

# Crisis/Disaster Response Handbook

The purpose of this handbook is to give; schools, family and child care provider's step-by-step procedures on how to respond to disaster/crisis situations during the first 30 minutes. Following the listed instructions in sequential order will help to prioritize notification of emergency response personnel and to limit escalation and injury during the initial impact of the situation. In this document, "Provider" means the childcare provider or assistant. "Parent" means the child's parent or legal guardian.

This handbook was written by City of Bridgeport Office of Emergency Management, reviewed and edited by the Bridgeport Emergency Operations Center Education, Health/Medical Staff and the American Red Cross, and individualized by the childcare center.

This policy was last reviewed and updated on: \_\_\_\_\_

**OUR ADDRESS IS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OUR PHONE NUMBER IS:** \_\_\_\_\_

**OUR NEAREST CROSS-STREETS ARE:** \_\_\_\_\_  
\_\_\_\_\_

# Table of Contents

Emergency Phone Numbers .....	3
Missing Child .....	4
Kidnapping .....	4
Child Abuse .....	5
Assault on Child or Staff .....	5
Fire Alarm/Emergency .....	6
Gas Leak .....	7
Earthquake .....	8
Flooding .....	9
Building and Site Evacuation .....	10
Field Trip Incident .....	12
Power Outage .....	13
Storms & Snow .....	13
Internal and External Hazardous Materials Accident .....	14
Shelter-in-place Procedure .....	15
Bomb Threat .....	16
Emergency Lockdown/Intruder Alert Procedure .....	17
Crisis Response .....	19
Suspicious Mail or Package .....	21
Appendices .....	22
A. Sample Parent Letter/Communication Form .....	23
B. Disaster Supply List .....	25
C. Preparation Steps Taken by Child Care .....	26
D. Post-Damage Assessment List .....	28
E. Floor Plan and Internal Systems Information .....	31
F. Sample Incident Report Forms .....	32
G. Helping Children Cope with Disaster .....	35
Mental Health Checklist .....	36
Other Resources on Helping Children Cope .....	38

# Emergency Phone Numbers

Emergency Assistance	Number(s)
<input type="checkbox"/> Police/Fire/ Ambulance	911
<input type="checkbox"/> Bridgeport Hospital Emergency Room	203-384-3566
<input type="checkbox"/> St. Vincent's Medical Center Emergency Rm	203-576-5171
<input type="checkbox"/> Poison Control Center	203-576-5178
<input type="checkbox"/> United Illuminating (Electricity)	800-722-5584
<input type="checkbox"/> Southern CT (Gas)	203-335-0157
<input type="checkbox"/> Aquarion/Bridgeport Hydraulic Co. (Water)	203-337-5910 or 203-489-0002
<input type="checkbox"/> Property Manager: _____	_____
<input type="checkbox"/> _____ Insurance Agency	_____
Auto Policy Number: _____	
Homeowner Policy Number: _____	
<input type="checkbox"/> WICC Radio – 600 am	203-384-6397
<input type="checkbox"/> WCUM Radio – 1450 am	203-335-1450
<input type="checkbox"/> Provider's Cell Phone	_____
<input type="checkbox"/> Provider's Home Phone	_____
<input type="checkbox"/> Out-of-Area Contact	_____
<input type="checkbox"/> Child Protective Services	860-566-2387
<input type="checkbox"/> Child/Day Care Licensor: _____	_____
<input type="checkbox"/> City of Bridgeport Health Department	203-576-7680 or 7474
<input type="checkbox"/> Alternate Site Location (Near Child Care)	_____
_____	
_____	
<input type="checkbox"/> Alternate Site Location (Evacuation Site)	_____
_____	
_____	
<input type="checkbox"/> Location of Nearest Payphone	_____

## **Missing Child**

- Call 911 immediately; provide the following information:
  - Child's name and age
  - Address
  - Physical and clothing description of the child, including any distinguishing marks such as visible scars or birthmarks
  - Medical status, if appropriate
  - Time and location child was last seen
  - Person with whom the child was last seen
- Have child's information including picture, if possible, available for the police upon their arrival
- Provider will notify parents of missing child and attempt confirmation that child is with family; if not - inform parents of situation and steps taken
- Provider will report incident to licensor and Child Protective Services
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **Kidnapping**

- Call 911 immediately; provide the following information:
  - Child's name and age
  - Address
  - Physical and clothing description of the child, including any distinguishing marks such as visible scars or birthmarks
  - Physical and clothing description of the suspect
  - Medical status, if appropriate
  - Time and location child was last seen
  - Vehicle information and direction of travel
- Follow Emergency Lockdown procedure on page 17
- Have child's information including picture, if possible, available for the police upon their arrival
- Provider will notify parents of missing child; inform parents of situation and steps taken
- Provider will report incident to licensor and Child Protective Services
- Provider will activate Crisis Response plan (see page 19)
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **Child Abuse**

- Provider will make a report to Child Protective Services and the licensor (see list under next item for the type of information that may be asked)
  - Provider and appropriate staff will write down the following information on an incident report\*:
    - Date and time of calls to Child Protective Services and local Police Department
    - Child's name
    - Child's age/birth date
    - Address
    - Name and address of parent or guardian and other children in the home (if known)
    - Any statements made by the child (but do NOT interview them)
    - The nature and extent of the injury or injuries, neglect, and/or sexual abuse
    - Any evidence of previous incidences of abuse or neglect including nature and extent
    - Any other information which may be helpful in establishing the cause of the child's injury or injuries, neglect or death and the identity of the perpetrator or perpetrators
- \*Note: These reports may become legal documents. Confidentiality of these reports must be strictly observed.
- Incident reports will be stored \_\_\_\_\_

