







# 6. Recordkeeping, Reporting, Posting and Policies

In this section you will learn about:

-  Records and Recordkeeping (WAC 170-296A-2000 to 2450)
-  Policies
-  Program/Operations Policies (WAC 170-296A-2400)
-  Staff Policies
-  Off-site Activity Policy
-  Section Six Appendix A: Disaster Preparedness

“I thought I would never be able to write my own program policies but when I worked with Donna Horne from Volunteers of America, Family and Children’s Services, in Everett, I could do it! My advice is to go to your local Child Care Aware agency and work with knowledgeable educators in your community to create handbooks and policies that will set you up for success.”

It takes you, any staff, volunteers, household members and for some practices, the enrolled families, to work together to understand and implement an FHCC program’s policies and practices.

Documenting healthy practices in the form of policies is also a way to protect yourself as a business owner from the liability associated with not meeting insurance and licensing requirements. However, what motivates most FHCC providers is the ability to positively influence a life of health and well-being for the children in their care.



# Records and Recordkeeping (WAC 170-296A-2000 to 2450)

Keep the records that are specified in this section for a minimum of five years (WAC [170-296A-2000](#)). Current records, including records from the previous 12 months, must be kept in the licensed space as defined in WAC [170-296A-0010](#) and be available for DEL's review. Records between 12 months and five years old must be provided to DEL within two weeks of the date of DEL's written request.

## RESOURCES

DEL forms that are used by all FHCC providers have been reprinted in this section. To see all available forms go to: [www.del.wa.gov/publications/licensing](http://www.del.wa.gov/publications/licensing). See: Licensing forms and documents for providers Click on: Drop-down box – “Family Home Provider Forms”

Also go to “Topic Index” to locate helpful materials on any licensing topic:  
[www.del.wa.gov/TopicIndex.aspx](http://www.del.wa.gov/TopicIndex.aspx)

The forms included in this section are for your use to copy, or to remind you to go to the DEL website to print them out.

The policies you write should accurately describe your program as well as meet the requirements of the licensing standard or relevant WAC. Remember you are helping to build the foundation and future of the children in your care. The quality of care you provide on a daily basis is up to you. Policies that are written and then communicated to staff and enrolled families will increase the likelihood that your FHCC will be a safe, healthy and nurturing home away from home for the fortunate children in your care.

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As you read this section, please refer to the Content by WAC index at the end of this guide in order to find the information and policy examples that will help you complete your required policies.

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## Child records

### Confidentiality WAC [170-296A-2025](#)












Keep all children's records confidential. Each enrolled child's health record must be available to staff when needed for medical administration or emergencies. A child's parent or guardian must be allowed access to all records for their child.

It is important for parents or guardians to give written permission before any conference reports, service plans, immunization records or follow-up reports are shared or disclosed to other professionals. In addition, the consent form should be, if at all possible, in the native language of the parent so that their consent is "informed" and understood. You should not share information with other staff without the consent of the family or guardian.



Families have the right to see everything in a child's file. An exception would be if you reported a family member to Child Protective Services, and Children's Administrative Intake advised you not to disclose that referral.

### Contents WAC [170-296A-2050](#)





You must have an enrollment record for every enrolled child. Records must have the following:


-   Beginning and end of enrollment date for children no longer in care.
-   The child's birth date.
-   The child's current immunization record on a DOH child immunization status form or comparable form completed by a health care professional; or a medical exemption form signed by a health care professional; or a religious, philosophical, or personal exemption form or similar statement signed by the child's parent or guardian.
-   The child's known allergies.
-  Names of persons authorized to pick up the child.
-  Emergency contacts. If no emergency contact is available, a written emergency contact plan may be accepted.
-  Parent or guardian information including name, phone numbers, home address, and





other contact information for reaching the family while the child is in care.

