardian as needed. Documentation is extremely important during disasters to that you can review them at a later date if required to do so.

Reunification Stations

There are five very important stations when setting up an alternate location and reunification plan.

- The <u>Check-In Gate</u> staff will be the first to greet the parents/guardians/emergency contacts upon arrival. This is where the Post Disaster Child Release Form begins. The staff and adult fill out sections one and two at this station. A sign advertising the Check-In Gate is encouraged. It should NOT be visible from the Child Care Area to minimize agitation in an already chaotic situation. It is also very important not to circumvent the necessary documentation.
- The <u>Child Care Area</u> is where staff will care for all the children still in their care. Staff will need to make sure that the child's needs are being met and they are being entertained. This is can be very traumatic for the children and they will need more to do than sit and wait for their parents. The Child Care Area is where section three will be filled out by staff.

- The <u>Release Gate</u> will be one of the last places the adult and children see. This is where you will finish filling out sections four through six on the form. The Release Gate is the place that the child/adult will be reunited to head home.
- The <u>Command Post</u> is where the Commander and support staff will work from. The Commander may be the Director, or it may be the most qualified staff member on hand. The Command Post is not usually accessible to parents, but can be if the Commander feels it's necessary.
- A <u>Private Area</u> not visible to children and parents is necessary for the Commander,
 Director or Designee to bring a parent or guardian to tell them if their child or children
 are missing, injured or deceased. It offers privacy and prevents other parents from
 becoming more agitated during chaotic circumstances.

Release Procedure

For the safety of staff and children, parents/guardians are restricted to the Check-in and Release Gates. A runner will be assigned to go get the child when the parent/guardian arrives.

- The release procedure begins at the Check-in Gate, where a parent/guardian or emergency contact begins filling out the child release form.
- A runner, if available, will then take the form to the Child Care Area to pick up the child.
 - The form is then signed by the staff assigned to that Child Care Area, releasing the child.
 - The runner will then take that child and form to the Release Gate.
 - Staff at the Release Gate and parent/guardian/emergency contact will complete the form together.
 - The Completed form will be filed at the Release Gate.
- *** If the child is injured/missing/deceased the process stops and the runner will take the form to the Command Post. Someone from the Command Post will contact the family away from everyone else and explain the situation. ***

The following template form is encouraged to be used during the Reunification Process. Make many copies and store them with your center's go-kit of administrative supplies.

Post Disaster Child Release Form

	Section 1 – Completed by Parent/Guardian/Emergency Contact at Check in Gate							
•	To be completed by	Child's Name:						
	Parent/Guardian/Emergency	Teacher:						
	Contact and returned to	Classroom:						
	Check-in Gate Staff							
	Section 2 – Completed by Gate Staff at Check in Gate							
•	To be filled out by Gate Staff	Parent/Guardian/Emergency Contact name:						
	Upon completion, given to							
•	Upon completion, given to runner to get child.	Droof of ID:						
	runner to get child.	Proof of ID : Confirmed that this person is on the Emergency Contact						
	Adult will be escorted to release	Sheet: Yes No Staff Initials						
	gate	Sheet. Tes No Stail linitials						
	Section 3 – Completed by Child Care Area Staff at Child Care Area							
•	To be filled out by Child Care	Child's Status:						
	Area Staff							
•	If child is present, send with	Present Absent						
	runner to the Release Gate							
•	If child is absent, missing, or	First Aid Missing						
	injured, send form with runner to							
	Command Post	*Child Care Area Staff to initial next to appropriate status.						
	Section 4 – Comple	ted by Release Gate Staff at Release Gate						
•	To be completed by staff at	Name of Parent/Guardian/Emergency Contact picking up child						
	Release Gate	(Must match name at the top of the form)						
•	Upon Completion, give to	Confirmed that this manage is an the European Contact Chapte						
	parent/guardian/emergency	Confirmed that this person is on the Emergency Contact Sheet:						
	contact to fill out section 5	Yes No Staff Initials:						
	Section 5 – Completed by Pa	arent/Guardian/Emergency Contact at Release Gate						
•	To be completed by	Parent/Guardian/Emergency Contact signature:						
	Parent/Guardian/Emergency							
	Contact and returned to	Destination:						
	Release Gate Staff							
		Date://						
	Section 6 – Comple	Section 6 – Completed by Release Gate Staff at Release Gate						
•	To be completed by Release	Signature of Release Gate Staff:						
	Gate Staff and file at release							
	gate	<u>_</u>						
		Date://Time::am/pm						