## **Assault on Child or Staff**

- Call 911 if any medical treatment is needed or if police are required (if in doubt – go ahead and call)
- Provider will follow “Administrator Responsibilities – Intruder Alert” in the Lockdown procedure on page 17
- If suspect is confrontational, follow Lockdown Procedure on page 17
- An adult will stay with the victim
- Victim's family will be notified by \_\_\_\_\_ when safe to do so
- If medical treatment is required, provider will call Child Protective Services
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **Fire Alarm/Emergency**

### ***If smoke or fire is seen:***

- Activate fire alarm if not sounding
- Evacuate children and other individuals in the facility (see page 10 if necessary); drop and crawl to avoid smoke and close doors behind you; take the following items with you:
  - disaster supplies which are stored \_\_\_\_\_
  - attendance sheets
  - children's emergency and medical information/supplies
  - cell phone, if available
- Call 911 from outside the building
- Take attendance; if safe to do so, search the building for anyone missing
- Provider will check area of concern and use fire extinguisher if safe to do so
- Have the following items ready for police and fire personnel:
  - Number of children in care
  - Knowledge of anyone remaining in the facility
  - Floor plan and internal systems information (see appendix E, page 31)
- If it is determined that the building is unsafe, move children to alternate site location; follow Site Evacuation Procedure on page 11
- Provider will notify parents of evacuation and alternate site location, if applicable
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_
- All parents will be notified of incident

## **Gas Leak**

### ***If gas odor is detected:***

- DO NOT** activate the fire alarm system or any other electrical equipment
- Evacuate children and other individuals in the facility (see page 10 if necessary) and close doors behind you but leave a window open; take the following items with you:
  - disaster supplies which are stored \_\_\_\_\_
  - attendance sheets
  - children's emergency and medical information/supplies
  - cell phone, if available
- Call 911 from outside the building
- Move children to a designated area no less than one block from the child care; This location is: \_\_\_\_\_
- Take attendance
- If possible, turn gas off if trained to do so.
- Have the following items ready for police and fire personnel:
  - Location of leak, if known
  - Number of children in care
  - Knowledge of anyone remaining in the home
  - Floor plan and internal systems information (see appendix E, page 31)
- Provider will notify parents immediately if evacuation appears to be long term or if children are moved to alternate site location; if necessary to move to the alternate site location, follow Site Evacuation procedure on page 11
- Provider will report incident to licenser
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_
- All parents will be notified of incident

## **Earthquake**

***In the event of ground movement the following procedures should be carried out:***

- Provider and staff “drop, cover and hold.” Direct all children to “**DROP, COVER and HOLD**” and remain that way until the earth stops moving – stay away from windows, bookcases, entertainment centers, and filing cabinets. Hold onto the item you are using as a cover, if it moves, move with it. Keep talking to children until it is safe to move.
- If no items are available for cover, crouch by a load-bearing wall and cover your head with your arms
- If outside “drop, cover and hold,” keeping away from glass, bricks, and power lines. If you are outside near a building and there is no safer location, take cover in a doorway to protect yourself and children.

***When the earthquake stops the following procedures should be carried out:***

- Provider and staff check themselves and children for any injuries
- Check evacuation routes for damage
- Evacuate children and staff (see page 10 if necessary) and close doors behind you; take the following items with you:
  - disaster supplies which are stored \_\_\_\_\_
  - attendance sheets
  - children’s emergency and medical information/supplies
  - cell phone, if available
- Adults will render first aid to those who need it
- Provider will take attendance outside to account for all children and adults
- Check utilities for disruption/damage (gas, water, sewer); if you smell gas, turn the gas off with the wrench stored \_\_\_\_\_
- Have an individual trained in building assessment inspect the exterior of the facility following the post-earthquake damage assessment list in appendix D on page 28 and report findings to the provider; the trained adult is: \_\_\_\_\_
- Determine if it is safe for someone to go into home to locate anyone missing or injured
- Listen to WICC Radio 600 AM or WCUM 1450 AM for information on the Area
- Determine status of emergency supplies and equipment

- Call child care's out-of-area contact with information on status of child care (injuries, evacuation, children remaining in care, children who have been picked up)
- Have the individual trained in building assessment determine if it is safe to move children back into the building or to whether it is best to evacuate; follow the post-earthquake damage assessment list in appendix D on page 28
- If it is decided to evacuate to an alternate location, post a notice indicating your new location, date and time you left; follow Site Evacuation procedure on page 11
- Call parents with child care status information; if this is not possible report child care status information to WICC or WCUM radio station for announcement over the air for parents to hear
- If parents cannot be contacted after 4 hours, the child's out-of-area contact will be called if possible
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **Flooding**

### ***If childcare is in a flood prone area:***

- During severe weather, provider or designee will listen to WICC Radio 600 AM or WCUM 1450 AM for flood watch and flood warning reports
- If a flood warning is issued, move children and staff to the alternate site location; follow Site Evacuation procedure on page 11
- Provider will notify all parents immediately
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_
- Provider will call insurance company (if needed)

## **Building and Site Evacuation**

### ***Building Evacuation:***

- Make a quick assessment of the situation and of any injuries to the children or staff
- Provider evaluates the evacuation route to be sure that it appears clear of obstructions
- Provider gives instruction to evacuate
- If possible and time allows, have children take jackets and coats
- Provider should take the following items:
  - disaster supplies which are stored \_\_\_\_\_
  - attendance sheets
  - children's emergency and medical information/supplies
  - cell phone, if available
- Provider should assemble children 2 by 2 to evacuate the building (preferably one adult leading the children and one adult following behind if possible). Infants will be evacuated by (how?) \_\_\_\_\_. Young toddlers will be evacuated by (how?): \_\_\_\_\_.
- Take attendance; if safe to do so, have another adult search the building for anyone missing
- Have children sit down if possible
- If a gas leak or other incident that requires individuals be located further away from the child care, move children to the pre-designated area no less than one block from the child care; The pre-designated location is: \_\_\_\_\_  
\_\_\_\_\_
- Provider will evaluate the situation with the help of responding agencies (fire, police, etc.) and determine whether it is safe to go in the facility. If not, determine if it is necessary to move to the alternate site location (follow Site Evacuation procedure on page 11), or to stay put until it is safe to go back inside.
- Provider will notify parents immediately if evacuation appears to be long term or if children are moved to alternate site location
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_
- All parents will be notified of incident

**Site Evacuation:**

- Provider should bring the following items to the alternate sites:
  - disaster supplies which are stored \_\_\_\_\_
  - attendance sheets
  - children’s emergency and medical information/supplies
  - cell phone, if available

- Children will be taken to the alternate site location by: (how?) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Once at the alternate site location, take attendance again. The provider must remain with the children until all children are picked up by parents or emergency contacts.

