Emergency Preparedness


California Childcare Health Program
Administered by the University of California, San Francisco School of Nursing,
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Acknowledgements

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California Childcare Health Program
The mission of the California Childcare Health Program is to improve the quality of child care by initiating and strengthening linkages between the health, safety and child care communities and the families they serve.

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LEARNING OBJECTIVES

To identify emergency situations and prevention measures relevant to early care and education (ECE) programs.

To describe three ways a Child Care Health Advocate (CCHA) can assist ECE programs in meeting their emergency preparedness needs.

To identify the emergency preparedness resources to assist and support ECE providers and families.

RATIONALE

Emergencies can happen anytime and anywhere, despite our best efforts to reduce risks. Natural disasters, accidents, medical emergencies or even intentional acts of violence can all happen during the hours that ECE programs are providing care to groups of children. Young children are especially vulnerable during emergencies. For these reasons, licensed ECE programs are required by law to have policies, procedures and plans in place to minimize confusion and trauma if and when an emergency occurs. The CCHA can help develop these policies and procedures. The difference between coping well and not coping well during an emergency depends on how prepared the ECE program is and whether necessary supplies are available. ECE programs may not make preparedness a priority due to lack of time, lack of money for training and supplies, or the belief that “it won’t happen here.” The CCHA can help ECE providers understand the importance of emergency preparedness and help them prepare for a potential emergency.
WHAT A CCHA NEEDS TO KNOW

In times of crisis, young children do not have the ability to make judgments and decisions on their own. When events occur quickly, they may not be able to understand what is happening and what they need to do. In ECE programs, children look to the ECE providers for information, protection and reassurance. When the responsible adults are involved in emergency tasks, children may feel disoriented and afraid. A confused child may hide inappropriately or run from a safe place into danger. Children with disabilities and other special needs will require special attention during emergencies. For example, children who cannot walk on their own will need help during evacuations. Children with special health care needs may have essential equipment or medicine that must stay with them. ECE programs need to assign a specific ECE staff person to help children with special needs during an emergency.

Licensing Regulations

California Community Care Licensing Regulations (State of California, 2002) require all ECE programs, both child care centers and family child care homes, to have a written emergency preparedness plan. ECE programs can complete the following licensing forms to meet this requirement: Community Care Licensing Form LIC610 – Disaster Emergency Plan for Child Care Centers and Form LIC610A – Disaster Emergency Plan for Family Child Care Home. These forms are available from Community Care Licensing and are also included in the Handouts section of this module (Handout: Emergency Disaster Plan for Child Care Centers and Handout: Emergency Disaster Plan for Family Child Care Homes). A completed version of these forms should be on file at every licensed ECE program.

California state regulations require ECE programs to train both staff and children on their duties and responsibilities during a variety of emergency situations, including fire, natural disasters and any other situations which might force the program’s evacuation and relocation (State of California, 2002). Programs are required by law to perform and record disaster drills at least every 6 months. These requirements can be challenging for ECE programs. To help programs, CCHAs can complete required forms, develop written plans and organize a system for recording trainings and disaster drills. Additionally, CCHAs must know the appropriate local, state and federal agencies that guide emergency response and disaster planning, and should use the resources they offer.

Best Practices for Emergencies

It is important to have an emergency plan with policies and procedures in place before an event occurs. A list of situations that need prompt emergency response can be found in the Handout: Situations That Require Medical Attention Right Away. A good emergency plan can be adapted to any emergency situation (Riopelle, Harrison, Rottman & Shoaf, 2004). ECE providers will need to learn how to prepare and respond to a variety of possible situations, including the following:

- fires
- earthquakes
- explosions
- floods
- blizzards
- gun violence
- car or bus accident
- choking
- medical emergencies
- hurricanes
- terrorist alerts

Emergency Preparedness Drills

It is important to be prepared for emergencies and to practice drills. CCHAs can help ECE providers identify situations or plans that put children at risk in the ECE program. Together, the CCHA and the ECE provider can prepare a plan to address these risks. This plan should include the following:

- Practice emergency drills every month (although California regulations only require a fire drill every 6 months). The more children practice drills, the more obedient they will be during an emergency. Hold drills at different times of the day, from different exits, during varied activities including naps. Discuss drills afterward to learn
more about the children’s concerns so they can be addressed.

- Plan an announced, well thought-out fire drill early in the school year so children and teachers can be well prepared throughout the rest of the school year.

- Prepare children for emergency procedures by discussing what to do when they hear the alarm. Practice “stop, drop and roll” fire prevention; practice “duck, cover and hold” for earthquake preparedness and community violence; and practice crawling out of the building on hands and knees in case the environment becomes filled with smoke. Songs, stories and dramatic play can reinforce what is learned in a drill. Children react calmly when they are prepared and when adults who are caring for them also act calmly.

- Form an emergency preparedness team that is responsible for an emergency preparedness plan. The plan will include policies, practices, training, resources, practice drills and record keeping. Give ECE staff specific responsibilities to avoid confusion about who does what during an emergency.

- Make a drawing of the building that the ECE program is located in and the surrounding area. Include floor plans that show two alternative evacuation routes from each classroom and from each building; two property access roads for emergency vehicles; two evacuation meeting places off-site; the shut-off valves for water, gas and electricity; and the location of fire extinguishers, hydrants and emergency and first aid kits. Note any physical or road barriers that may interfere with evacuation or emergency vehicles (e.g., a one-way road or a dead-end road).

- Post a copy of the evacuation route, emergency plans and emergency phone numbers in every room for ECE staff and parents to see.

- Train new staff, and establish yearly training for current staff, on emergency procedures that include the following topics:
  - evacuation procedures
  - use of a fire extinguisher
  - children’s disaster response
  - Keep up-to-date emergency contact information for children and staff (update every 6 months).
  - Keep a daily attendance record and make sure attendance is taken during evacuation.
  - Make sure the ECE program has the proper evacuation equipment for infants who do not yet walk. Emergency evacuation cribs with reinforced wheels are available from most early education equipment suppliers.
  - Maintain logs to track the frequency of emergency drills. Information should include the date, type of drill, amount of time to complete the drill and any concerns to be addressed.

**Steps in an Emergency Fire Drill**

- Remain calm.
- Sound alarm or signal that will alert everyone in the building.
- Evacuate using exit routes or alternatives marked on the diagram of a plan.
- Eliminate drafts: close all doors and windows on the way out.
- Take a head count and compare it to the roster to make sure everyone is out of the building.
- Call the fire department after leaving the building.

**How to Use a Fire Extinguisher**

- Stand back about 8 feet.
- Aim at the base of the fire (not flames or smoke).
- Squeeze or press the lever while sweeping from the sides to the middle of the fire.

**Earthquake Preparedness**

Most Californians live near an active earthquake fault (Governor’s Office of Emergency Services, 2000). Being prepared for an earthquake can prevent injuries. ECE programs are required by the Community Care Licensing Division to complete an earthquake preparedness checklist (see Handout: Earthquake Preparedness Checklist) as an attachment to the Emergency Disaster Plan. It is also important to prepare
preschool-age children for earthquakes (see Handout: Tips for Preparing Children).

The earthquake preparedness checklist includes the following information:

A. Eliminate potential risks in classrooms and throughout the ECE program, including the following:
   • Make sure heavy objects will not fall from high shelves.
   • Secure cabinets with child safety locks.
   • Secure and lock filing cabinets.
   • Bolt bookcases to wall studs.
   • Secure water heater to wall.

B. Establish a response plan that includes the following:
   • Teach children about earthquakes and what to do.
   • Practice duck and cover drills.
   • Post, or make available to parents, copies of the school earthquake safety plan.
   • Prepare an emergency kit for the ECE program.

Security Issues

It is important for an ECE program to have policies and procedures in place on security issues to protect children from being lost or missing (e.g., a list of adults allowed to drop off and pick up children). To minimize risk, ECE programs should do the following:

• Keep daily rosters of children’s attendance, including the name of the person signing the child in and out of the program. Community Care Licensing requires that anyone who drops off or picks up a child from the center must sign his or her full name and record the time of day the child is dropped off or picked up (State of California, 2002).

• Maintain a record (including names, telephone numbers and addresses) of people allowed to pick up and drop off children.