Appendices

Appendix A: Sample Parent Letter Date Dear Child Care Parents: Upon request Mini Einstein's Learning Center can supply you with a copy of our Disaster plan. Please take the time to read and become familiar with our procedures. With the implementation of this handbook you can rest assured we will do everything we can to protect and care for your child in the event of a crisis or disaster. With any disaster or crisis, your cooperation is necessary for the following: Encourage and explain to your child why the best place for them is at the child care center. Explain that if you are unable to pick them up quickly, the child care staff will care for them until you or your emergency contact comes to get them. Please do not immediately telephone the child care. Telephone lines will be needed for emergency personnel. Please call the center's out-of-area contact for information or to relay messages during a disaster. Listen to KRKO, KOMO, KSER or KIRO radio for updates. Provide an emergency/comfort kit for your child. Include an out-of-state contact number for your family with your kit. Provide a 72-hour supply of any medication or medical supplies/equipment that your child may need. The child care staff will care for your child until you or your designee is able to reach them. Be sure to keep your child's emergency release card updated. Children will only be released to those specified by you on their card. We will also utilize the phone numbers on the emergency release card should we need to re-locate to our alternate site. If local telephone lines are unavailable, utilize your out-of-state contact number for information. If possible, we will call that number to give information on your child and to see if you have left any information for us. Thank you for your attention to this matter. Please feel free to contact the child care if you have any questions regarding our crisis/disaster response handbook. After reading this plan, parents should complete the required forms and return it to the center director. Keeping your children safe,

Center Director

Sample Parent Communication Form



r child

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 facility 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:
Phone #:
We encourage you to familiarize yourself with the disaster plans and policies established for our care facility. 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 child care facility's out-of-area emergency contact.
I understand that your child care facility has established policies to respond appropriately to a disaster.
Signature: Date:
Please provide the following information for our 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 Supplies

Supplies can be costly to purchase all at once. To ensure that you have the appropriate supplies:

- Review the lists and decide what is a priority for your site
- O Develop a "supply rotation system" that allows you to use perishable supplies in your normal operations before the expiration date
- Team up with another organization to buy supplies in bulk
- Request specific donations from families or a disaster supply fee
- Seek donations from the community.

Supplies need to be accessible in the event of an emergency. It is often best to have a few essential supplies in a backpack or duffel bag near the door. This is called a "Grab and Go" bag (see next section for more information). The bulk of your supplies should be stored in a water-tight container, such as a plastic bin or a garbage can. This should be kept near an outside door or in an outdoor shed.

Grab & Go Bags

A "Grab & Go" bag contains necessary items for an emergency. Also called go-kits, these are items you may need within the first hour or two after a disaster. The bag only contains a small portion of your disaster supplies, but is a key part of your preparedness.

The "Grab & Go" bag is designed to meet <u>immediate</u> needs for a <u>limited</u> time. For example, it does not need to have formula and diapers for all infants. Make sure you have enough supplies in your 3-day disaster supply kit. You should have one bag for each classroom.

Your	laheled	"Grah	ጲ	Go"	had	should	contain:
ı Oui	labeleu	Glab	œ	GU	vay	SHOUIU	COHLAIII.