- Provider will continue to communicate with parents and coordinate pick-up of children

- Provider will report incident to licenser

- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **Field Trip Incident**

- Before leaving for a field trip, make sure the provider has the following information:
  - Child list by assigned vehicle
  - Supervisor/Chaperone list by assigned vehicle
  - Map of intended route
  - Children's emergency and medical information/supplies
  - Name and license number of vehicle driver, vehicle license number
  - List of important phone numbers significant to the trip (including children's emergency contact information and chaperone cell phone numbers)
  - First aid kit
  
- Attend to any medical needs if there are injuries or complaints of pain
- Call 911 if medical treatment or police are required
- Provider contacts parents, gives update and actions being taken; indicate meeting locations or pick-up times at the child care
- Provider will report incident to licensur
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_
- Provider will call insurance company (if needed)

## **Power Outage**

- Provider or designee will try to locate the problem and activate alternate lighting system; flashlights and batteries are located: \_\_\_\_\_
- Call 911 if concerned about a fire or safety hazard
- Unplug all electrical equipment; turn off all but one light
- If facility is rented, provider will contact property manager
- Provider to call United Illuminating
- Call Bridgeport Health Department to help determine if childcare needs to be closed. Also, consider the following items in making your decision:
  - Can you safely prepare/store food?
  - Do you need to move to an alternate site?
  - Can you safely transport the children?
  - How will you notify parents?
- All parents will be notified if power outage is prolonged
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **Storms & Snow**

- Provider will determine prior to opening hours whether or not to open the child care; families will be notified by (how?) \_\_\_\_\_  
\_\_\_\_\_ (refer to child care's parent policy)
- If the childcare must close during hours of operation because of snow or storm the provider will notify parents by telephone and contact radio stations WICC and WCUM to broadcast closings.
- If weather conditions prevent a parent or legal guardian from reaching the facility to recover a child, the provider will care for the child (maintaining proper child: staff ratios) until such time as the parent, legal guardian, or emergency contact person can safely claim the child. The disaster supplies will be used as needed.
- If the above persons cannot claim the child within 72 hours of the child care closing, the provider will contact police to transport the child to a Child Protective Services care site
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **External Hazardous Materials Accident**

- Call 911 immediately; initiate a “Shelter in Place” procedure (see page 15) unless directed to do otherwise by emergency personnel via the dispatcher
- Have the following items ready for police and fire personnel:
  - Location and description (liquid, gas) of hazard, if known
  - Number of children in care
  - Floor plan and internal systems information (see appendix E, page 31)
- Follow instructions given by responding agency for either “Shelter in Place” (page 15) or Site Evacuation (page 10)
  - If evacuated, call on transportation resource to take children and staff to alternate child care site; our transportation resource is:  
\_\_\_\_\_
  - Notify parents of move to alternate site location
  - If “Shelter in Place” occurs, call parents to let them know of the situation immediately, to calm any fears.
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_
- All parents will be notified of incident

## **Internal Hazardous Materials Accident**

- In the event a person comes into direct contact with a suspected hazardous material, follow safety precautions posted on-site or listed on the container. Call the hospital emergency room for additional instruction. Contact poison control center for common household product poisonings.
- Call 911 if additional assistance is needed
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

It is strongly suggested that all potentially Hazardous Materials be removed from the facility. Household toxic chemicals should be stored separately, locked up, and stationary so as not to fall over in the event of an earthquake or any other incident.

## **Shelter-in-Place Procedure**

***Shelter-In-Place should be conducted when you are instructed to do so by emergency personnel or your radio or television; or if you see a vapor cloud or smell an unusual odor outside.***

- Gather all children inside into one room, preferably one with few windows
- Call 911 if you haven't already done so; Provider or designee should turn on and listen to the radio WICC 600 AM or WCUM 1450 AM; Listen for emergency information from your local fire or police department
- Turn off all fans, heating, cooling, or ventilation systems, and clothes dryers
- Close and lock windows and doors (Locked windows seal better) and close as many interior doors as possible
- Close off non-essential rooms such as storage areas, laundry room, etc.
- Seal gaps around windows, doors, heating/air conditioning vents, bathroom and kitchen exhaust fans, stove, and dryer vents with towels, pre-cut plastic sheeting, wax paper, or aluminum foil and duct tape if air is coming into the facility.
- Stay alert to loudspeaker announcements; emergency personnel from your local police or fire departments may give you specific instructions via loudspeaker or door-to-door
- If determined necessary, you can provide a minimal amount of breathing protection by covering mouths and noses with a damp cloth
- If you are told there is danger of explosion, close the window shades, blinds, or curtains; to avoid injuries, keep children away from windows
- Provider should stay in touch with responding agencies/emergency personnel
- Provider and emergency personnel in charge will determine whether to stay sheltered in place or to evacuate
- Advise parents not to pick children up from the childcare until the incident is over. The presence of parents searching for their children will only cause confusion and may lead to exposure to toxic chemicals. Once sheltered in place you will not want to open the door to let parents in and out.
- Have emergency disaster supplies and emergency contact cards handy
- Once the incident is over; inform parents, turn ventilation system back on
- Provider will report incident to licensor
- Provider will complete a written incident report at that earliest opportunity; Incident reports are stored\_\_\_\_\_

## **Bomb Threat**

### ***During the Bomb Threat Call:***

**DO NOT HANG UP! KEEP THE CONVERSATION GOING AND ATTEMPT TO GET THE FOLLOWING INFORMATION:**

- Where is the bomb?
- What time will it go off?
- What kind of bomb is it?
- Who are you?
- Why is this going to happen?