• Be aware of any registered sex offenders living in the neighborhood. In California, Megan’s Law has made it possible to get information and addresses for registered offenders (http://www.meganslaw.ca.gov).

• Be prepared to notify police or family members if a parent or guardian comes to pick up his or her child while under the influence of alcohol or drugs. If the ECE provider is concerned that the parent might hurt the child, he or she can call another adult to come pick up the child. (See Handout: Child Care Centers Self-Assessment Guide: How to Make Your Child Care Center a Safer Place for Children.) If a child is missing from the ECE program or was picked up by the wrong person, act immediately:

   • Search the ECE program and immediate surrounding area, including places a child may crawl or hide.
   • Notify local police.
   • Provide the child’s name, date of birth, height, weight and other unique identifiers, as well as what clothes the child was wearing.
   • Notify parents or guardians.
   • Request that the child’s name and identifying information be immediately entered into the National Crime Information Center Missing Person File and the local Amber Alert system. The Amber Alert system is a national early warning system that lets the public know when a child was kidnapped or reported missing. It includes information either broadcasted on local radio stations or posted on highway signs on the description of the missing or kidnapped child and the license plate of the car if known.

Helping Children and Adults Cope with Trauma

Experiencing an emergency situation or traumatic event can cause anxiety and stress among children, parents and ECE staff. It is important for CCHAs and ECE providers to recognize the symptoms of trauma and to know how to help children and adults cope (Project Cope, 2001).

Possible symptoms of trauma include the following:

For children:

• withdrawn behavior
• helplessness
• loss of verbal skills
• loss of toileting skills
• depression
• fear
• disrupted sleep
• acting out
• difficulty separating from parents
• clinginess

For adults:
• withdrawal or depression
• feelings of inadequacy
• difficulty concentrating
• slowness to respond
• substance abuse
• psychosomatic symptoms (e.g., thinking you are having a heart attack when there are no physical signs of a heart attack)

Ways to help:
• Provide a safe place.
• Try to return to a normal routine as soon as possible.
• Be patient and understanding.
• Reassure children that they are safe and protected.
• Find out what children are thinking and feeling (e.g., encourage children to talk about their feelings and to make drawings about their feelings).
• Limit children from being exposed to more trauma (e.g., do not show them repeated images of the event on television or pictures of the event).
• Be aware of mental health resources available for referrals for families or ECE staff who need help.

WHAT A CCHA NEEDS TO DO

Review All Written Plans

Look at policies, plans, procedures and all records of emergency-related activities. Use the Emergency Prevention/Poisons section of the California Childcare Health Program (CCHP) Health and Safety Checklist-Revised (CCHP H & S Checklist-R) (CCHP, 2005) to check for emergency preparedness items. Check for the following details:

• Does the emergency plan assign a staff person as the leader during an emergency?
• Does the plan describe how the program will keep track of all children and staff during an emergency or evacuation?
• Does the plan identify where to evacuate to?
• Does the plan describe arrangements for children with special needs?
• Is emergency contact information for parents up-to-date?
• Does the plan describe how to transport infants and toddlers?
• Does the plan include documented permission for emergency medical care if needed?
• Does the plan identify an emergency shelter location, in case of need?
• Are staff files up-to-date, including current basic first aid and CPR certifications? Have staff completed training in the prevention of choking and drowning?
• Does the program record when emergency drills are conducted?

Review Supplies

CCHAs should make sure that emergency kits are prepared and that enough supplies are available. Emergency kits should include the following: a 3-day supply of fresh water and food, a battery-powered radio, flashlight and extra batteries, plastic garbage bags and toilet paper, diapers and wipes, blankets, any prescription and over-the-counter medicine needed by the children and the ECE staff, a map of the area for evacuating and finding shelters, copies of class lists
and Emergency Cards for each child and staff member, and first aid supplies. The CCHA should review expiration dates on medicine and food items. The CCHA should also set up a monitoring system to make sure that supplies are periodically updated. For a complete supply list, see the Red Cross Web site: http://www.redcross.org/disaster/masters/supply.html.

**Educate Staff and Parents on Emergency Preparedness and Response**

CCHAs should educate ECE staff and parents on how to prepare for an emergency and what to do during an emergency. Issues to cover include the following:

- items needed for emergency and first aid kits (what are the items and why are they needed)
- activities, such as conducting regular checks for supplies, testing smoke detectors and fire extinguishers, and conducting evacuation drills
- review of policies, plans and procedures (see Handout: Outline of Emergency Procedures)
- ways to educate children about emergencies
- community risk for earthquake, flood, hurricane or other natural disasters
- first aid for trauma, bleeding and burns
- changes to the ECE environment to reduce or eliminate risks, such as fastening of furniture or water heaters to wall
- use of the CCHP H & S Checklist-R (CCHP, 2005) to help identify emergency preparation needs

**Help ECE Providers Teach Children about Emergency Preparedness**

Teaching young children what to do during an emergency can help children protect themselves (Riopelle et al., 2004). Some behaviors that can be taught include the following:

- To duck, cover and hold in case of an earthquake.
- To crawl along the ground to avoid breathing in smoke in case of fire.
- To stay away from windows during tornados.

**Provide Educational Materials**

CCHAs can put up posters on emergency preparation in the ECE program in easy-to-see locations. ECE programs benefit from materials such as posters, fact sheets, books or videos on any of these topics:

- burn prevention and how to stop, drop and roll
- regular maintenance of smoke detectors (how and when to change the batteries)
- proper use of fire extinguishers
- location of gas valves and how to shut them off
- power surges and electrical fires
- hidden risks in everyday items, such as sinks, toilets, windows and appliances, with strategies to decrease risks

**Provide Resources**

In California, Community Care Licensing’s Child Care Advocate Program gives out self-assessment guides on a variety of topics. The guides include checklists for ECE providers who want to make sure that they are doing their job correctly. Two of these guides can be found in the handout section of this module: Handout: Disaster Planning: Self-Assessment Guide for Child Care Centers and Family Child Care Homes and Handout: Child Care Centers Self-Assessment Guide: How to Make Your Child Care Center a Safer Place for Children.

The National standards, Caring for Our Children (CFOC), describes best child care practices for emergencies and disasters, including guidelines for recognizing and responding to emergency situations, and for establishing appropriate ways of recording plans and drills (American Academy of Pediatrics [AAP], American Public Health Association & National Resource Center for Health and Safety in Child Care, 2002). CFOC also provides a reason for each step. The recommendations contained within CFOC generally meet or exceed licensing requirements in California.

The part of the National standards that is specifically relevant to emergencies and disasters has been put into a smaller document, Emergency/Disaster Preparedness in Child Care Programs, Applicable Standards from Caring for Our Children, 2nd Ed. This document is available on the Web site of the National Resource Center for Health and Safety in Child Care at http://
CCHP offers a publication called Prevention of Injuries: A Curriculum for the Training of Child Care Providers (CCHP, 2001). This curriculum can be used by CCHAs to help train ECE providers. The curriculum content includes preventive strategies, emergency preparation, response examples and additional resources. The curriculum also offers information about how children’s developmental stages influence their ability to understand and cope with stressful situations, and tips for how to describe threats and necessary actions to children and their families. The curriculum is available in print or on a CD, in English and Spanish.

Link Programs with Community Services

ECE programs should be encouraged to make contacts at important agencies in their communities, and a CCHA can help make these contacts. Firefighters can come visit the ECE program and meet the children. ECE programs should be included in the planning of citywide or regionwide disaster drills. Agencies of importance include the following:

- fire departments
- emergency medical services
- local health departments
- schools, libraries and community centers
- shelters for families
- Red Cross

Cultural Implications

Emergency plans should be communicated clearly to all ECE staff and families. Translating the emergency plan into other languages may be necessary for families in the ECE programs who do not speak English as their primary language. If there are children in the ECE program who do not speak English, it is important to have an ECE staff or a volunteer who can explain emergency drills to the children in their primary language. It is important to remember that emergency situations may be seen differently, depending on the life experiences and cultures of the people involved in the ECE program. Some rules, policies and recommendations may conflict with cultural standards. The use of translators and other materials may help with these difficulties.

Implications for Children and Families

Families will appreciate having their children cared for in ECE programs that are prepared for emergency situations. Having clear and open communication between ECE providers and families about the emergency plan for the ECE program will help the families feel included in the plan and feel that their children are being well cared for.

