Federal law requires child care facilities that receive federal funds to have a plan in place that addresses emergency medical situations and evacuation in the event of an emergency or disaster.

The Division of Early Care and Education has developed this template to serve as a model to assist child care facilities develop their own plan. If you decide to use this template for your plan, fill in the blanks with information that applies to your child care facility.

Visit us on the Web at: www.scchildcare.org

ABC Quality: 1-800-763-2223

DISASTER RESPONSE E-MAIL: childcare.disaster.response@dss.sc.gov

This plan was reviewed on the following dates:

_________________  ___________________  ___________________

_________________  ___________________  ___________________

_________________  ___________________  ___________________
Emergency Plan for

(Name of Child Care Facility)

______________________________  ________________________________
(Street Address)                (City, State Zip)

______________________________  ______________________________
(Working Phone with Area Code)   (Director’s Name)

I. Emergency Phone Numbers

<table>
<thead>
<tr>
<th>Title/Agency</th>
<th>Contact Name</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Director</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency</td>
<td>N/A</td>
<td>911</td>
</tr>
<tr>
<td>Police (non-emergency)</td>
<td></td>
<td></td>
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<tr>
<td>Fire (non-emergency)</td>
<td></td>
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<tr>
<td>Poison Control</td>
<td></td>
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<tr>
<td>Local Health Dept.</td>
<td></td>
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<tr>
<td>Building Inspector</td>
<td></td>
<td></td>
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<tr>
<td>Dept. of Social Services</td>
<td></td>
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<tr>
<td>ABC Quality Monitor</td>
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<tr>
<td>Alternate/Evacuation Site</td>
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<tr>
<td>CCR&amp;R Quality Coach</td>
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</tbody>
</table>
II. Medical Emergencies

A. Medical Conditions Under Which Emergency Care and Treatment is Warranted

Medical emergencies that would require immediate medical care by a health care professional include the conditions listed below. (A list of possible medical emergencies is provided in section II A of the “Child Care Emergency Plan Guidelines” that accompany this template.)

B. Steps to follow in a medical emergency:
(A sample of these steps is provided in Section II B of the “Child Care Emergency Plan Guidelines” that accompany this template.)
III. Emergency Evacuation Procedures.

1. Preparedness

Evacuation Plans - Has written permission to use the alternate/evacuation sites listed below been secured?

a. In Place Evacuation

In the event that an emergency occurs at __________________________ (facility name) and “in place evacuation” is necessary due to events such as a tornado, chemical spill, etc. the children will be kept at the facility, but they will be moved to __________________________ (secure on-site location). The children will remain here under the care and supervision of our child care staff until dangerous conditions subside.

If children are exposed to toxic fumes or injured during the emergency, they will be transported to __________________________ (name of hospital) by ______________________________ __________________________ (means of transportation) where they will be examined by a health care professional and the parents/guardians will be contacted.

b. On Site Evacuation

In the event that an emergency occurs at __________________________ (facility name) and “on site evacuation” is necessary, the children will be relocated to __________________________ (name of on-site evacuation site). The children will remain here under the care and supervision of our child care staff until dangerous conditions subside.

If children are exposed to toxic fumes or injured during the emergency, they will be transported to __________________________ (name of hospital) by ______________________________ __________________________ (means of transportation) where they will be examined by a health care professional and the parents/guardians will be contacted.

c. Off-Site Evacuation.

In the event that an emergency occurs at __________________________ (facility name) and “off-site evacuation” is necessary due to events such as a brush fire, flash flood, etc., the children will be relocated to __________________________ (name of alternate/evacuation site) by __________________________ (means of transportation). The children will remain at this alternate site under the care and supervision of our child care staff while parents/guardians are contacted. When parents/guardians are contacted, they will be made aware of the situation and make arrangements to pick up their child or authorize that care be provided for the remainder of the day.

If children are exposed to toxic fumes or injured during the emergency or the evacuation, they will be transported to __________________________ (name of hospital) by __________________________ (means of transportation) where they will be examined by a health care professional and the parents/guardians will be contacted.
d. Major Disasters or Emergencies - Call and report to ABC Quality once you are safely evacuated.

In the event that a major emergency or disaster occurs (such as major environmental hazards, tornados, hurricanes, earthquakes, etc.) and/or a mandatory evacuation is ordered, children will be transported to a Red Cross designated mass shelter by ____________________________ (means of transportation). The children will remain at the Red Cross shelter under the care and supervision of our child care staff while parents/guardians are contacted. When parents/guardians are contacted, they will be made aware of the situation and make arrangements to pick up their child.