**LISTEN FOR:**

- Voice of male or female
- Speech impediment or accent
- Type of background noise present
- Cell phone or land-line

**NOTE:** Time \_\_\_\_\_ Date \_\_\_\_\_

### ***Immediately After the Call***

Call 911

It is recommended to evacuate immediately, but this is the decision of the building administrator.

Confer with fire and police about evacuation, if not done so already.

Have floor plan ready for police/fire personnel (see appendix E, page 31)

Glance around the facility for suspicious items (**DO NOT MOVE SUSPICIOUS ITEMS**)

If the decision is made to evacuate, follow Building and Site Evacuation procedure on page 10

Provider will notify parents if evacuated or moved to alternate location

Provider will report incident to licensor

Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

All parents will be notified of incident

## **Emergency Lockdown / Intruder Alert Procedure**

From time to time, childcares have been faced with the threat of unauthorized individuals entering the facilities. An intruder is defined as any visitor who, through act or deed, poses a perceived threat to the safety and welfare of children and staff. If at any time you are dealing with a person you feel uncomfortable around or are fearful for your safety or the safety of others, then you may be faced with an intruder situation.

**These are important recommendations to implement regarding a lockdown, including those conducted because of an intruder:**

1. It is important that all adults in the facility understand, support and participate in the Intruder Alert procedures.
2. It is important to practice the Intruder Alert procedure in the childcare a couple of times per year, just as you practice fire drills.
3. Lockdown information will be given to parents upon enrollment. Parents will be notified of all lockdown drills and events. The childcare facility will provide written materials for parents to help children understand and cope.
4. Parents will be given a pre-designated alternate pick up site if children and staff are evacuated. Parents should not try to enter the facility during a lockdown and may be kept away from the childcare until authorities determine it is safe.

### ***Administrator (Provider or designee) Responsibilities – Intruder Alert***

- If a person(s) enters your facility, assess the situation. If you are uneasy or suspicious of the person(s) immediately call 911.
- If a weapon is present, DO NOT CONFRONT. Call 911.**
- If **no** weapon is suspected, confront the intruder in the following manner:
  - Approach the individual in a non-confrontational manner; bring another adult with you if possible
  - Introduce yourself, and the person with you, to the individual in a non-confrontational way
  - Ask the individual who they are and how you can be of assistance
  - Inform the individual of the policy that all visitors need to sign in and guide him/her to an area away from the children.
  - If the individual refuses, do not confront him/her. Call 911.

***Intruder Alert Procedure: if it is determined that the safety and health of children and staff are in jeopardy:***

- If the intruder is already inside the facility, call 911.
- If children are outside when a suspected intruder is in the area or shots are heard/fired, adults will **quickly** direct and move children back into the facility for lockdown or to a safe sheltered area.

***If the suspected intruder is not inside the facility:***

- Immediately lock all doors and close and lock all windows
- Provider or designee will immediately call 911 and stay on the phone until help arrives; await further instructions from emergency response personnel
- Adults should quickly check all halls and bathrooms and gather all children into one room
- Keep children away from windows and doors; position children in a safe place against walls or on the floor; turn a table on its side to use as a buffer if possible
- Maintain (as best you can) a calm atmosphere in the room, keeping alert to emotional needs of the children. (Tip: gather in a story circle behind the table and gather infants into one or two cribs (preferably on wheels) along with items to help keep them quiet, such as bottles, pacifiers, and small, quiet toys)
- Keep all children inside until an all-clear signal has been given. Emergency personnel will inform you when it is safe to move about and release children from the room. Children should not be released to parents until an “all clear” has been called.
- Upon arrival, the local police, in conjunction with the Provider will assume controlling responsibility and may evacuate the facility per police standard operating procedures
- When “All Clear” is heard, the Provider will apprise the staff of the situation and counsel children. When the threat has been eliminated, normal activities should be resumed as soon as possible.
- Provider will apprise parents of all “lockdowns” whether practice or real
- Provider will report incident to licenser
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

## **Crisis Response:**

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

***Crisis:*** A sudden, generally unanticipated event that profoundly and negatively affects a significant segment of the childcare population and often involves serious injury or death. The psychological and emotional impact will be moderate to severe. Outside assistance may be needed.

- Provider will determine whether or not to maintain normal schedules or to set aside the normal schedule for an all out effort to deal with the crisis. Depending on the crisis, it may be necessary to close the facility for the day.
- Provider will determine if parent notification becomes an item of priority or can wait for a letter to go home in the evening
- Provider will keep the local radio stations (WICC or WCUM) informed as to the status of the child care so parents will have accurate information
- Identify high risk children, staff and parents likely to be most affected by the news (e.g. children of the teacher who is deceased/injured or parents whose children are in the same class as the deceased)
- Gather and inform closest friends of the victims, provide support and information to them before a general announcement is made. If close friends or classmates are absent, assure that a supportive adult gives the news to them, ensuring that they do not receive initial information from the media.
- Prepare a formal statement for initial announcement, include minimum details and note additional information will be forthcoming. Also prepare statements for telephone and media inquiries. If possible, ensure that those answering phones will remain calm and in control of their emotions.
- Give staff the facts about the tragedy and instructions on how to share the information with the children in their care as well as suggestions for assisting children to cope (see information in appendix G on page 35)
- Send a letter home to parents explaining the situation. Include specific factual information and information on how the childcare staff is handling the situation. Some parents will need to be contacted by phone, particularly if their child's reaction to the crisis is severe.