Implications for ECE Providers

CCHAs can help ECE providers feel prepared for emergency situations by helping with training and education of ECE staff and families. ECE providers will feel more confident in the emergency plan when they have the support of the CCHA, ECE staff and families.
ACTIVITY

Emergency Preparedness: What Is the CCHA’s Role?

Divide into small groups (3 or 4 people) and discuss the emergency situations given to the group. Discussions can be based on actual experience or events that could happen in the future. Discuss the role of the CCHA in helping programs to become prepared. Pick a person who will report back to the larger group.

Emergency Situations:

- A large fire starts in the kitchen and spreads to nearby rooms.
- A strong earthquake causes damage to the foundation and walls of the ECE program.
- An explosion occurred in a nearby industrial complex, and there is a strong smell of smoke in the air.
- A flood occurs in the community and the ECE program is not flooded, but is inaccessible.
- A snow blizzard causes impassable roads in the late afternoon.
- A car accident occurs involving a family in front of the ECE program.
- A 2-year-old child chokes on a piece of a broken toy during indoor play.
- A toddler falls off the play structure outside and is unconscious.
- A violent confrontation of teen gang members occurs on a street next to the program site.

Questions to Consider:

- Should 911 be called, or are ECE staff in charge of the situation?
- Is evacuation of children and staff required?
- Is more than one staff member needed to attend to the emergency, and if so, how will you make sure the children are safe?
- Will parental notification be required immediately, and if so, how will parents be reached?
- What documents in children’s records are needed in this situation?
- Will children with special needs require extra help, and if so, who will provide it?
- What changes to the ECE program (if any) might reduce the risk of injury in this scenario?
- How would the program benefit from drills in handling this event?
NATIONAL STANDARDS


CALIFORNIA REGULATIONS

From *Manual of Policies and Procedures for Community Care Licensing Division*

Title 22, Section 101152, 101174, 101182, 101215.1, 101216, 101216.3, 101221, 101226-101227, 101615, 101626, 102371, 102416-102417, 102421.
## RESOURCES

### Organizations and Resources

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<th>Description of Resources</th>
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| American Red Cross  
www.redcross.org | The American Red Cross trains people on CPR and first aid. They offer information on disaster supply kits, homeland security advisory systems and evacuation plans. |
| Governor’s Office of Emergency Services (OES)  
www.oes.ca.gov/Operational/OESHome.nsf/1?OpenForm | The OES offers information about earthquake preparedness, disaster preparedness, hazardous materials and winter storms. The OES coordinates the overall state agency response to major disasters in support of local government. The office is responsible for making sure that the state is ready to respond to and recover from natural, human-made and war-caused emergencies. |
| Emergency Medical Services for Children  
www.ems-c.org | The Emergency Medical Services for Children program is a national initiative designed to reduce child and youth disability and death due to severe illness and injury. There is information on the Web site about disaster preparedness. |
| Federal Emergency Management Agency (FEMA)  
www.fema.gov | On March 1, 2003, FEMA became part of the U.S. Department of Homeland Security (DHS). FEMA’s continuing mission within the new department is to lead the effort to prepare the nation for all risks and effectively manage federal response and recovery efforts following any national emergency. |
| Institute for Business and Home Safety (IBHS)  
4775 E. Fowler Avenue, Tampa, FL 33617  
Tel: (813) 286-3400  
Fax: (813) 286-9960  
www.ibhs.org | IBHS is a nonprofit association that engages in communication, education, engineering and research. Their mission is to reduce deaths, injuries, property damage, economic losses and human suffering caused by natural disasters.  
Publication: Protecting Our Children from Disasters: Nonstructural Mitigation for Child Care Centers  
www.ibhs.org/docs/childcare.pdf |
| Missing Children Clearinghouse (MCCH)  
Tel: (800) 222-FIND  
http://ag.ca.gov/missing/content/clearinghouse.htm | The California MCCH maintains a toll-free hotline 24 hours a day, 7 days a week to receive information and inquiries about missing children. |
| National Center for Missing and Exploited Children (NCMEC)  
Tel: (800) The-Lost  
www.missingkids.com | NCMEC was established in 1984 as a private, nonprofit organization. It serves as a clearinghouse of information on missing and exploited children; provides technical assistance to individuals and police; and distributes photographs and descriptions of missing children worldwide. |
| UCLA Center for Public Health and Disasters (CPHD)  
1145 Gayley Avenue, Suite 304  
Los Angeles, CA 90024  
Tel: (310) 794-0864  
Fax: (310) 794-0889  
www.cphd.ucla.edu/ | UCLA CPHD was established in 1997 to address the important issues faced when disaster occurs in a community. CPHD is based in the Department of Community Health Sciences in the UCLA School of Public Health. CPHD promotes efforts to reduce the health impacts of domestic and international, and natural and human-made disasters. |
Publications


Audio/Visual

REFERENCES


HANDOUTS FOR THE EMERGENCY PREPAREDNESS MODULE

Handouts from California Childcare Health Program (CCHP), Oakland, CA

Page  Handout Title
17  Health and Safety Notes: Young Children and Disasters
19  Outline of Emergency Procedures

Handouts from Community Care Licensing Division, California Department of Social Services, Sacramento, CA

Page  Handout Title
21  Child Care Centers Self-Assessment Guide: How to Make Your Child Care Center a Safer Place for Children
29  Disaster Planning: Self-Assessment Guide for Child Care Centers and Family Child Care Homes
37  Earthquake Preparedness Checklist
38  Form LIC610 – Emergency Disaster Plan for Child Care Centers
39  Form LIC610A – Emergency Disaster Plan for Family Child Care Homes

Handouts from Other Sources

Page  Handout Title
41  Situations That Require Medical Attention Right Away
43  Tips for Preparing Children
Disasters and trauma

After experiencing a disaster—whether it is a flood, earthquake, fire, hurricane or bombing—children may react in ways that are difficult to understand. Even if you or your child were not physically injured, the emotional response can be strong. They may act clingy, irritable or distant, and although they are very young and do not seem to understand what is going on, they are affected as much as adults. Adult fears and anxieties are communicated to children in many ways. The experience is more difficult for them, as they do not understand the connection between the disaster and all the upheaval that follows. They need reassurance that everything is all right.

There is a wide range of “normal” reactions for children following a disaster, most of which can be handled with extra support at home, child care and school. In some cases, professional intervention may be needed, despite everyone’s best efforts. Early intervention can help a child avoid more severe problems.

Message to parents

Some ways to provide reassurance after a disaster are:

- Try to remain calm.
- Remember the effect and anxiety produced by watching television coverage or listening to the radio. Keep TV/radio/adult conversations about the disaster at a minimum around young children.
- Spend extra time being close to your child(ren).
- Answer all questions as honestly and simply as possible. Be prepared to answer the same questions over and over. Children need reassurance to master their fears.
- Spend extra time with your child at bedtime—soothing and relaxing time—talking, reading or singing quietly.
- Spend extra time with your child when bringing them to child care—they may be afraid you will not come back.
- Try to return to a normal routine as soon as possible to restore a sense of normalcy and security.
- Don’t promise there won’t be another disaster. Instead, encourage children to talk about their fears and what they can do to help in case of disaster. Tell them you will do everything you can to keep them safe.
- Be patient and understanding if your child is having difficulties.
- Never use threats. Saying, “If you don’t behave an earthquake will swallow you up,” will only add to the fear and not help your child behave more acceptably.
- Consider how you and your child can help. Children are better able to regain their sense of security if they can help in some way.
- Share your concerns with your child’s teacher or child care provider. Consider assistance from professionals trained to work with disaster victims.

Message to child care providers

You can be a support and resource to parents by helping them understand behavioral and emotional responses. Be sensitive to how parents feel when they are separated from their children in a disaster. It may be very helpful for parents, children and you to take some extra time when dropping off children in the morning. A group meeting to reassure parents, discuss your response to their children’s reactions, and review your emergency plan will help everyone feel more secure.

Help children cope by reenacting how the disaster felt and talking about their fears so they can master them. Talk about being afraid, and practice what you will do the next time a disaster strikes. Because young children think the world revolves around them, children may need reassurance that they did not cause the disaster.