	Current emergency forms for students and staff in classroom emergency bin	
	"Necessary" medications with authorization forms (such as a EpiPens®, asth	ma inhalers, or
	any other medications that a specific child may need to keep him/her alive)	
Ļ	First aid kit: thermometer, gloves, ice packs, tweezers, small scissors,	
	and-aids various sizes, sterile gauze pads, adhesive tape, roller bandages,	(ID)
ha	and sanitizer, CPR barrier mask	(IV)
	Flashlight and batteries	- 11 R
	Thermometer	
	Bottle of water, Paper cups and/or infant bottles	
	Age-appropriate snacks/infant formula	
	Non-perishable snack	
	Tarp or ground cover and emergency blankets (such as space blankets)	
	Tissue or toilet paper and/or wipes and diapers as needed	
	Plastic bags	
	Age-appropriate time-passers (books, crayons, paper, etc)	

Make sure you have a system in place for keeping emergency contact information current. Check expiration dates of food, water, batteries, and any medication, and replenish those items regularly. Keep first aid supplies fully stocked.

A "Grab & Go" bag should be easy to grab/transport. Make sure you can easily carry it. A backpack is ideal. Your bags should go everywhere your class goes. If your class is inside their classroom, the best place for the bag is on a hook by the door that you would usually use to exit (and the exit that you are most likely to evacuate through). When you leave the classroom, always take it along. Your "Grab & Go" bag should be with you on: the playground, field trips, fire drills, or any other planned or unplanned classroom departure. The "Grab & Go" bag should be out of the reach of children at all times.

Comfort Kits You may want to have small comfort kits for each child stored with your main disaster supplies. Many disaster supply companies sell pre-made kits. Alternately you can give each parent a gallon size Ziploc bag and the following list: Wool socks
Car Kits You never know when a disaster may strike. Have emergency supplies in your car along with a first aid kit. Consider including the following items: Flashlight
Food 3-day supply for all staff and students. Choose a variety of non-perishable foods that require little or no preparation. Rotate food items every 6 months. Try to select items that the children like to eat and ones low in sugar and salt. A sample menu and shopping list is found on the next page. Some ideas incl_udeC: ommercially canned or processed foods, ready-to-eat meats, fish, pastas, fruit, and vegetables

A personal energy booster for staff such as a candy bar, instant coffee, hard candies, or teal

Infant formula and baby food for babies or other special foods for people with specific dietary

bags

needs

Canned evaporated or powdered milk

Crackers, granola bars, energy bars, trail mixes, and cereals

Peanut or nut butter (provided no one is allergic)

Treeze-dried foods, salmon/beef jerky, dried fruit, such as for camping

3 Days Emergency Menu for Child Care Facilities (serves 120)

DAY ONE								
MEAL	FOOD	PORTION SIZE						
Breakfast	Cheerios	½ cup						
	Mandarin Oranges	½ cup						
	Milk (dry milk powder + water)							
Lunch	Tuna	1 ½ oz						
	Saltine crackers	4						
	Green Beans	¹¼ cup						
	Peaches	½ cup						
PM Snack	Granola bar	1						
	Pineapple juice	½ cup						
Dinner	Canned Spaghetti with meatballs	½ cup						
	Green beans	⅓ cup						
	Pears	½ cup						
	DAY TWO							
MEAL	FOOD	Portion Size						
Breakfast	Cornflakes	½ cup						
	Applesauce	½ cup						
	Milk (dry milk powder)							
Lunch	Canned Chili	½ cup						
	Corn	⅓ cup						
	Triscuit crackers	4						
	Apricots	½ cup						
PM Snack	Graham crackers	2 pieces						
	Apple juice	½ cup						
	Dried prunes.	2 T						
Dinner	Canned beef stew	½ cup						
	Crackers	2						
	Corn	1/ ₄ cup						
	Peaches	½ cup						
BA = 4 :	DAY THREE	Donation Circ						
MEAL	FOOD	PORTION SIZE						
Breakfast	Cheerios	½ cup						
	Orange Juice	½ cup						
	Milk (dry milk powder)	1/						
Lunch	Baked beans	½ cup						
	Saltines	4						
	Corn	1/4 cup						
DM Consult	Pineapple chunks	1/4 cup						
PM Snack	Granola bar	1/ 0/10						
Discrete:	Apple juice	½ cup						
Dinner	Canned ravioli	½ cup						
	Green beans	1/ ₄ cup						
	Fruit cocktail	½ cup						