θ Facilitate a staff/parent meeting to provide information related to the crisis. The following are some suggestions:

- Assist with children’s processing of information about the crisis
- Provide counselors to work with children/staff individually or in groups in a variety of locations
- Provide support and counseling for parents
- Provide helpful, factual information to parents
- Have an individual assist with answering phones, providing information and handling non-media inquiries
- Maintain a record of offers of assistance and ensure that proper personnel respond
- Deal with the “empty chair/desk” problem. For example, a counselor would provide therapy while sitting in the child’s chair. The chair would then be moved to the back of the classroom. Finally the chair would be removed. Make sure children are part of the entire process.

- Deal with media/reporters promptly and factually and designate a spokesperson for consistent, calm messaging.
- Provide information as requested by police, hospital, or other agencies
- When appropriate, contact the friends/family of the deceased for information regarding funeral arrangements and pass on information to child care staff and parents who may wish to attend
- Provider will report incident to licensor
- Provider will report incident to Child Protective Services if necessary
- Arrange for a child care/community debriefing 48-72 hours after the event
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_
- Other considerations:
  - Have designated locations for the use of media, family, friends and workers, as needed
  - Have transportation available to assist the family
  - Young members of the victim’s family should be cared for if possible
  - Children and staff should be given permission to feel a range of emotions. Typically, individuals go through a sequence of emotional reactions following a crisis: High anxiety, denial, anger, remorse, grief and reconciliation
  - Provide for grief counseling through American Red Cross. The phone number is: 203-576-1010.

## **Suspicious Mail or Package**

- Do not touch, smell, or taste unknown substances
- Cover substance with paper, trash can, clothes, or other material
- Evacuate and seal off room
- Wash hands thoroughly
- Mark room as "Dangerous"
- Call 911
- Make a list of all adults and children present in the room at the time of the incident and provide list to local authorities
- Provider will inform all parents of the incident
- Provider will report incident to licensor
- Provider will complete a written incident report at the earliest opportunity; incident reports are stored \_\_\_\_\_

# Appendices

## **Appendix A: Sample Parent Letter**

DATE:

Dear Parents:

Attached please find a copy of our “Crisis/Disaster Response Handbook”. With the implementation of this handbook you can rest assured we will do everything we can to protect your child in the event of a crisis or disaster.

In any disaster or crisis, your cooperation is necessary and we ask that you:

- Encourage and explain to your child why the best place for them is at the childcare facility.
- Explain that if you are unable to pick them up quickly, We will care for them until you or your emergency contact comes to get them.
- Do not telephone the facility especially in the first 4 hours, as telephone lines will be needed for emergency communications.
- Listen to WICC AM or WCUM AM radio for updates.
- Provide an emergency/comfort kit for your child (i.e. stuffed animals, toys, etc.)
- Include an out-of-state contact number with your kit.
- Provide a 72-hour supply of any medication or medical supplies/equipment that your child may need.

We will care for your child until you or your designee is able to reach them. Be sure to keep your child’s emergency release card updated. Children will only be released to those specified by you on their card. We will also utilize the phone numbers on the emergency release card should we need to re-locate to our alternate site.

If local telephone lines are unavailable, utilize your out-of-state contact number for information. If possible, we will call that number to give information about your child and to see if you have left any information for us.

Thank you for your attention to this matter. Please feel free to contact me if you have any questions regarding our Crisis/Disaster Response Handbook.

Keeping your children safe,

Childcare Provider

# Sample Parent Communication Form

Dear Parent,

During a disaster, communication may become challenging. Often it is easier to contact an out-of-area phone number than a local or cell number. Our facility is establishing an out-of-area number to relay information during a disaster. Please put this number in a convenient and accessible place so that you are able to get information about your child should local calling become challenging. Our out-of-area contact is:

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

We encourage you to familiarize yourself with the disaster plans and policies established for our childcare facility.

Please sign and return the following portion

∨

.....

I have received information regarding your childcare facility's out-of-area emergency contact.

I understand that your childcare facility has established policies to respond appropriately to a disaster.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please provide the following information for our emergency records:

Child's name: \_\_\_\_\_



Child's out-of-area contact (100+ miles away): \_\_\_\_\_

Emergency contact (friend, family or loved-one): \_\_\_\_\_

Local contact (the "nearest" acquaintance): \_\_\_\_\_

02/01/02CP/dlp

## Appendix B: Disaster Supply Lists

Our Disaster Kits contain the following items:

- |                          |  |                          |   |
|--------------------------|--|--------------------------|---|
| <input type="checkbox"/> | Batteries  | <input type="checkbox"/> | Gloves (heavy material/leather)                                 |
| <input type="checkbox"/> | Bleach, unscented  | <input type="checkbox"/> | Hand sanitizer  |
| <input type="checkbox"/> | Books or games   | <input type="checkbox"/> | Lighter or matches  |
| <input type="checkbox"/> | Bucket   | <input type="checkbox"/> | Money, change and small bills                                   |
| <input type="checkbox"/> | Can opener (manual)  | <input type="checkbox"/> | Office supplies (pen, paper, tape)                              |
| <input type="checkbox"/> | Comfort kits for children                                      | <input type="checkbox"/> | Paper towels  |
| <input type="checkbox"/> | Crowbar  | <input type="checkbox"/> | Pet supplies (if appropriate)                                   |
| <input type="checkbox"/> | Disaster Plan (copy)   | <input type="checkbox"/> | PineSol® or similar product                                     |
| <input type="checkbox"/> | Disposable diapers/wipes                                       | <input type="checkbox"/> | Plastic garbage bags (large, one per child for rain protection) |
| <input type="checkbox"/> | First Aid Kit (for disasters)                                  | <input type="checkbox"/> | Plastic garbage bags (medium, for toilets)                      |
| <input type="checkbox"/> | Adhesive bandages  | <input type="checkbox"/> | Plastic kitchen supplies  |
| <input type="checkbox"/> | Acetaminophen (children's)                                     | <input type="checkbox"/> | Pliers  |
| <input type="checkbox"/> | Alcohol wipes  | <input type="checkbox"/> | Radio-Battery Operated  |
| <input type="checkbox"/> | Bandages (roller gauze, elastic)                               | <input type="checkbox"/> | Soap  |
| <input type="checkbox"/> | Butterfly adhesive strips                                      | <input type="checkbox"/> | Tarp or tent  |
| <input type="checkbox"/> | Cotton balls   | <input type="checkbox"/> | Toilet paper  |
| <input type="checkbox"/> | Eye drops (saline)   | <input type="checkbox"/> | Water (3-day supply)  |
| <input type="checkbox"/> | First aid book   | <input type="checkbox"/> | Whistle   |
| <input type="checkbox"/> | Gauze dressing   | <input type="checkbox"/> | Wrench  |
| <input type="checkbox"/> | Gloves, disposable   | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Medications or equipment for children/staff with special needs | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Pocket CPR mask  | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Safety pins  | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Sanitary napkins   | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Scissors   | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Splints  | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Tape, 2" non-allergenic  | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Tissue   | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Thermometer  | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Tweezers   | <input type="checkbox"/> |   |
| <input type="checkbox"/> |  | <input type="checkbox"/> |   |
| <input type="checkbox"/> |  | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Emergency information cards for children                       | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Flashlights  | <input type="checkbox"/> |   |
| <input type="checkbox"/> | Food (3 day supply)  | <input type="checkbox"/> |   |

## **Appendix C: Preparation Steps Taken by Center**

This childcare facility has taken these steps to prepare the facility, children, staff, and parents for disasters (list steps here):

- We conduct fire or other drills on a monthly basis and records the dates as required by licensing.
- We have gathered a 72-hour preparedness kit and have included a 72-hour supply of any medications or supplies for those with special needs.
- We check our emergency kits and emergency medication expiration dates on a regular basis. How often? \_\_\_\_\_
- For those with special needs or life-threatening health conditions, who require medication or supplies on a regular basis or on an as-needed basis, those medications or supplies are kept on-site and will be taken if evacuation is required.
- We have at least one corded phone to use if there is no electricity and we have located our nearest payphone.
- We have designated an out-of-area contact. This contact is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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

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

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

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

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

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

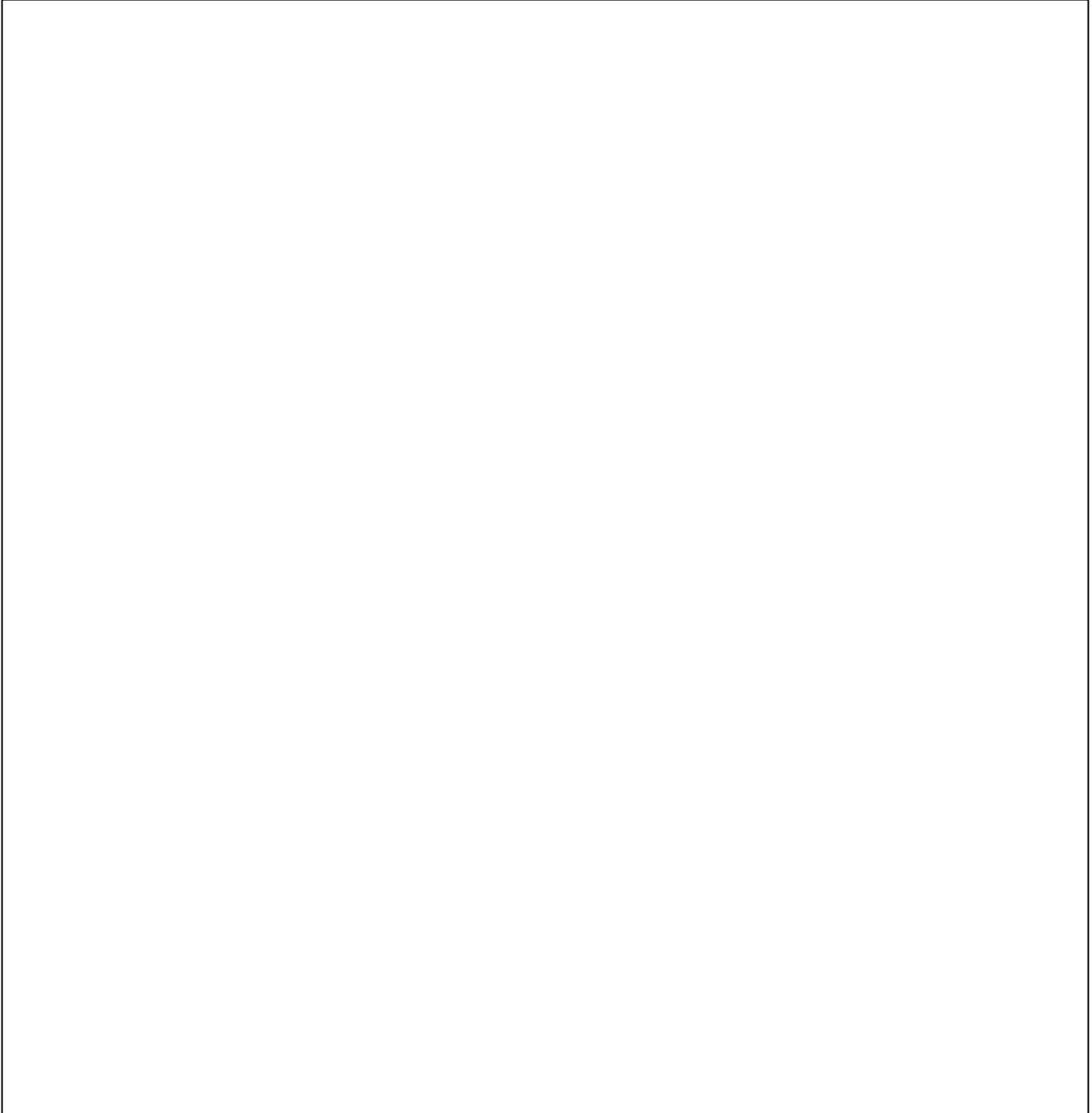
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

## **Appendix D: Post-Damage Assessment List**

Following an earthquake or other major disaster, this list will be used to evaluate the facility to determine whether or not it is safe to re-enter.