Consider referring a family for professional help if any of the behaviors on the following page persists two to four weeks after the disaster. Children who have lost family members or friends, or who were physically injured or felt they were in life-threatening danger, are at special risk for emotional disturbance. Children who have been in previous disasters or who are involved in a family crisis may also have more difficulty coping.
## Typical Reactions of Children Following Disaster

### Children Ages 1 to 5

Children in this age group are particularly vulnerable to changes in their routines and disruption of their environments. Depending on family members for comfort, they may be affected as much by the reactions of family members as by the disaster. Focus on reestablishing comforting routines, providing opportunity for nonverbal and verbal expression of feelings, and reassurance.

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### Physiological Reactions

- Loss of appetite
- Overeating
- Indigestion
- Vomiting
- Bowel or bladder problems
- Sleep disorders and nightmares

### How to Help

- Give additional verbal assurance and ample physical comforting.
- Provide comforting bedtime routines.
- Permit the child to sleep in the parents’ room on a temporary basis.
- Encourage expression of emotions through play activities including drawing, dramatic play, or telling stories about the experience.
- Resume normal routines as soon as possible.

### Children Ages 5 to 11

Regressive behaviors are especially common in this age group. Children may become more withdrawn or more aggressive. They might be particularly affected by the loss of prized objects or pets. Encourage verbalization and play enactment of their experiences. While routines might be temporarily relaxed, the goal should be to resume normal routines as soon as possible.

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<tr>
<th>Regressive Reactions</th>
<th>Emotional/Behavioral Reactions</th>
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<tr>
<td>Increased competition with younger siblings</td>
<td>School phobia</td>
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<td>Excessive clinging</td>
<td>Withdrawal from play group and friends</td>
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<tr>
<td>Crying or whimpering</td>
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<td>Wanting to be fed or dressed</td>
<td>Irritability</td>
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<td>Engaging in habits they had previously given up</td>
<td>Disobedience</td>
</tr>
<tr>
<td></td>
<td>Fear of wind, rain, etc.</td>
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</tbody>
</table>

### Physiological Reactions

- Headaches
- Complaints of visual or hearing problems
- Persistent itching and scratching
- Nausea
- Sleep disturbance, nightmares, night terrors

### How to Help

- Give additional attention and ample physical comforting.
- Insist gently but firmly that the child accept more responsibility than younger siblings; positively reinforce age-appropriate behavior.
- Reduce pressure on the child to perform at his or her best in school and while doing chores at home.
- Reassure the child that his competence will return.
- Provide structured but not demanding chores and responsibilities.
- Encourage physical activity.
- Encourage verbal and written expression of thoughts and feelings about the disaster; encourage the child to grieve the loss of pets or toys.
- Schedule play sessions with adults and peers.
Outline of Emergency Procedures

1. Remain calm. Reassure the victim and others at the scene.

2. Stay at the scene and give help until the person assigned to handle emergencies arrives.

3. Send word to the person who handles emergencies for your program. This person will take charge of the emergency, assess the situation, and give any further first aid as needed.

4. Do not move a severely injured or ill person except to save their life.

5. If appropriate, phone for help. Give all the important information slowly and clearly. To make sure that you have given all the necessary information, wait for the other party to hang up first. Arrange for transportation of the injured person by ambulance or other such vehicle, if necessary. Do not drive unless accompanied by another adult. Bring the Emergency Transportation Permission Form with you.

6. Do not give any medication unless authorized by the local Poison Control Center (for poisoning) or physician (for other illness).

7. Notify parent(s) of the emergency and agree on a course of action with the parent(s).

8. If a parent cannot be reached, notify parent’s emergency contact person and call the physician shown on the child’s Emergency Transportation Permission Form.

9. Be sure that a responsible individual from the program stays with the child until the parent(s) take charge.

10. Fill out the accident report within 24 hours. File it in the child’s folder. Give the parent(s) a copy, preferably that day. Note injury information in a central injury log.
CHILD CARE CENTERS
SELF-ASSESSMENT GUIDE

HOW TO MAKE YOUR CHILD CARE CENTER A SAFER PLACE FOR CHILDREN

COMMUNITY CARE LICENSING DIVISION
“Promoting Healthy, Safe and Supportive Community Care”
Security in Child Care Settings
How To Make Your Child Care Center a Safer Place for Children

Recent events have generated increasing questions about safety and security in child care centers, particularly in response to external threats. This guide is intended to assist you in considering how to make your child care center as safe as it can be.

While it is important to take security measures, it is also important that your center conveys an appropriate child care atmosphere. Any changes to increase security should be made in a way that reassures children and makes them feel comfortable.

This guide includes a review of licensing requirements related to security followed by options you may want to consider to make your child care center as safe as possible.

Licensing Regulations Related to Security

The key to security is preparedness. The best place to start is to be sure your center is already in compliance with existing licensing regulations that promote child security. Some of these licensing regulations are listed below with the regulation number in parentheses.

- **Criminal Record Clearances and Child Abuse Central Index Check (Section 101170)**

  Criminal record clearances and child abuse central index checks ensure that individuals who have committed a crime or questionable act do not have access to children in care. Clearances are obtained from the California Department of Justice for California criminal convictions and arrests, and from the Federal Bureau of Investigation for federal convictions and convictions from other states. Both clearances are required for all staff and volunteers. Directors must be cleared before they begin operating a center. Staff and volunteers must submit their fingerprints for clearance before they start to work or have contact with children. Child abuse index checks are performed by the California Department of Justice and are required for all persons who care for children.

- **Disaster and Mass Casualty Plan (Section 101174)**

  Child care centers are responsible for developing this plan to provide staff and children with instruction on fire safety and their duties and responsibilities in the event of an emergency. The plan identifies procedures for safe exiting,
transportation, and supervision of children during an evacuation or relocation to predetermined sites equipped to temporarily care for the children. The plan must be available at the child care site, and disaster drills for children and staff are required at least every six months. You may want to schedule more frequent drills, or include in your drills some of the other security recommendations included in this guide.

- **Fire Clearance (Section 101171)**

  A fire clearance is mandatory, and must be obtained before a license can be issued. A new fire clearance is required when you change your capacity, enroll children who are non-ambulatory, or make physical alterations to your center.

- **Sign In and Sign Out (Section 101229.1)**

  Anyone who drops off or picks up a child from the center must sign his or her full name and record the time of day the child is dropped off or picked up. The name of the person who picks up the child must be on file in the child’s record. This ensures that the child leaves your center only with their parent or the parents' authorized representative.

- **Teacher-Child Ratio (Section 101216.3)**

  Teacher-child ratios are required to ensure that there are sufficient teachers and other adults available to adequately supervise the children in care. These adults are also responsible for acting to protect the children in an emergency.

- **Telephones (Section 101224)**

  A working telephone is required to maintain contact with sources outside the center as part of normal business operations, and in response to an emergency situation.

- **Responsibility for Providing Care and Supervision (Section 101229)**

  You must provide care and supervision as necessary to meet the needs of the children in your care. Adequate staffing must be available at all times to ensure children are not left without supervision. In emergency situations, as part of care and supervision, staff are expected to take appropriate actions to implement the center’s emergency plan and protect the children in care.
OPTIONS FOR IMPROVING SECURITY

The following options are intended to supplement and build on the licensing regulations discussed above. These options are divided into low cost actions that could be taken immediately, and actions that could be taken as fiscal resources permit. A third section offers suggestions for working with parents and caretakers.

Actions That Can Be Taken Immediately:

- **Contact your local law enforcement agency, inform them you are operating a child care center and request they perform a safety inspection of your facility.**

  Law enforcement agencies are not always as aware of the location of child care centers as they are of school sites. This is true even if the child care center is located on a school site. Letting law enforcement know of your existence will help them respond to an emergency at your center. You may want to invite a local officer to your center to better acquaint them with the ages of children you serve and the number of children in your program. You can also ask them to perform a security inspection of your site. Law enforcement personnel can provide many useful ideas about how to make your center safer. Many law enforcement agencies may be willing to speak at a staff or parent meeting about security issues. In addition to contacting local law enforcement offices directly, you can request a security inspection by contacting the Governor’s Office of Emergency Services, toll-free, at 1-888SAFE-CA9. They will refer your request to a local law enforcement agency, and can provide you with information on security, crime prevention, 911 procedures, workplace safety, security at work, crime victim information and State of California emergency numbers.