Bottled water: 1 gallon per person per day

Protein Group		
CN Labeled Chili *	15 oz. can = 4 servings	5#10 cans
Canned Beef Stew *	15 oz. can = 4 servings	5#10 cans
Canned Ravioli (CN Label) *	15 oz. can = 4 servings	5#10 cans
Canned Spaghetti/Meatballs *	15 oz. can = 4 servings	5#10 cans
Water packed Tuna	12 oz. can = 6 servings	32—6 12/ oz. cans
Baked Beans	28 oz. can = 6 servings	5#10 cans

GRAIN/BREAD GROUP		
Cheerios	20 oz. box = 20 servings	20—20 oz. boxes
Corn Flakes	24 oz. box = 20 servings	10—24 oz. boxes
Saltine crackers	16 oz. box = 38 servings	10—16 oz. boxes
Graham crackers	14.4 oz. box = 13 servings	4—16 oz. boxes
Triscuit crackers	13 oz. box = 22 servings	6—13 oz. boxes
Granola bars	12 per box	20 boxes

FRUIT/VEGETABLE GROUP		
Canned Orange Juice	46 oz. can = 10 servings	12- 46 oz. cans
Canned Pineapple Juice	46 oz. can = 10 servings	12—46 oz. cans
Canned Apple Juice	46 oz. can = 10 servings	24—46 oz. cans
Canned Green Beans	14.5 oz. can = 6 servings	3#10 cans
Canned Peaches	29 oz. can = 7 servings	8#10 cans
Canned Apricots	29 oz. can = 7 servings	4#10 cans
Canned Applesauce	48 oz. jar = 9 servings	3#10 cans
Canned Corn	15 oz. can = 7 servings	3#10 cans
Canned Pineapple chunks	20 oz. can = 5 servings	4#10 cans
Canned Mandarin oranges	11 oz. can = 5 servings	4#10 cans
Canned Pears	29 oz. can = 7 servings	4#10 cans
Canned Fruit cocktail	30 oz. can = 8 servings	4#10 cans
Dried Prunes	24 oz. bag = 18 servings	16# prunes

MILK GROUP	
Nonfat Dry Milk Powder **	5 Boxes

EXPIRATION DATES:

Try to purchase foods that will last for at least 6 months or a year. Restock food supplies on a planned schedule (every 6 months or annually) according to expiration dates.

^{*} CN Label = Child Nutrition Program approved product
** Mix with water for fluid milk to use on cereal or for drinking.

Water

Allow a minimum of **1.5 gallon per adult and 1 gallon per child per day**. Include both staff and children in your count. Store your water in a cool place. Put some in your freezer if you have space, where it can help to keep food cold in a power outage.

You can purchase water or collect it yourself. If you choose to collect your own water, make sure it comes from a safe source and is stored in bottles previously used for non-dairy beverages only. Wash, rinse, and sanitize all bottles. **Do not use old milk jugs.** Replace water you bottle yourself every 6 months. If you purchase water already bottled, replace it before the use-by-date.

In an emergency, if water must be treated, boiling is the best way to kill bacteria and parasites. If bleach is used to treat the water, add 10 drops per gallon for clear water and 20 drops per gallon for cloudy water. Use only unscented, 5% or 6% liquid chlorine bleach. Allow the bleach treated water to sit for 30 minutes before using it. Be aware that bleach may not destroy all the disease causing organisms. Have an eye dropper for measuring bleach in your kit if you decide to use bleach to disinfect water.

Your hot water heater is a great source of water in an emergency. Make sure you know how to shut off the intake and outlet valves—this is to trap the water inside the tank and prevent contaminants from getting inside. It is also a good idea to flush your water heater annually. Check with your manufacturer's recommendation. Make sure it is strapped to wall studs to prevent tipping over. Don't rely on the water heater as your only source of water.



