**Sample Emergency Plan**

This template may be used to assist you in developing an Emergency Plan for your facility. It may be expanded to provide as much detail as necessary based on the types of likely emergencies and the number of children/staff. It is recommended that you coordinate with local law enforcement, fire, and emergency managers when developing your emergency plan. **Note: licensed child care facilities are not required to use this template when developing a plan.**

1. **Facility Information:**

|  |  |
| --- | --- |
| **Facility Name:** |  |
| **Facility Address:** |  |
| **Facility Phone:** |  |
| **Facility Main Contact:** |  |
| **Licensed Capacity:** |  |
| **Number of staff (if applicable):** |  |
| **Utility Shut Off Locations** |
| **Electricity:** |  |
| **Water:** |  |
| **Gas:** |  |
| **Equipment/Supplies Locations** |
| **Alarm Box:** |  |
| **Fire Extinguisher(s):** |  |
| **First Aid Kit(s):** |  |
| **Emergency Kit(s):** |  |

1. **Emergency Contacts:** Identify the contact information for emergencies and post it in accessible locations.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Contact name** | **Phone #** | **Email/Web Site** |
| **Police/Sheriff**  |  | 911 |  |
| **Fire**  |  | 911 |  |
| **Ambulance/EMTS**  |  | 911 |  |
| **Hospital** |  |  |  |
| **Poison Control** |  |  |  |
| **Local Emergency Management**  |  |  |  |
| **Electric Company** |  |  |  |
| **Gas Company** |  |  |  |
| **Water Company** |  |  |  |
| **Local Child Care Licensing Surveyor** |  |  |  |
| **DCF Child Protection Report Center** |  | 1-800-922-5330 |  |
| **Insurance Provider** |  |  |  |
| **Radio/TV Station** |  |  |  |
| **Child Care Resource and Referral Agency** |  |  |  |

1. **Emergency Assessment:** The following emergencies or possible disasters have been identified as likely for this facility. *(check all that apply)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Bomb threat** |  | **Hazardous material exposure** |  | **Thunderstorm/lightening** |
|  | **Criminal activity** |  | **Ice/snow storms** |  | **Tornado watch/warning** |
|  | **Dangerous person or potentially violent situations** |  | **Injury/medical emergency--provider** |  | **Utility outages—power failure or water line disturbance** |
|  | **Earthquake** |  | **Injury/medical emergency--child** |  | *List additional event likely occur in your area* |
|  | **Fire/smoke** |  | **Missing, lost or abducted child** |  | *List additional event likely occur in your area* |
|  | **Flooding** |  | **Mudslide/landslide** |  | *List additional event likely occur in your area* |
|  | **Gas leak** |  | **Structural damage to facility** |  | *List additional event likely occur in your area* |

1. **Parent Notification/Reunification:**  Steps to notify parents and to reunite children with parents.

|  |  |
| --- | --- |
| Notification: | *Include information given to parents: location of evacuation sites, emergency contact information for the facility**Location(s) of emergency contact information for each parent/guardian.* |
| Release: | *Describe the steps taken to reunite children with parents including steps to ensure that children are released only to parents/guardians or other authorized individual.* |

1. **Evacuation:** Evacuation in the event of fire, gas leak, structural damage to the facility etc.

|  |  |
| --- | --- |
| Evacuation routes/exits: | *List the areas/rooms used for child care.**List exits from each area/room, including rescue windows if applicable and describe the route to be taken from each. Consider including a diagram.*  |
| Evacuating infants/toddlers and others with limited mobility: | *Describe how infants/toddlers and others with limited mobility will be evacuated.**Include additional information concerning items/supplies to meet the needs of individual children. For example, diapers, formula, medication etc.* |
| Emergency Information/Kits: | *Describe the following:* *Where emergency contact information will be stored and how it will be accessed in an emergency, include other places contact information is maintained;**The contents and location of emergency supply kit(s) and who is responsible for the kit when evacuating the facility.* |
| Notification: | *Include:**How the staff and children are notified of the emergency;**How emergency services are notified; and**How and when parents* are notified. |
| Evacuation Sites: | 1. *Location/address of a* *safe location on the property or nearby (for example, due to fire):*
2. *Location/address of an Out of neighborhood location (for example, due to gas leak or bomb threat and as directed by emergency personnel):*
3. *Location/address of an Out of town (for example: following a widespread disaster—tornado, flood etc., and as directed by emergency personnel):*
 |
| Transportation to Evacuation Locations: | *Include means of transportation to each off site evacuation location.*  |
| Additional: | *Additional information not covered above: for example, moving to an off-site emergency shelter when extreme weather conditions exist.* |

**V. Shelter in Place:** Staying in the safest place inside the facility in the event of a weather related event such as severe storm/tornado or as advised by authorities due to a chemical spill/hazardous gases or security issue.

|  |  |
| --- | --- |
| Location: | *Include the location of designated shelter in place location:* |
| Evacuation routes/exits: | *List the areas/rooms used for child care.**List exits from each area/room and describe the route to be taken from each. Consider including a diagram.*  |
| Evacuating infants/toddlers and others with limited mobility: | *Describe how infants/toddlers and others with limited mobility will be relocated to the shelter.**Include additional information concerning items/supplies to meet the needs of individual children. For example, diapers, formula, medication etc.* |
| Emergency Information/Kits & Supplies | *Describe the following:* *Where emergency contact information will be stored and how it will be accessed in an emergency, include other places contact information is maintained;**The contents of emergency supplies to be stored in the shelter: including items and supplies for extended periods (1-3 days). For example; formula, water, food, hand sanitizer, diapers, toys, first aid kit, battery-powered radio and supplies for sealing the room etc.* |
| Notification: | *Include:**How the staff and children are notified of the emergency;**How emergency services are notified (if necessary); and**How and when parents* *are notified* *(if necessary).* |

1. **Hazard/Incident Specific Events:**  Provide additional guidance and direction for those emergencies or disasters likely to occur in your area. For example, flash flood, missing child or power outage.

|  |  |
| --- | --- |
| Event |  |
| Steps to Be Taken |  |
| Ensuring the safety of infants/toddlers and others with limited mobility: |  |
| Emergency Information/Kits & Supplies |  |
| Notification and Reunification: |  |

|  |  |
| --- | --- |
| Event |  |
| Steps to Be Taken |  |
| Ensuring the safety of infants/toddlers and others with limited mobility: |  |
| Emergency Information/Kits & Supplies |  |
| Notification and Reunification: |  |

|  |  |
| --- | --- |
| Event |  |
| Steps to Be Taken |  |
| Ensuring the safety of infants/toddlers and others with limited mobility: |  |
| Emergency Information/Kits & Supplies |  |
| Notification and Reunification: |  |