- **Review your physical plant for security.**

  Walk around the grounds of your center. Look for areas that could be a potential hiding place for an individual or a dangerous item. Do you have plants or shrubs that are overgrown so that a person could hide behind them? Do shrubs or plants block the view of the entrance or any other entry way to the child care site? Are there areas of the center not readily visible from other locations, or that are normally left vacant? Check out the playground. If you have a gate leading to the street or parking lot, is it secure?

- **Develop a system of code words/phrases to use among staff in announcing an emergency.**

  Code words allow staff to communicate that a dangerous situation is occurring without informing the intruder or alarming children. This could allow you to remove a child or children from harm’s way and give you time to make
an emergency phone call. It is important that all staff be made aware of these words/phrases so they can act immediately. This system must be practiced regularly.

- **Develop arrangements for mutual aid with other child care centers and local schools in your area.**

  Child care centers in the same vicinity can be of great assistance because they know your particular situation better than most. Form a partnership with other programs, develop specific procedures to take in case of an emergency, and update mutual aid plans regularly. You may also contact the local schools in your area to discuss plans should an emergency occur.

- **Develop two relocation sites to be used in an emergency.**

  Sometimes emergency situations may also impact your primary relocation site. A second site would allow you to remove staff and children to a safe area.

- **Develop a “Phone Tree” calling system among parents to be used in emergencies.**

  This allows center staff to make only one or two phone calls to alert all parents of an emergency. You can practice this system by using it for non-emergency events like holiday celebrations.

**Actions You Can Take As Fiscally Feasible/Possible:**

- **Install buzzers/signals on doors and outside gates to alert staff when someone enters or leaves the center.**

  Staff are not always able to observe entrances. A buzzer or other signal would help to ensure that they are more aware of people who enter or leave the child care center. The signal system should either be loud enough to be heard throughout the center or be connected to a room where there is always a staff person available to hear the signal.

- **Install security doors with coded buttons allowing only authorized entrance into the center.**

  This would help to ensure that only authorized persons could enter the child care center. All parents and staff would need to know the code, as parents must be allowed by law to enter the program at any time unannounced. This system must be cleared by the licensing office and by the local fire department. You should inform these agencies of the code as well.
- **Install outside security cameras that transmit a picture into the office.**

  This would allow staff to know who is about to enter the center. This system could be connected to a buzzer signal that would alert staff to check the picture as the person enters.

- **Issue pagers to parents to be used in emergencies.**

  Parents could be contacted wherever they are in case of emergency or if the center is being evacuated. This system could also be used in non-emergency situations. Some parents may already have pagers that you could use to alert them.

- **Install panic buttons or intercoms in each room and in the office.**

  This system would allow instant communication between various locations in the center and would trigger the action plan developed by staff and parents. The system should also identify which room needs assistance.

- **Install motion sensors with lights/buzzers on the outside of the building to alert staff of someone entering the facility.**

  Staff should be available to monitor this system. Again, parents and authorized representatives must be allowed unannounced access, so this system could not restrict their access.

- **Install mirrors on the corners of the building to afford better visibility.**

  This would allow staff to see who might be coming around the corner of the building without having to actually go around the corner. This could allow a few extra seconds in case of an emergency situation.

- **Issue photo identification badges with electronic codes to all authorized parents/adults and staff.**

  This system would allow only those directly authorized by the program to gain entrance to the center. The licensing agency and the local fire marshal would have to approve this system as they, too, must have access to the center.

- **Have at least one cellular phone available in case of an emergency. If at all possible, a cellular phone in each classroom would be best.**

  By having a cellular phone, or two, staff would be able to make an emergency call from any location in the center. The center director should designate who should have access to the phone(s) and ensure the phones are always in
working order. Emergency phone numbers should be programmed into the phone(s) as well.

- **Create a two-stage entrance into the center.**

  Many centers have doors that enter from the outside directly into a space occupied by children. Redesigning the available space could increase security. This could be as easy as having all visitors pass through the Director’s office on the way into their child’s room. Staff in the office could then monitor who is entering. Another alternative would be a lobby where parents sign children in and out. A TV monitor could identify who is entering without limiting access.

- **Establish an Internet connection from the center.**

  This allows parents to monitor their child’s experience during the day. It could also be used to alert them if an emergency occurs. Community Care Licensing recently established guidelines for this type of system, so check with your licensing office prior to installation.

- **Give personal identification numbers (PIN) to parents wishing to sign their child in or out of the center.**

  Some centers utilize automated systems as part of the sign-in/sign-out process. In these systems, parents enter an identification number into a computer system that stores a roster of children’s names. The computer confirms the identification number, and notes date and time. If the PIN is accurate, the child is released to the person entering the PIN. Only the child’s authorized representatives would have the PIN. Staff should not be allowed access to parents’ numbers and they must be kept confidential. Check with your local licensing office prior to installing this system.

**Parents/Relatives**

Parents and other relatives are obviously as concerned as you and your staff for the safety of their children. They are your partners in providing a secure environment at the child care center. Parents want to know that their children are safe at all times. They also want their children to learn and have fun in the child care setting. Many parents might be familiar with some of the recommendations made above and can help you implement them. The better informed your parent community, the less chance that you may experience conflict when you implement any of these suggestions.
There may also be occasions when a parent or other relative can be the source of conflict or be a threat to the safety of the children in care. Two of the most common situations are:

- Centers sometimes report problems in responding to a parent who comes to pick up their child while inebriated or under the influence of drugs. Staff may believe the parent represents a potential danger in transporting or caring for their child. If this situation occurs, staff must make every effort to prevent the parent from taking the child. If the center is closing, this would include staff staying with the child and attempting to call another relative or adult who has been identified by the parent to assume responsibility for the child. If finding someone to stay with the child is impossible, local law enforcement should be immediately notified and provided with information including the address of the parent and the vehicle they are driving. The parent should be advised when bringing the child to care on any subsequent day that this situation will not be tolerated, and you are prepared to notify law enforcement again if the situation recurs.

- Occasionally, someone other than the parent, or authorized representative, attempts to remove the child from the center. On a few occasions, the person is the non-custodial parent who does not intend to return the child home. Centers must have procedures in place to ensure that only authorized representative may sign-out a child. If anyone else tries to sign-out a child, the parent must be notified immediately and law enforcement contacted if the individual persists.

The Child Care Advocate Program has developed this guide to assist the child care community in addressing issues we all wish we did not have to address. Unfortunately, child care programs have been impacted by outside threats/intruders. It is in everyone’s best interest to be as well prepared as possible for any emergency we hope will never happen. You are encouraged to choose any one or combination of the above suggestions that you feel would best meet the needs of your program. If you need any assistance and/or further explanation please contact your local Child Care Advocate located in the licensing district office in your area.
DISASTER PLANNING
Self-Assessment Guide for

CHILD CARE CENTERS and
FAMILY CHILD CARE HOMES

COMMUNITY CARE LICENSING DIVISION
“Promoting Healthy, Safe and Supportive Community Care”

COMMUNITY CARE LICENSING DIVISION
This Disaster Planning Guide can serve as a planning tool for Family Child Care Homes and Child Care Centers. Title 22 Regulations (Section 102417 (g) (9) for Family Child Care Homes and Section 101174 (a) for Child Care Centers) require that every facility develop and implement a disaster and mass casualty plan. Rather than being all-inclusive, this Guide provides basic disaster preparedness and emergency planning information that can be customized to fit the size and population of your facility and its needs. All facilities must include a written disaster plan in their plan of operation. Californians are no strangers to emergencies and disasters. In recent years, child care programs have sustained major disaster-related damage, requiring temporary closure, evacuation and relocation of vulnerable populations of children. Facilities that have followed the steps toward preparedness and planning will be better able to protect lives and property with the ability to return to a normal operation in a shorter time period.

Where your facility is located and the specific disaster threats in the community in which you operate are extremely important in developing your disaster preparedness and response plans. Local city emergency coordinators, fire, law enforcement, and public works departments can assist you in your determination of potential disaster threats, and in determining the threat of hazards immediately close to your facility. Also, in recognition of the special threat that earthquakes pose in California, the Legislature enacted Health and Safety Code Section 1596.867 which requires you to include an Earthquake Preparedness Checklist (LIC 9148) as an attachment to your disaster plan. This Checklist is not reviewed by licensing and is not a requirement to be licensed, but it is a useful tool in earthquake preparedness planning.