SAFETY & FIRST AID (for 50 persons)

	Water	Shelter
Stored	 □ 4.5 gallons of water per adult (1.5 gallon/adult x 3 days) □ 3 gallons of water per child (1 gallon/child x 3 days) any tools needed to open water containers cups and other items needed to dispense water :	 □ (2) 12' X 16' tarps □ (3) 10' poles □ (100 ft) ¼ in. nylon rope □ flashlight w/ (2) extra sets of batteries per staff person □ blanket (fleece, wool, &/or "space") per person □ (5) extra blankets □ (30) plastic sanitation bags □ privacy shelter
Stored	Emergency Food: ✓ Is easy to serve ✓ Does not require cooling or heating ✓ Has a long shelf life ✓ Is stored protected from heat, cold, and pests □ Our emergency food is part of our regular menu rotation. Food for 3 extra days is always on site. (Familiar food can be a comfort during a disaster.) It is rotated	 □ (30) rolls toilet paper □ (50) sanitary napkins □ (30) plastic garbage bags □ (30) rolls paper towels □ (750) soap towelettes packets or baby wipes □ (15) bars of soap □ (5) 5 gal plastic buckets for sanitation/emergency toilets □ Pine sol or similar product for toilet odor control □ (30) 12-hour light sticks □ battery-operated lantern w/extra batteries □ extra clothing □ books, games, or small toys Stored: □ Medical supplies for children with special health care needs: □ Pet supplies (if applicable) □ Pet supplies (if applicable)
		Stored:

	Fir	st Aid
		masking tape
		permanent marking pens
		first aid reference book
		assorted adhesive bandages
		(100) 4 in. by 4 in. compresses
		(15) 8 in. by 10 in compresses
		(50) roll gauze bandages
		(5) triangular bandages
		(2) sm, med, and large cardboard splints
		(20) steri-strips or butterfly bandages
		(5) boxes of water in sealed containers for flushing wounds, etc.
		(1) small bottle bleach
		(1) backboard
		(1) scissor
		(3) tweezers
		(100) non-porous medical gloves
		(5) oval eye patches
		(7) rolls 1" cloth tape
		(5) rolls 2" cloth tape
		(25) dust masks
		thermometer
		3-day supply of critical medications, with authorization forms
		instant hand sanitizer
		eye wash
		pocket CPR mask
		alcohol wipes
		safety pins
		Other:
Stored	d: Dis	saster kit in archive room and conex



ADMINISTRATIVE (for 50 persons)

	Administrative Sup	pplies			
	master keys to facili copy of disaster pla office supplies □ pens □ paper □ tape (Duct and r □ stapler & staples	egular)	er(s)		
		Contact forms child release Release forms ary forms, such as: orms otebook) notebook) (or notebook) s log (or notebook) papers such as insura	ance documents, utilit	y account numbers, etc.	
*A	red: file box is an example perwork later.	of a container that v	would hold everythir	ng and then be used to t	file
	indicated by a check in We are continuing to	n the boxes above) gather supplies. The	. We have a plan for e supplies we have o	ed supplies (on-site sup r rotating perishable iter on site are indicated abo Iditional supplies is as fo	ms. ove. We have
	Supplies needed	Plan to obtain	Date to be completed	Person Responsible	

Appendix C: Hazard Mitigation

Hazard mitigation is a term that means to minimize or eliminate the impacts of hazards before they happen. Hazard mitigation is not a onetime thing. It is imperative to continually check areas and objects throughout your facility on an on-going basis. It is recommended that you do a walk-through of your facility at least once a month, or more, checking for any hazards that can be corrected.

Hazard Mitigation Priorities:

- 1. Would/could it break and fall and hurt someone?
- 2. Would/could it break and fall and block a primary exit from the room?
- 3. Would/could it break and fall and keep your program from opening the next day (or soon thereafter)?

Washington State Emergency Management Division has created some great videos for how best to prepare for a disaster and lessen hazards in your building. To view the videos:

- Open your internet browser to any search engine of your choice.
- Type in: Washington State Emergency Management
- Open the link for the Emergency Management Division (usually the first link)
- Hovering over the "Preparedness" Link, you will see an option for "preparedness videos". Click on that link.
- http://www.emd.wa.gov/preparedness/prep personal prep video index.shtml

The Hazard Mitigation Form on the following page tracks the work done to reduce any hazards in the child care. Copy and complete one form for **each** room, including classrooms, offices, hallways, storage rooms, and the kitchen.