If children are injured during the emergency or the evacuation, they will be transported to ____________________________ (name of hospital) by ____________________________ (means of transportation) where they will be examined by a health care professional and the parents/guardians will be contacted.

e. Radiological Evacuations (to be completed by providers located within a 10 mile radius of a nuclear power plant in the following counties: Aiken, Allendale, Barnwell, Chesterfield, Darlington, Fairfield, Lee, Lexington, Newberry, Oconee, Pickens, Richland, and York)

Call and report to ABC Quality once you are safely evacuated.

If a mandatory evacuation is ordered because of an emergency at a nuclear power plant, children will be transported to ____________________________ (evacuation location*) by ____________________________ (means of transportation). The children will remain at the evacuation location under the care and supervision of our child care staff while parents/guardians are contacted. When parents/guardians are contacted, they will be made aware of the situation and make arrangements to pick up their child.

If children are injured during the emergency or the evacuation, they will be transported to an area hospital as determined by local emergency management officials where they will be examined by a health care professional and the parents/guardians will be contacted.

* Evacuation locations are designated by your County Emergency Management Agency. Providers must list the evacuation site for their facility in this section of the emergency plan. Please call your County Emergency Management Office to find out where your evacuation site is located if you have not already been provided that information.

2. The plan will be reviewed annually and updated as needed. The dates the plan was reviewed are listed on the front cover.

3. The plan will be available for immediate review by staff, parents, and ABC Quality during business hours.
4. Each child, of capable age, will receive training concerning emergency evacuation procedures during orientation. Fire drills will be held on a monthly basis, and drills for other disasters will be held every 6 months. The time, date, and type of drill is listed below.

<table>
<thead>
<tr>
<th>Type of Drill</th>
<th>Date of Drill</th>
<th>Time of Drill</th>
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<tbody>
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</tbody>
</table>
(Please copy this page as necessary to continue documenting drills)

5. When children are relocated, the staff member who will maintain the children’s records and the documentation for a child’s release to an authorized person is:

__________________________________________

6. Local radio and television stations that will be monitored during an emergency situation are (include NOAA Weather Radio if you have a weather radio):

______________________________
______________________________
______________________________
______________________________

The staff member who will monitor these stations during an emergency is:

_____________________________________

7. Briefly describe the procedures you will follow for the safe and prompt evacuation of infants, toddlers, and non-ambulatory children, including special needs children.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

8. Briefly describe the procedures you will follow for releasing children. Include safeguards to prevent the inappropriate release of a child to an unauthorized person.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

9. In case of an evacuation, the relocation site address will be posted at this location of the facility: ______________________________________________
10. Evacuation Checklist

<table>
<thead>
<tr>
<th>Item</th>
<th>Responsible Staff Member</th>
<th>Check-off</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact List for Children’s Families</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact List for Staff Families</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children’s Emergency Information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medications/Medical Supplies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Charged Cell Phone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Aid Kit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flashlights w/ extra batteries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Battery operated radio w/ extra batteries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hand Sanitizer/Cleansing Agent/Disinfectant</td>
<td></td>
<td></td>
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<tr>
<td>Wet Wipes and Tissues</td>
<td></td>
<td></td>
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<tr>
<td>Disposable Cups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water and Non-Perishable Food</td>
<td></td>
<td></td>
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<tr>
<td>Blankets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle Keys</td>
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</tr>
</tbody>
</table>

11. The staff member who will ensure that all vehicles to be used in an emergency or evacuation have at least ½ tank of gas is: ________________________________
12. Staff Emergency Assignment Chart

<table>
<thead>
<tr>
<th>Assigned Task</th>
<th>Staff Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call 911</td>
<td></td>
</tr>
<tr>
<td>Call Parents/Guardian</td>
<td></td>
</tr>
<tr>
<td>Provide First Aid (must be certified)</td>
<td></td>
</tr>
<tr>
<td>Take Children’s Emergency Medical File</td>
<td></td>
</tr>
<tr>
<td>Go with children to hospital (Stay until parent arrives)</td>
<td></td>
</tr>
<tr>
<td>Turn off Gas, Electricity, and Water (if necessary)</td>
<td></td>
</tr>
<tr>
<td>Post Relocation Site Information</td>
<td></td>
</tr>
<tr>
<td>Supervision of Children</td>
<td></td>
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<tr>
<td>Supervision of Children</td>
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<td>Supervision of Children</td>
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<td>Supervision of Children</td>
<td></td>
</tr>
<tr>
<td>Supervision of Children</td>
<td></td>
</tr>
</tbody>
</table>

13. The hospital or source of health care to be used is: ________________________________

14. The method of transportation to be used in an emergency is: ________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

**Reminder:** Take the child’s emergency medical information with him/her to the hospital and have a staff member remain with the child at the hospital until the parent/guardian arrives.