Reducing the Potential Threat of Disasters and Emergencies

Take the time to inspect your facility both inside and outside as well as the surrounding area around the facility for potential danger or disasters that may exist. Major threats during an earthquake are from falling objects from high places, furniture and equipment that is not secured, broken or flying glass, and severed or broken electrical lines, natural gas lines, and flooding from broken plumbing. The threat of fire is increased when flammable materials are not stored safely and there are trees and brush that are close to or touching the building. Potential damage from flooding is great for facilities with poor drainage, clogged or obstructed storm drains and rain gutters or located in low-lying or flood prone areas. This inspection may also help you find existing licensing violations and help you avoid future citations.

1. Maintain a current and accessible written evacuation plan available with at least two unobstructed escape routes.

2. Ensure that matches, lighters, and flammable liquids are inaccessible to children.

3. Regularly clean and check heating, cooling, gas and electrical systems and verify that they are in good working order.
4. We suggest providing one or more carbon monoxide detectors, in addition to regular maintenance and checks of required smoke detectors.

5. Maintain fire extinguishers in kitchens and other areas, and ensure that they are properly charged mounted, and easy to reach in case of fire.

6. Train staff and family members on how to properly use a fire extinguisher.

7. Replace numerous electrical plugs and cords with safe electrical outlet sources, such as permanent outlets or strip outlet connectors with circuit breakers.

8. Secure water heaters, refrigerators, tall and heavy cabinets and furniture.

9. Check to be sure that all gas appliances have strong and flexible connections.

10. Remove or secure heavy objects on high shelves and counters.

11. Provide safety latches or locks on cabinets to keep contents inside.

12. Ensure that aquariums, wall hangings, pictures, and other potentially hazardous displays are secured and located away from seating/sleeping/play areas.

13. Check for any obstructions that prevent safe exit from the facility, such as window security bars.

**PREPARDNESS**

**WATER**

1. Provide an adequate supply of drinking water to last the staff and children a minimum of 72 hours (1/2 gallon per child and 1 gallon per adult per day). Additional water will be needed for sanitation.

2. Locate the water supplies in areas that are easy to reach in case of a disaster or emergency.

3. Use commercial water purifiers or disinfectants, date the water supply, and change it at least once per year to keep it fresh. Note: Water can be purified for storage by adding 8 drops of unscented chlorine bleach to every one gallon of water.

**Food**

1. Maintain a dated 72-hour emergency supply of food that does not require refrigeration and can be kept for long periods of time. Choose foods that are
appropriate for the ages of children and that children are most likely to eat.

2. Store the emergency food supplies in areas that are safe, secure and easy to reach in most disasters.

3. Date all stored emergency food and plan to use and replace it on a regular basis.

4. Maintain a supply of disposable eating utensils and a non-electrical can opener.

5. Document if you are caring for children with diabetes, allergies, or a special medical condition or need, and keep an emergency supply of their medications or other health supplies.

Emergency Supplies

1. Maintain at least a three-day supply in the six basic areas (water, food, first aid, clothing and bedding, tools and emergency supplies, and special items). Don’t forget formula and special food for infants, including diapers and other sanitation supplies.

2. Make sure you have enough small and large first aid supplies, and portable first aid kits that can be easily taken outside in case of immediate evacuation.

3. Keep on hand portable radios with extra batteries.

4. Store extra batteries for the facility’s smoke and carbon monoxide detectors and multiple flashlights so that each room has one.

5. Maintain an adequate supply of personal hygiene and sanitation supplies, including toilet paper and paper towels. Instruct staff to keep their own personal necessity items safely stored at the facility.

6. Store extra bedding and blankets to provide warmth and comfort if outdoors or inside if utilities fail.

7. Consider making provisions for portable toilets, tarps/canopies, and some sort of temporary shelter structure in case you need to keep everyone outside.

8. Large child care programs will need equipment and supplies for search and rescue, such as shovels, crowbars, hard hats, stretcher, and flashlights.

9. Maintain a minimal supply of sandbags and plastic sheeting to prevent or reduce flood damage.

Transportation

1. Keep additional first aid kits in the facility’s vehicle(s).

2. Obtain and update regularly emergency phone numbers and identification information for the children, including consent for medical treatment and
transportable in an emergency.

3. Keep at least ¼ tank of gas in all facility vehicles.

4. Develop a plan to supplement facility transportation by the use of volunteers, additional staff, or neighboring facility vehicles.

5. Make sure that the vehicle is in good operating condition.

**Disaster Drills and Procedures**

1. Schedule regular drills at least once every six months, including provisions for fire, earthquake, shelter in place, relocation and evacuation. Document all such drills. (Section 102417 (g) (9) for Family Child Care Homes and Section 101174 (d) for Child Care Centers.

2. Be sure your staff and children know the signs and signals for various types of disasters, and that they understand what to do.

3. Conduct drills for different types of disasters at several times during the year.

4. Develop plans for relocating to more than one other site, if necessary. Obtain written agreements to use those site, and be sure that parents and staff know the location of the sites.

5. Establish procedures to inform responsible relatives of children in your care about your response plan. Parents can be a valuable resource in helping to plan and secure supplies.

6. In larger child care facilities, establish more than one way to convey an immediate message to all staff in all areas that they need to shelter-in-place (lock down), or evacuate immediately if it is safe. Remember, communication systems that rely on your electrical system may not function in an emergency.

7. Establish confirmed out-of-state and out-of-area telephone contacts that can be used to relay facility status information in case local phone lines are overloaded, and be sure parents and guardians have been given these phone numbers.

8. For larger child care facilities, consider including your governing board, neighborhood residents, local government, businesses, and volunteers in your planning.

9. Provide assistance and information to ensure that staff are prepared at home, and that they have a family plan and supplies.

**Recovering from Disaster**

Recovery from disaster means efforts to return the facility, staff, and children to normal.
as soon as possible. There may be extensive visible damage to the physical plant, requiring a series of repairs. Depending on the amount of damage, returning to normal operations could be a long term process. Be familiar with your local jurisdiction’s damage assessment process. If your facility sustains structural damage, access may be limited or prohibited and this will impact the clean-up and initial repairs that you and your staff can do. Be sure that your facility has been inspected and you have been given approval to return. The cumulative crisis-related stress of a disaster can dramatically impact the psychological and physical well-being of children and adults. Facilities that are prepared for disaster have shorter recovery times. Loss of clientele and potential loss in income are added reasons why facilities will want to do everything they can to return to normal as soon as possible. Despite your best efforts to provide support and reassurance to children and adults, they may continue to experience these symptoms and reactions which may indicate a need for professional consultation and intervention:

Children: Withdrawn, depressed, helpless, generalized fear, loss of verbal skills, sleep disturbances, loss of toileting skills, anxious attachment and clinging, uncharacteristic hostility or acting out.

Adults: Withdrawal or depression, feelings of inadequacy and helplessness, difficulty in concentration, anti-social behavior, slow to respond, substance abuse, psychosomatic or real physical symptoms (headache, bladder/bowel problems, chest pains, cramps, sleep disturbance, change in food consumption patterns).

Facility staff can assist in psychological recovery by giving children and adults correct information about the disaster, preparing for additional events (such as earthquake aftershock), providing opportunities to talk and share feelings with others at the facility, providing a regimen of choices and activities, and facilitating communication with loved-ones or family members outside of the facility.

The following activities will assist in returning the facility itself to normal operations:

1. As soon as possible after the disaster, you or staff should perform an initial damage inspection of the facility in all interior and exterior areas.
2. A licensed structural engineer, architect or building inspector can assist in a detailed safety inspection of your buildings.
3. Delays in repair and construction may result in lost business from your parents.
4. Determine the potential impact of an interrupted cash flow and consider establishing a contingency fund.
5. Consider obtaining earthquake and flood insurance to protect your facility and assets.
6. Maintain accurate records to inventory condition of furniture, equipment and other high-cost items.
7. Set-up an ongoing system of accurately documenting the costs associated with the CCAP 10/99.
disaster, including staff and supplies.

8. Develop reasonable expectations for staff and children during a disaster, when coping ability is low and frustrations are high.