Earthquake Hazard Mitigation

You can never tell when there will be an earthquake, but you can take steps to reduce or avoid damage, injuries, or loss of life for the children in your care, your staff, and yourself. Preparing for an earthquake includes things you already do to protect the children's safety and health, such as having a fire extinguisher handy and maintaining your certifications for first aid and CPR. With additional planning and preparation, the children in your care will have a better chance at surviving an earthquake unharmed.

In an earthquake, most injuries and deaths are caused by loose objects in and on buildings. During the shaking, cabinets and bookcases topple, objects fall out of cabinets, and hanging or large plants fall. Door frames and window jams may be bent when walls move. Doors may slam or jam shut, and window glass can shatter, sending broken glass into the room. Light fixtures, sprinkler heads, and other ceiling components may pop out and fall. Objects mounted on the walls (such as clocks, maps, and art work) may shake loose and fly across the room. The electricity may go out, and the sprinkler systems or fire alarms may turn on.

For more information on Hazard Mitigation and how to secure objects in the room, review "Earthquake Preparedness: What Every Child Care Provider Needs to Know," **FEMA document 240.**

Hazard Mitigation Form

Name of Room or Area:	
-	

Sat	ety Action Tak	ken	Date and C	omments	
Tall or heavy fu	urniture is secured	d to wall studs			
Heavy objects secured	are placed low or	properly			
are lined with s	adequate lips or si sticky material (su items from flying c	ch as "Grip			
Overhead cupl	boards have safet	y latches			
(including: out	d poisons are stor of reach of childre leach and ammon	en, in closed			
	of safety glass or a ttering and injury	ire adapted			
Evacuation/exit routes are free from hazards such as equipment, furniture, and other large objects					
	llocked or can be e inside without a				
Ongoing roor	m review:				
Date & Initials: Action Taken:					
Date & Initials:					
Taken:					

Appendix D: Disaster Drill Records This appendix includes sample DCYF drill records form.

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Annual Maintenance of Fire Extingwis.lhers; Date: 1111

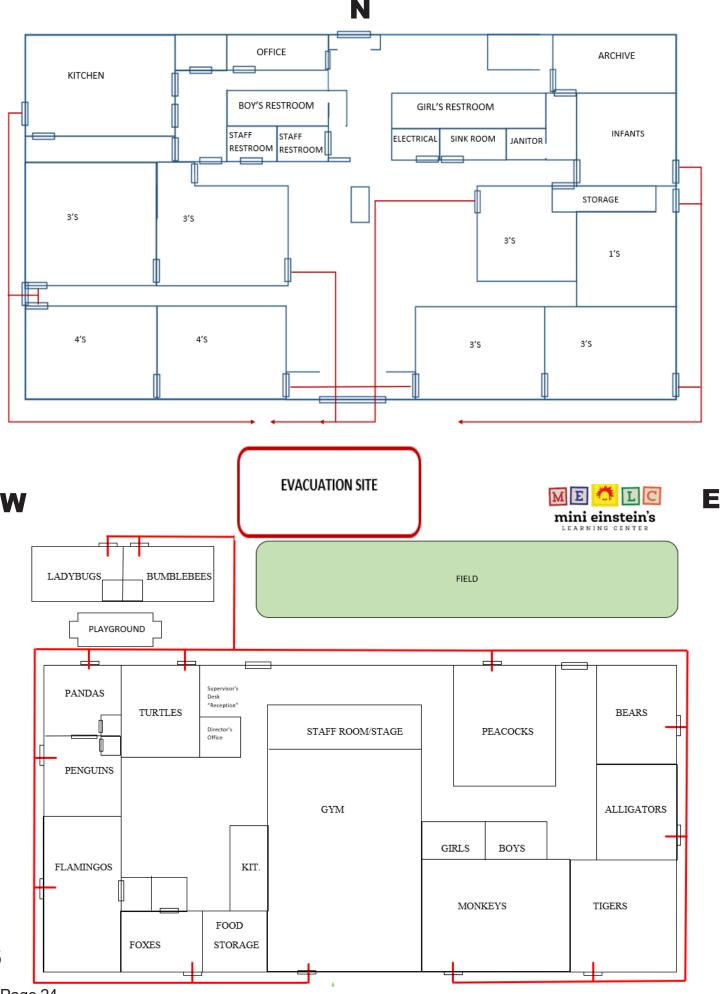
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CHILD C/IRE FIRE SL\FEJ'''f &.EMERGBfCY DRn.I.S RECORD DCYF15-3Q'2 (RE.\f. 00'\|\) EXT