***Draw a picture of your floor, room or childcare building.*** On this diagram, mark windows, doors, utilities, heating and air conditioning units, fire extinguishers, chemical storage facilities, closets, any existing cracks, trees, fences, gates, power lines, etc.:



**After a disaster, begin your assessment outside the building:**

- Using the diagram on the previous page, walk around the outside of the building and mark on this map anything that is found to be out of place, such as new or enlarged cracks, broken windows, etc. Specific items outside of the building that we will check include:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

- Determine if the facility is structurally safe to enter. If unsure, wait for assistance.

- If it is determined that it is safe to enter, send a trained adult into the facility to check the interior, again using the diagram on the previous page. Begin by entering the building and going to the right of the entrance door, systematically check each room, including closets and bathrooms. Look for unsecured light fixtures, broken glass, overturned bookcases, chemicals, filing cabinets, water heaters, etc. Be cautious of live electrical wiring. Mark all findings on this map. Specific items that will be checked inside the building include:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

<input type="checkbox"/>	_____

- Using this information, determine if it is safe to move all staff and children back into the facility. If unsure, wait for assistance before entering.
- If possible, send in someone to clean up prior to children re-entering the building.

## **Appendix E: Floor Plan and Internal Systems Information**

Attach a copy of your building floor plan here. Also list the security and utility systems in place and where the controls are located.

## Appendix F: Sample Incident Report Forms

Attach a copy of your facility's own incident report form or describe how you keep record of significant incidents that occur.

Also included in this section are samples "Child Care Situation Report" form and a "Child Care Situation/Conversation Log." Fill out the form completely and leave no blank spaces. If the information is unknown, state that in the blank space.

### **Notes about the Child Care Situation Report:**

- This form should be used to periodically update responding agencies or other groups about the status and needs of your childcare facility.
- This form could also be used for your files if you do not have your own incident report form.
- In the message section, include the following information:
  - Kind of immediate assistance required
  - If you can hold out without assistance and for how long
  - Overall condition of the child care building and the children and staff
  - Names of outside agencies at the site and their actions

### **Notes about the Child Care Situation/Conversation Log:**

- This form should be used to keep a running log of the activities taking place during any disaster or crisis response. It will become very important when multiple individuals are responding to the situation.
- A permanent log may be typed or rewritten at a later time for clarity and better understanding. If you do this, be sure to keep all original notes and records; **THEY ARE LEGAL DOCUMENTS.**
- The following is a sample of how this log can be used and what information to include:

<b>Time</b>	<b>Situation</b>	<b>Response</b>	<b>Initials</b>
1:30 pm	Earthquake	House was evacuated.	CD
1:45 pm	Suzy's mom came to child care Upset and upset Suzy's Classmates.	Escorted Suzy's mom away from children to compose herself and then let her take Suzy home.	CD
1:55 pm	Water running out of bathroom.	Sent Becky to shut off the water main.	CD

# Child Care Situation Report Form

To: \_\_\_\_\_ From: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Person in Charge at Site: \_\_\_\_\_

This message was sent via:  2-way Radio  Radio  Telephone  Cellular Phone  Messenger

**Description of the Incident/Situation:**

**Employee/Child Status:**

	# Absent	# Injured	# Sent to Hospital	# Dead	# Missing	# Unaccounted For	# Released to Parents	# Being Supervised
Staff								
Children								
Others								

**Structural Damage (Areas checked for damage/problems and location(s) of problems):**

Checked (X)	Damage/Problem Area	Location of damage/problems
	<b>Gas</b>	
	<b>Water</b>	
	<b>Fire</b>	
	<b>Electrical</b>	
	<b>Communications</b>	
	<b>Heating/Cooling System</b>	
	<b>Main Building</b>	
	<b>Other:</b>	

**Message:**



## **Appendix G: Helping Children Cope with Disaster**

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

- Reassure the children that they will not be left alone and that you are there to protect them.
- Be aware of changes in a child's behavior but also know that some children may not outwardly show their distress.
- Keep to routines such as meals, activities, and naps as much as possible.
- Avoid allowing young children to watch or listen to news coverage of the disaster.
- Give simple but truthful answers to children's questions and make sure children understand your answers. Don't give more information than the children can use and understand.
- Give children opportunities to express their feelings through activities such as play-acting, using dolls, storytelling, painting or drawing.
- Be especially supportive of the children's feelings and need to be close. Give lots of hugs, smiles and kind words.
- Reassure children that they are not responsible for the disaster. Listening to children's stories about disasters and feelings may help.
- If possible, take a moment away from the children and make sure you address your own fears and anxieties by talking with other adults.
- Seek professional assistance when needed. The Mental Health Checklist on the following two pages may help you in determining the need for additional assistance. Your own knowledge of the child and your instincts about the child's needs will also help you make a decision. When in doubt, call for professional help.

A couple of local resources for Children's Mental Health Information are:

---

---

In the event of a disaster or crisis, grief counseling may be provided through the local American Red Cross Chapter. The phone number is 203-576-1010.

