

# Child Care Facility Emergency Plan

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Date of Plan \_\_\_\_\_

**Child Care Facility**

Name of facility \_\_\_\_\_ Date of Plan \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone number \_\_\_\_\_

Number of children in care \_\_\_\_\_

Child care is provided during these hours \_\_\_\_\_

Child care is provided on these days \_\_\_\_\_

**Possible Emergencies**

This child care facility may be subject to natural disasters and emergencies listed below. Plans are included to respond to these types of situations.

<b>NATURAL HAZARDS:</b>
Severe Weather
Snow and Ice Storms
Tornado
Flooding
<b>TECHNOLOGICAL HAZARDS:</b>
Fire
Utility Disruption (Heat, water, power)
Hazardous Materials
Bomb threat or threatening telephone call
<b>PERSONAL SAFETY:</b>
Medical Emergency
Missing Child
Unauthorized/Suspicious Person

**Emergency Telephone List**

Caregiver \_\_\_\_\_

**EMERGENCY SERVICES**

St. Clair County HSEM \_\_\_\_\_ 810.989.6965

Nearest Hospital \_\_\_\_\_

Police Dept \_\_\_\_\_

Substitute caregiver \_\_\_\_\_

Fire Dept \_\_\_\_\_

Ambulance \_\_\_\_\_

Poison Control \_\_\_\_\_

**UTILITIES**

**EVACUATION SITE**

Electric Company \_\_\_\_\_

Water Company \_\_\_\_\_

Gas Company \_\_\_\_\_

Telephone Services \_\_\_\_\_

**Transportation**

If it becomes necessary to relocate the children to a safer location, the following transportation will be used.

Number of children to be moved \_\_\_\_\_

**TRANSPORTATION #1**

**TRANSPORTATION #2**

Owner \_\_\_\_\_

Owner \_\_\_\_\_

Type of vehicle \_\_\_\_\_

Type of vehicle \_\_\_\_\_

Driver \_\_\_\_\_

Driver \_\_\_\_\_

No. of passengers (including driver) \_\_\_\_\_

No. of passengers (including driver) \_\_\_\_\_

Normal location of vehicle \_\_\_\_\_

Normal location of vehicle \_\_\_\_\_

Way to contact owner \_\_\_\_\_

Way to contact owner \_\_\_\_\_

**Plan for Shelter in Child Care Facility**

In case of violent storms/weather conditions (tornado, ice storm, snow, high wind), explosion, or hazardous materials outside of the Child Care Facility.

**Plan for Evacuation to Shelter Away from Child Care Facility**

In case of fire, flooding, chemical spill, bomb threat, etc.

**Floor Plan Sketch of**

(name of child care facility)



Letter of Agreement between \_\_\_\_\_ (name of child care facility)

and \_\_\_\_\_ (name of emergency evacuation site)

to serve as an emergency evacuation site for child care children and adults.

**Information about Child Care facility**

**Information about Evacuation Site**

Name of facility \_\_\_\_\_

Name of facility \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_

Telephone number(s) \_\_\_\_\_

Name of contact person(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of contact person(s) \_\_\_\_\_

Hours of operation \_\_\_\_\_

\_\_\_\_\_

Number of children and adults  
potentially evacuating \_\_\_\_\_

Hours of operation \_\_\_\_\_

**Driving directions from child care facility to evacuation facility:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Attach map with directions from child care facility to evacuation facility to this agreement)*

**Check off items that the evacuation site will provide in an emergency:**

- Water
- Food
- Transportation
- Telephone
- People to assist
- Other \_\_\_\_\_

\_\_\_\_\_ (name of evacuation facility)  
agrees to serve as an emergency evacuation site for

\_\_\_\_\_ (name of child care facility)

**Signatures**

Authorized Evacuation Site Representatives	Date
Child Care Provider	Date

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**Has been relocated to**

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**Map from** \_\_\_\_\_ *(name of family child care facility)*

**to** \_\_\_\_\_ *(evacuation site)*

**Directions:**



**Sharing the Emergency Plan**

I have examined the emergency plan for \_\_\_\_\_ (name of child care facility).  
 I am aware of its requirements.

Date	Organization/Person	Signature	Date Plan Examined	Date Plan Received

**RECORD OF PLAN CHANGES**

Date of Change	Summary of Change	Date Change Distributed To Other Agencies/Persons

**This plan supersedes all previously developed emergency plans.**

Signature of facility owner/operator	Date
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***Give to parents every year and to new parents as they enter your program***

Name of Child Care Facility:

Date letter distributed:

Dear Parents,

I want to assure you of my concern for the safety and welfare of the children in this child care facility. In light of recent world and local events, we have developed an emergency plan that will be put into place in case an emergency situation arises. Plans for emergency care are reviewed annually. The specific type of emergency will guide where and what special care will be provided.

- **Shelter at the Child Care Facility**– This plan would be put into place in case of a weather emergency or of unsafe outside conditions or threats. In this plan, the children will be cared for indoors at the child care facility, and all the doors may be locked to restrict entry. Parents will be notified if they need to pick up their child before their regular time.
- **Evacuation to another site** – This plan would be put into place in the event that it is not safe for children to remain in my home. I have arranged for alternate sites for care. The choice of site will be determined by the specific emergency and where would be an appropriate place to go.
- **Method to contact parents** – In case of an emergency, parents will be called. If we need to evacuate to another site, a note will be placed on my door to tell you where to pick up your child. Depending on the distance from my home, the children will either walk or be transported to the alternate site.
- **Emergency over/reuniting with children** – Parents will be called and reunited with their children as soon as possible after the emergency.

When you enrolled your child in this child care facility, you completed a list of emergency contacts and persons who may pick up your child. It's very important to keep that list up-to-date in case an emergency occurs. Please see me if you want to review the emergency contact information that I have for your child.

The purpose for sharing this information with you is not to cause you worry, but to reassure you that we are prepared to handle all types of emergencies in a way that will ensure the safety of your child(ren). In the event of an actual emergency, we will call you as soon as it is safe to do so. At that time you will be informed about what steps will be taken. If you have questions regarding this information, please share them with me.

Sincerely,

*(Signature of Family Child Care Provider)*