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Page 24

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	Care/Ear	•	ning Ea	rth	quake D	rill Rec	ord	
Date of Drill	am n of Drill		_		Name of Drill Name of Progra Brief Description			
Rooms Participa	ating in Driii				Rooms Participa	ating in Drill		
Objectives	Evaluation	Changes to be made	When changes are		Objectives	Evaluation	Changes to be made	When changes are made
			made					
Name of Pe	rson Organiz	zing Drill			Name of Pe	rson Organiz	ing Drill	
Time of Drill Name of Progra	Name of Person Organizing Drill Date of Drill Time of Drill Name of Program Brief Description of Drill					Date of Drill Time of Drill Name of Program Brief Description of Drill		
Rooms Participa	ating in Drill				Rooms Participating in Drill			

Objectives	Evaluation	Changes to be made	When changes are made

Objectives	Evaluation	Changes to be made	When changes are made

Name of Person Organizing Drill_

Name of Person Organizing Drill

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Appendix E: Sample Situation Forms

Our child care's incident reports are kept for 5 years.

Included in this section are two sample report forms: a "Child Care Situation Report" form and a "Child Care Situation/Conversation Log". Fill out the form completely and leave no blank spaces. If the information is unknown, state that in the blank. Also included is a log to track disaster drills.

Notes about the Child Care Situation Report:

This form should be used to periodically update responding agencies or other groups about the status and needs of your child care in the event of a serious, widespread disaster.

In the message section, include the following information:

Kind of immediate assistance required If you can hold out without assistance and for how long Overall condition of the facility, children, and adults Names of outside agencies at the site and their actions

Notes about the Child Care Situation/Conversation Log:

This form should be used to keep a running log of the activities taking place during any disaster or crisis response. It will become very important when multiple individuals are responding to the situation.

A permanent log may be typed or rewritten at a later time for clarity and better understanding. If you do this, be sure to keep all original notes and records; **THEY ARE LEGAL DOCUMENTS.**

The following is a sample of how this log can be used and what information to include:

Time	Situation	Response	Initials
1:30 pm	Earthquake	Center was evacuated.	CD
1:45 pm	Susy's mom came to center upset and upset Susy's classmates.	Escorted Susy's mom away from children to compose herself and then let her take Susy home.	CD
1:55 pm	Water running out of bathroom.	Sent Becky to shut off the water main.	CD

To: _					From:			
Date: Time:				Locatio	on:			
Perso	on in Cha	arge at Site	:					
This ı	message I Cellular	e was sent v Phone	via: □ 2-¹ □ Messenc	way Rad aer	lio □ Ra	idio 🚨 Telepl	hone	
Desci	ription o	f the Incide	nivonualic)II.				
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Children								
Others								
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Struc	tural Da	mage (Area	s checked	d for daı	mage/prob	olems and loca	ition(s) of	
probl								
Checked	(X)	Probler	m Area		Locati	on of problems	S	
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		Fire						
		Electrical	-C					
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Mess		Heating/Co Main Build		tem				
Mess		Heating/Co Main Build		tem				
Mess		Heating/Co Main Build		tem				

Post- Disaster Child Care Situation/Conversation Log

Date:	Incident/Situation:	

Time	Situation	Response	Initials

Appendix G: Helping Children Cope with Disaster

Disasters can be very frightening and traumatic, especially for young children. There are several things that you can do to help the children in your care cope with their feelings.