9. If a major disaster is declared, you may need to contact the Federal Emergency Management Agency (FEMA), the Small Business Administration (SBA), and local emergency offices to find out about applying for disaster assistance programs.

10. Determine which children or staff will require additional assistance from staff to relocate from the facility during a drill or actual emergency.

11. Contact your local fire department, city or county Office of Emergency Services, or a local Chapter of the American Red Cross regarding training for your facility.

Communicating with the Licensing Agency

Title 22 regulations for most facility types require reporting of unusual incidents to Community Care Licensing by telephone or fax within 24 hours, with a written report to follow in seven days. Communicating with the licensing agency is extremely important if you have damage to your building, need to relocate, or have injuries or deaths involving children or adults. During previous disasters, licensing staff have assisted in facility relocation by expediting the issuance of Provisional Licenses for temporary sites, and coordinating health and safety inspections with local building and fire authorities to assure the safety of any new facility.

Since licenses are not transferable, outside funding sources, such as subsidized child care, child care food programs, and regional centers, may require verification of a current, valid license and status before funding can continue to provide care to children at a new location.

Resources

There are many resources and agencies available to assist in your disaster planning efforts. The following are some of the resources and agencies you may want to contact for further information on disaster planning:

1. Provider groups/associations to share information on disaster planning and disaster resources in your Community.

2. Local Chapters of the American Red Cross.
3. Local City or County Emergency Services Coordinators.

4. Telephone book yellow page listings under "Earthquake Products and Services".

5. For child care facilities, disaster planning and response books and videos through the California Department of Education publications catalog. Phone: 1-800-995-4099.

6. Disaster assistance agency internet web site addresses (check your local phone book for phone numbers):

   - American Red Cross: http://www.redcross.org
   - Los Angeles County Emergency Operations Bureau (downloadable school plans): http://eob.org
EARTHQUAKE PREPAREDNESS CHECKLIST (EPC) *

Health & Safety Code 1596.867 requires an Earthquake Preparedness Checklist be included as an attachment to the Emergency Disaster Plan (LIC 610, LIC 610A and 610A (SP)) and be made accessible to the public. This form is intended to meet this requirement.

A. ELIMINATE POTENTIAL HAZARDS IN CLASSROOMS AND THROUGHOUT THE SITE:

☐ Bolt bookcases in high-traffic areas securely to wall studs.
☐ Move heavy books and items from high to low shelves.
☐ Secure and latch filling cabinets.
☐ Secure cabinets in high traffic areas with child safety latches.
☐ Secure aquariums, computers, typewriters, TV/VCR equipment to surfaces (e.g., by using Velcro tabs).
☐ Make provisions for securing rolling portable items such as TV/VCRs, pianos and refrigerators.
☐ Move children’s activities and play areas away from windows, or protect windows with blinds or adhesive plastic sheeting.
☐ Secure water heater to wall using plumber’s tape.

☐ Assess and determine possible escape routes.
☐ Enlist parent and community resource assistance in securing emergency supplies or safeguarding the child care site.
☐ Store a 3-day supply of nonperishable food (including juice, canned food items, snacks, and infant formula).
☐ Store a 3-day supply of water and juice.
☐ Store food and water in an accessible location, such as portable plastic storage containers.
☐ Store other emergency supplies such as flashlights, a radio with extra batteries, heavy gloves, trash bags, and tools.
☐ Maintain a complete, up-to-date listing of children, emergency numbers, and contact people for each classroom stored with emergency supplies.

B. ESTABLISH A COORDINATED RESPONSE PLAN INVOLVING ALL OF THE FOLLOWING:

CHILDREN:
☐ Teach children about earthquakes and what to do (see resource list below).
☐ Practice “duck, cover, and hold” earthquake drills under tables or desks no less than 4 times a year.

PARENTS:
☐ Post, or make available to parents, copies of the school earthquake safety plan (including procedures for reuniting parents or alternate guardians with children, location of planned evacuation site and method for leaving messages and communicating).

C. CHILD CARE PERSONNEL AND LOCAL EMERGENCY AGENCIES:

☐ Identify and assign individual responsibilities for staff following an earthquake (including accounting for and evacuating children, injury control and damage assessment).
☐ Involve and train all staff members about the earthquake safety plan, including location and procedure for turning off utilities and gas.
☐ Contact nearby agencies (including police, fire, Red Cross, and local government) for information and materials in developing the child care earthquake safety plan.

* For more free resources contact:

(1) Federal Emergency Management Agency (FEMA)
(2) Office of Emergency Service (OES)
(3) Red Cross
EMERGENCY DISASTER PLAN FOR
CHILD CARE CENTERS

INSTRUCTIONS:
Post a copy in a prominent location in facility near telephone.
Licensee is responsible for updating information as required. Return a copy to the licensing office.

NAME OF FACILITY
ADMINISTRATOR OF FACILITY

FACILITY ADDRESS (NUMBER, STREET), CITY, STATE, ZIP CODE

TELEPHONE NUMBER

I. ASSIGNMENTS DURING AN EMERGENCY (USE REVERSE SIDE IF ADDITIONAL SPACE IS REQUIRED)

<table>
<thead>
<tr>
<th>NAME(S) OF STAFF</th>
<th>TITLE</th>
<th>ASSIGNMENT</th>
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<tbody>
<tr>
<td>1.</td>
<td></td>
<td>DIRECT EVACUATION AND PERSON COUNT</td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td>HANDLE FIRST AID</td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td>TELEPHONE EMERGENCY NUMBERS</td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td>TRANSPORTATION</td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td>OTHER (DESCRIBE)</td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

II. EMERGENCY NAMES AND TELEPHONE NUMBERS (IN ADDITION TO 9-1-1)

<table>
<thead>
<tr>
<th>POLICE OR SHERIFF</th>
<th>OFFICE OF EMERGENCY SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICROSS</td>
<td>POISON CONTROL</td>
</tr>
<tr>
<td>HOSPITAL(S)</td>
<td>OTHER AGENCY/PERSO</td>
</tr>
<tr>
<td>CHILD PROTECTIVE SERVICES</td>
<td></td>
</tr>
</tbody>
</table>

III. FACILITY EXIT LOCATIONS (USING A COPY OF THE FACILITY SKETCH [LIC 999] INDICATE EXITS BY NUMBER)

1. 
2. 
3. 
4. 

IV. TEMPORARY RELOCATION SITE(S) (IF AVAILABLE, SUBMIT LETTER OF PERMISSION FROM RENTER/LEASSOR/MANAGER/PROPERTY OWNER)

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>TELEPHONE NUMBER</th>
</tr>
</thead>
</table>

V. UTILITY SHUT-OFF LOCATIONS (INDICATE LOCATION(S) ON THE FACILITY SKETCH [LIC 999])

<table>
<thead>
<tr>
<th>ELECTRICITY</th>
<th>WATER</th>
</tr>
</thead>
<tbody>
<tr>
<td>GAS</td>
<td></td>
</tr>
</tbody>
</table>

VI. FIRST AID KIT (LOCATION)

VII. EQUIPMENT

| SMOKE DETECTOR LOCATION (IF REQUIRED) |
| FINE EXTINGUISHER LOCATION (IF REQUIRED) |
| TYPE OF FIRE ALARM SOUNING DEVICE (IF REQUIRED) |
| LOCATION OF DEVICE |

VIII. AFFIRMATION STATEMENT

AS ADMINISTRATOR OF THIS FACILITY, I ASSUME RESPONSIBILITY FOR THIS PLAN FOR PROVIDING EMERGENCY SERVICES AS INDICATED BELOW. I SHALL INSTRUCT ALL CLIENTS/RESIDENTS, AGE AND ABILITIES PERMITTING, ANY STAFF AND/OR HOUSEHOLD MEMBERS AS NEEDED IN THEIR DUTIES AND RESPONSIBILITIES UNDER THIS PLAN.

SIGNATURE DATE

LIC 610 (10/03) (PUBLIC)
# EMERGENCY DISASTER PLAN FOR FAMILY CHILD CARE HOMES

Type or print clearly. Post next to phone. See back for explanation.