15. **Training** - Briefly describe how the child care staff will be trained on the Emergency Plan. (See Section III A.16 of the “Child Care Emergency Plan Guidelines” that accompany this template for tips on developing the training process.)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

**Page 8**
16. A copy of the Escape Plan and Fire Plan required by the Fire Marshal is attached to this template.

- The Escape Plan is a copy of the facility’s floor plan indicating the location of:
  - primary and secondary exits
  - fire extinguishers
  - fire alarm pull stations
  - the fire alarm control panel
  - accessible routes
  - assembly area(s)

- The Fire Plan is a written plan of steps to take when evacuating because of a fire.

Examples of the Escape Plan and Fire Plan are provided as Appendix 1 and Appendix 2 at the end of the Emergency Plan Guidelines that accompany this document. They are also available on the Child Care Services website at www.scchildcare.org or from the Central Office at 1-800-556-7445.

17. Location of First Aid Kit: _____________________________________________

Location of Additional Emergency Supplies _________________________________

Location of Cell Phone ___________________________________________________

Location of Electricity Shut Off ___________________________________________

Location of Gas Shut Off _________________________________________________

Location of Water Shut-Off ______________________________________________

Location of Air Vent Shut-Off _____________________________________________

18. Briefly describe the procedures you will follow for turning off gas, electricity, and water.

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

19. A copy of the “Emergency Procedures for Child Care Providers” brochure is attached to this plan.
B. In all emergency situations, child care staff will:

- **Pay attention to warnings**
- Inform the director of the situation as soon as possible
- Remain with the children throughout the event
- Check attendance every time the children are relocated
- Take any necessary medications and emergency supplies with them during an evacuation
- Take the children’s emergency records with them during an evacuation
- Take a cell phone if available to use for notifying parents/guardians

C. Relocation of Child Care Facility

1. Parents will be referred to SC Child Care Resource and Referral Network (CCR&R) to access local child care facilities in their area.
2. Children’s records will be maintained on file at the facility and made available to ABC Quality.
3. If a facility wishes to hire staff from a damaged facility temporarily to ensure staff:child ratios, the staff records must be on site and available to ABC Quality.
D. Contacting Child Care Services
In order to assist the entire child care community during an emergency or disaster situation, a representa-
tive of our facility will call ABC Quality with the following information:

Name of facility: _________________________________________

Address of Facility ________________________________________

Working Phone Number ____________________________________

Operational Status: (Call 1-800-763-2223 with this information after a disaster)

- Can operate at full capacity
- Can operate at partial capacity (include number of children you are able to care for)
- Can only operate at an emergency temporary site
- Cannot operate at all and need assistance relocating children in your care

Information to provide before a disaster (You may call ABC Quality or give this information to your quality monitor during a regularly scheduled visit.)

1. Would you be willing to exceed your capacity on a temporary basis?
2. Would you be willing to care for children in the ABC program?
3. Would you be willing to re-locate to a temporary site if necessary?
4. Are you aware of a possible temporary site where you could relocate? If so, where?
5. Do you have a working emergency generator?
6. Would you be willing to provide an e-mail address so that ABC Quality can send you information related to a disaster? If so, that e-mail address is: ______________________________
7. Would you be willing to provide a cell phone number so that ABC Quality can send you text messages related to a disaster? If so, that phone number is: ______________________________

ABC Quality Monitor Name and Phone Number: _________________________________

ABC Quality Office Phone Number_______________________________________

Child Care Resource and Referral Phone Number_______________________________

Alternate Contacts for Child Care Services during a disaster or emergency:
- SC Voucher Call Center Phone: 800-262-4416 (FOR EMERGENCIES ONLY)
- Child Care Services Emergency E-Mail Address: childcare.disaster.response@dss.sc.gov