## Mental Health Checklist

This checklist provided by the Federal Emergency Management Agency (FEMA) can assist parents, teachers and child care providers in determining if a child is in need of professional counseling following a disaster or traumatic event. Add up the pluses and minuses to obtain a final score. If the child scores more than 35, it is suggested you seek a mental health consultation.

- |  |    |
|--|----|
| 1) Has the child had more than one major stress within a year BEFORE this disaster such as a death, molestation, major illness or divorce? If yes, +5. | 1. |
| 2) Does the child have a network of supportive, caring individuals who relate to him daily? If yes, -10.   | 2. |
| 3) Has the child had to move out of his/her house because of this disaster? If yes, +5.  | 3. |
| 4) Was there reliable housing within one week of the disaster with resumption of the usual household members living together? If yes, -10.             | 4. |
| 5) Is the child showing severe disobedience or delinquency? If yes, +5.  | 5. |

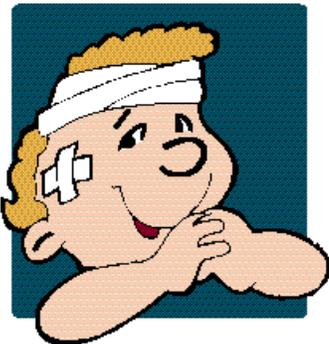
Has the child shown any of the following as a NEW behavior for more than three weeks after the disaster?

- |  |     |
|--|-----|
| 6) Nightly states of terror? +5                        | 6.  |
| 7) Waking from dreams confused or in a sweat? +5       | 7.  |
| 8) Difficulty concentrating? +5                        | 8.  |
| 9) Extreme irritability? +5                            | 9.  |
| 10) Loss of previous abilities in toilet or speech? +5 | 10. |
| 11) Onset of stuttering or lisping? +5                 | 11. |

**Subtotal for this page** \_\_\_\_\_

- 12) Persistent severe anxiety or phobias? +5
- 13) Obstinacy/stubbornness? +5
- 14) New or exaggerated fears? +5
- 15) Rituals or compulsions? +5
- 16) Severe clinging to adults? +5
- 17) Inability to fall asleep or stay asleep? +5
- 18) Startling at any reminder of the disaster? +5
- 19) Loss of ambition in the future? +5
- 20) Loss of pleasure in usual activities? +5
- 21) Loss of curiosity? +5
- 22) Persistent sadness or crying? +5
- 23) Persistent headaches or stomachaches? +5
- 24) Hypochondria? +5
- 25) Was anyone in the child's immediate family killed or severely injured in the disaster (including injury to the child)? If yes, +15.

12.
13.
14.
15.
16.
17.
18.
19.
20.
21.
22.
23.
24.
25.



**Subtotal for this page** \_\_\_\_\_

**Total for both pages** \_\_\_\_\_



020402 jdt/dlp

NOTE: Any child presenting a preoccupation with death, unusual accident proneness, or suicidal threats should be referred for immediate consultations. It is also recommended that any child who has been seriously injured or who has lost a parent, sibling or caregiver to death have a psychological evaluation.

## **Other Resources on Helping Children Cope**

### **National Institute of Mental Health (NIMH)**

Information Resources and Inquiries Branch  
6001 Executive Blvd, Rm. 8184, MSC 9663  
Bethesda, MD 20892-9663  
PTSD/Anxiety Disorders Publications:  
1-88-88-ANXIETY  
Public Inquiries: 301-443-4513  
TTY: 301-443-8431  
E-mail: [nimhinfo@nih.gov](mailto:nimhinfo@nih.gov)  
Web site: <http://www.nimh.nih.gov>

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

P.O. Box 42490  
Washington, DC 20015  
Phone: 1-800-789-2647  
TTY: 866-889-2647  
Email: [info@mentalhealth.org](mailto:info@mentalhealth.org)  
Web site: <http://www.mentalhealth.samhsa.gov/>

### **Center for Mental Health Services (CMHS)**

Emergency Services and Disaster Relief Branch  
5600 Fishers Lane, Room 17C-20  
Rockville, MD 20857  
Phone: 301-443-4735  
E-mail: [ken@mentalhealth.org](mailto:ken@mentalhealth.org)  
Web site: <http://www.mentalhealth.org/cmhs/emergencyservices/index.htm>

### **American Academy of Pediatrics**

141 Northwest Point Boulevard  
Elk Grove Village, IL 60007-1098  
Phone: 847-434-4000  
Web site: <http://www.aap.org/advocacy/releases/disastercomm.htm>

### **U.S. Department of Education**

400 Maryland Avenue, SW  
Washington, DC 20202  
Phone: 1-800-USA-LEARN  
TTY: 1-800-437-0833  
E-mail: [customerservice@inet.ed.gov](mailto:customerservice@inet.ed.gov)  
Web site: <http://www.ed.gov>

### **American Red Cross of Southern Fairfield County**

150 Brooklawn Avenue  
Bridgeport, CT 06604  
Phone: 203-576-1010  
Web site: [www.sefairfieldco.redcross.org](http://www.sefairfieldco.redcross.org)  
National Web site: [www.redcross.org](http://www.redcross.org)

### **Federal Emergency Management Agency**

(Information for children and adolescents)  
P.O. Box 2012  
Jessup, MD 20794-2012  
Publications: 1-800-480-2520  
Web site: <http://www.fema.gov/kids>

### **City of Bridgeport Emergency Management Office**

30 Congress Street  
Bridgeport, CT 06604  
Phone: 203-576-8376  
Website:  
[www.cityofbridgeport.org/departments/oem/](http://www.cityofbridgeport.org/departments/oem/)

### **American Academy of Child & Adolescent Psychiatry**

3615 Wisconsin Ave., N.W.,  
Washington, D.C. 20016-3007  
Phone: 202-966-7300  
Web site: <http://www.aacap.org/publications/factsfam/disaster.htm>