Do	n't assume children won't understand what is happening.
	Reassure the children that they will not be left alone and that you are there to protect them.
	Be aware of changes in a child's behavior but also know that some children may not outwardly show their distress.
	Keep to routines such as meals, activities, and naps, as much as possible
	Try to keep familiar adults with the children rather than adding volunteers or substitutes for direct child contact.
	Avoid allowing young children to watch or listen to news coverage of the disaster.
	If child regresses to earlier physical or emotional behavior wetting, clinging, cryingtreat it calmly and efficiently.
	Give simple but truthful answers to children's questions and make sure children understand your answers. Don't give more information than the children can use and understand.
	Give children opportunities to express their feelings through activities such as playacting, using dolls, storytelling, painting, or drawing. Playacting revenge or aggressive behaviors may be common. Redirect only if it is hurting the child or someone else.
	Be especially supportive of the children's feelings and need to be close. Give lots of hugs, smiles, and kind words.
	Reassure children that they are not responsible for the disaster. Listening to children's stories about disasters and feelings may help and they may need to tell the story again and again.
	If possible, take a moment away from the children and make sure you address your own fears and anxieties by talking with other adults. Be particularly careful to not have children over hear your conversation.
	Seek professional assistance when needed. The Mental Health Checklist included with this plan on the website and CD may help you in determining the need for additional assistance. Your own knowledge of the child and your instincts about the child's needs will also help you make a decision. When in doubt, call for professional help. Please ask the Program Director for a list of available professionals.

In the event of a disaster or crisis, grief counseling may be provided through the Providence Hospice Bereavement Department. The phone number is 425-261-4807

National Institute of Mental Health (NIMH)

Information Resources and Inquiries Branch 6001 Executive Blvd, Rm. 8184, MSC 9663

Bethesda, MD 20892-9663

PTSD/Anxiety Disorders Publications:

1-88-88-ANXIETY

Public Inquiries: 301-443-4513

TTY: 301-443-8431 E-mail: nimhinfo@nih.gov

Web site: http://www.nimh.nih.gov

U.S. Department of Education

400 Maryland Avenue, SW Washington, DC 20202 Phone: 1-800-USA-LEARN TTY: 1-800-437-0833

E-mail: customerservice@inet.ed.gov

Web site: http://www.ed.gov

Federal Emergency Management Agency

(Information for children and adolescents)

P.O. Box 2012

Jessup, MD 20794-2012 Publications: 1-800-480-2520 Web site: http://www.fema.gov/kids

American Academy of Child & Adolescent Psychiatry

3615 Wisconsin Ave., N.W., Washington, D.C. 20016-3007

Phone: 202-966-7300

Web site: http://www.aacap.org/

Substance Abuse and Mental Health Services Administration's (SAMHSA) National Mental Health Information

P.O. Box 42557

Washington, DC 20015 Phone: 1-800-789-2647 TTY: 866-889-2647

Email: info@mentalhealth.org

Web site: http://www.mentalhealth.samhsa.gov/

American Academy of Pediatrics

141 Northwest Point Boulevard Elk Grove Village, IL 60007-1098

Phone: 847-434-4000 Web site: http://www.aap.org American Red Cross National Headquarters 431 18th Street NW Washington DC 20006 Phone: 202-639-3520

Web site: http://www.redcross.org

Disaster Training International: Helping Adults Help Children 9400 Ravenna Ave NE # 3 Seattle, WA 98115 206-420-8217 www.disastertraining.info

***The following copyrighted resource materials are included as separate links on the website or along with the templates and video on the CD:

- 1. 20 Ways to Be...
- Assessing a Student Need for Intervention
- 3. Crisis Resource Material
- 4. Parent Handout: Helping Children Cope
- Parent Informational Evening Guidelines
- 6. Sample Parent Letter
- 7. Symptoms and First Aid: Pre School and Kindergarten
- 8. The Three Tasks of Grief for Children
- 9. Words to Use

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