<table>
<thead>
<tr>
<th>LICENSER NAME</th>
<th>DATE</th>
</tr>
</thead>
</table>

1. **EMERGENCIES - LIFE THREATENING** - Call 9-1-1 - Tell them: Number Calling from:

   - **HOME ADDRESS:**
   - **MAJOR CROSSROAD:**
   - **HOME DIRECTION FROM CROSSROAD:**

2. **EMERGENCIES - NON-LIFE THREATENING** - List direct local number for the following.

   - **Fire/Paramedics:**
   - **Officer of Emergency Services:**
     - Physician:
     - Licensing:
     - Ambulance:
     - Other:
     - Hospital:
     - Police/Sheriff:
     - Child Protective Services:
     - Dentist:
     - Poison Control:

3. **FACILITY EVACUATION** - Some disasters require evacuation of the building. Using a copy of the Facility Sketch (LIC 999), show arrows for the safest way to exit rooms. Be sure that exit doors are not locked from the inside. In the event of a fire, get everyone out, follow the escape routes, meet at a prearranged location, account for everyone, do not let anyone return to the building and call the fire department.

4. **TEMPORARY RELOCATION SITE(S)** - Some disasters require moving to a safe location. When relocating, determine whether you need food, water, blankets and flashlight and meet at a prearranged location.

   - **NAME:**
   - **PHONE:**

   - **NAME:**
   - **PHONE:**

   - **NAME:**
   - **PHONE:**

5. **UTILITY SHUT OFF** - Locate on the facility sketch with the exit routes.

   - **GAS:**
   - **GAS CO. PHONE:**
   - **ELECTRIC:**
   - **ELECTRIC CO. PHONE:**
   - **WATER:**
   - **WATER CO. PHONE:**

6. **EQUIPMENT LOCATION** - The fire department may help you with installation information.

   - **FIRE EXTINGUISHER:**
   - **SMOKE ALARM:**
   - **FIRE ALARM LOCATION (IF YOU HAVE ONE):**
   - **TYPE:**

7. **OTHER EMERGENCY EQUIPMENT** - Where appropriate identify location of first aid kit, blankets, food and water, flashlight, radio and other emergency equipment.

   - **LOCATION:**
EMERGENCY DISASTER PLAN EXPLANATION

Applicants need to submit a plan to handle possible emergencies. The Emergency Disaster Plan is a plan that identifies resources when an emergency occurs. A copy of the form must be posted in a conspicuous place near a telephone and a copy given to the licensing agency with the application packet. Licensee is responsible for updating information as required and should be typed or legible handwriting.

1. **EMERGENCIES - LIFE THREATENING** - Whenever a life threatening emergency occurs, use the 9-1-1 telephone number. Operators are able to speed dial help for any life threatening emergency. If the call is interrupted, they are usually able to identify the home address from the open line. It is important to write out exactly what needs to be said to direct help to the home. This means that you need to write out the home phone, the address of the home, the nearest major cross street and directions to the home from the cross street.

2. **EMERGENCIES - NON-LIFE THREATENING** - This is a list of emergency numbers that you will need to call in the event of non-life threatening emergency. Most of the numbers are listed on the form. The "Other" is for other numbers that you think may be needed in an emergency.

3. **FACILITY EVACUATION** - The most important action in a fire emergency is getting the children safely out and grouped together in a safe location. As part of your application packet, you need to complete a facility sketch. Take a copy of the sketch and identify the quickest exiting routes from each room. Copies of the exiting routes should be posted in conspicuous locations. You also need to identify a safe location where everyone should gather to be sure everyone is counted and no one remains in the building. You need to have regular fire drills with the children. Your fire department is an excellent resource for fire and evacuation instructions.

4. **TEMPORARY RELOCATION SITES** - You need to make arrangements to move to a temporary site in the event your facility becomes unsafe such as a friends home or local church. You need to develop a second site in the event the first site is not immediately available in the emergency.

5. **UTILITY SHUT OFF** - In emergencies such as floods and earthquakes, it may be necessary to shut the utilities off. It is important to identify the locations of the utility shut off for such emergencies. You should also have a wrench on hand for the gas line. It also may be helpful to put the utility shut off locations on the Facility Sketch.

6. **EQUIPMENT LOCATION** - If a fire is just beginning, it may be possible to extinguish the fire with a fire extinguisher after the children are out. The fire extinguisher should be located in an accessible location and be identified with this plan. The local fire department may help you with location of fire equipment. In additional to smoke alarms, you need to identify and locate any other emergency alarms that are or the premise.

7. **OTHER EMERGENCY EQUIPMENT** - In the event of a flood or earthquake, it may be necessary to have a first aid kit, blankets, food and water, radio, flashlight and other provisions. The plan needs to identify where this other emergency equipment is kept.
SITUATIONS THAT REQUIRE MEDICAL ATTENTION RIGHT AWAY

from National Resource Center for Health and Safety in Child Care

Listed below, you will find lists of common medical emergencies or urgent situations you may encounter as a child care provider. To prepare for such situations:

1) Know how to access Emergency Medical Services (EMS) in your area.
2) Educate Staff on the recognition of an emergency.
3) Know the phone number for each child’s guardian and primary health care provider.
4) Develop plans for children with special medical needs with their family and physician.

At any time you believe the child’s life may be at risk, or you believe there is a risk of permanent injury, seek immediate medical treatment.

Call Emergency Medical Services (EMS) immediately if:

- You believe the child's life is at risk or there is a risk of permanent injury.
- The child is acting strangely, much less alert, or much more withdrawn than usual.
- The child has difficulty breathing or is unable to speak.
- The child’s skin or lips look blue, purple, or gray.
- The child has rhythmic jerking of arms and legs and a loss of consciousness (seizure).
- The child is unconscious.
- The child is less and less responsive.
- The child has any of the following after a head injury: decrease in level of alertness, confusion, headache, vomiting, irritability, or difficulty walking.
- The child has increasing or severe pain anywhere.
- The child has a cut or burn that is large, deep, and/or won't stop bleeding.
- The child is vomiting blood.
- The child has a severe stiff neck, headache, and fever.
- The child is significantly dehydrated: sunken eyes, lethargic, not making tears, not urinating.

After you have called EMS, remember to call the child’s legal guardian.
Some children may have urgent situations that do not necessarily require ambulance transport but still need medical attention. The box below lists some of these more common situations. The legal guardian should be informed of the following conditions. If you or the guardian cannot reach the physician within one hour, the child should be brought to a hospital.

**Get medical attention within one hour for:**

- Fever in any age child who looks more than mildly ill.
- Fever in a child less than 2 months (8 weeks) of age.
- A quickly spreading purple or red rash.
- A large volume of blood in the stools.
- A cut that may require stitches.
- Any medical condition specifically outlined in a child’s care plan requiring parental notification.

Approved by the American Academy of Pediatrics Committee on Pediatric Emergency Medicine, January 2001. Downloaded from http://nrc.uchsc.edu/CFOC/XMLVersion/Appendix_N.xml on 03/02/05.
**Tips for Preparing Children**

**Infants and Toddlers**

*For infants and toddlers, special emphasis should be placed on making their environment as safe as possible.*

- Crib should be placed away from windows and tall, unsecured bookcases and shelves that could slide or topple.
- A minimum of a 72-hour supply of extra water, formula, bottles, food, juices, clothing, disposable diapers, baby wipes and prescribed medications should be stored where it is most likely to be accessible after an earthquake. Also keep an extra diaper bag with these items in your car.
- Store strollers, wagons, blankets and cribs with appropriate wheels to evacuate infants, if necessary.
- Install bumper pads in cribs or bassinettes to protect babies during the shaking.
- Install latches on all cupboards (not just those young children can reach) so that nothing can fall on your baby during a quake.

**Preschool and School-age Children**

*By age three or so, children can understand what an earthquake is and how to get ready for one.*

*Take the time to explain what causes earthquakes in terms they’ll understand. Include your children in family discussions and planning for earthquake safety. Conduct drills and review safety procedures every six months.*

- Show children the safest places to be in each room when an earthquake hits. Also show them all possible exits from each room.
- Use sturdy tables to teach children to Duck, Cover & Hold.
- Teach children what to do wherever they are during an earthquake (at school, in a tall building, outdoors).
- Make sure children’s emergency cards at school are up-to-date.
- Although children should not turn off any utility valves, it’s important that they know what gas smells like. Advise children to tell an adult if they smell gas after an earthquake.