-  Medical and dental care provider names and contact information, if the child has providers. If the child has no medical or dental provider, the licensee and parent or guardian must have a written plan for medical or dental injury or incident, and
-  Consent to seek medical care and treatment of minor child in the event of injury or illness, signed by the child's parent or guardian.

If applicable, a child's records must include:

-  Injury/incident reports (see WAC [170-296A-3575](#) and [170-296A-3600](#)).
-  Medication authorization and administration log (see WAC [170-296A-3375](#)).
-  Plan for special or individual needs of the child (see WAC [170-296A-0050](#)), or
-  Documentation of use of physical restraint (see WAC [170-296A-6250](#)).

 The child's records must include signed parent permissions (see WAC [170-296A-6400](#)) as applicable for:

-  Field trips.
-  Picture taking.
-  Transportation.
-  Visiting health professionals providing services to the child at the family home child care.

## RESOURCE

Child care registration form  
[www.del.wa.gov/publications/licensing/docs/ChildCare\\_RegistrationForm.pdf](http://www.del.wa.gov/publications/licensing/docs/ChildCare_RegistrationForm.pdf)

DEL has a form for your use posted on the department website. The form will look like the one below. If you retrieve the form from the DEL site, you will be sure to have the most updated version with required information prompts.

CHILD CARE REGISTRATION FORM			
Date child entered		Date child left care	
Child's Name – First -----Middle-----Lasta		Name used	Birthdate
Childs address	City	Zip Code	
Child's parent/guardian address(s)			
1)			
2)			
Address where you can be reached while child is in care			
Parent/Guardian	Home Number	Cell Phone Number	Alternate Number
1)	1)	1)	1)
2)	2)	2)	2)
Other than you, who else has permission to pick up your child?			
Name	Address	Telephone No.	
Name: Relationship:		Home: Cell: Alternative:	
Name: Relationship:		Home: Cell: Alternative:	
Name: Relationship:		Home: Cell: Alternative:	
Name: Relationship:		Home: Cell: Alternative:	
In case of an emergency, I give permission for any of the following individuals to be contacted and my child may be released to any of them:			
Parent/Guardian signature:			
Who does not have permission to pick up your child? If applicable			
A copy of supporting court document must be on file			
Name	Reason		

Child's health information		
Date of child's last physical exam	Child's health care provider	Telephone No.
Street Address	City	Zip Code
Special health problems? Yes or no? If yes, specify.	Allergies, including drug reactions Yes or no? If yes, specify.	
Regular medications? Yes or no? If yes, specify.	Other important information Yes or no? If yes, specify.	
Child's dentist's name	Telephone No.	
Street Address	City	Zip Code
I give permission that my child, _____, may be given first aid/emergency treatment by a the child care licensee and/or qualified staff at: (Name of Licensee , Address of Licensee)		
Child's medical insurance coverage		
Insurance company name	Member/policy number	
Policy holder name	Employer name	
Insurance company name	Member/policy number	
Policy holder name	Employer name	
Consent to medical care and treatment of minor children		
I give permission that my child, _____, may be given first aid/emergency treatment by a the child care licensee and/or qualified staff at:		
Name of Licensee		
Address of Licensee		

Parent/guardian signature	Date	Parent/guardian signature	Date
<p>When I cannot be contacted, I authorize and consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician, health care provider, hospital or aid care attendant when deemed necessary or advisable by the physician or aid care attendant to safeguard my child's health. I waive my right of informed consent to such treatment.</p> <p>I also give my permission for my child to be transported by ambulance or aid care to an emergency center for treatment. I certify under penalty of perjury under the laws of the State of Washington that this information is true and correct.</p>			
Parent/guardian signature	Date	Parent/guardian signature	Date

Use this checklist as part of your policies to remember to record the following information.

## Child health records

Each child's health record will contain:

- ☐ Health history.
- ☐ Date of last physical exam.
- ☐ Name and phone number of health care provider and dentist.
- ☐ Allergy information and food intolerances.
- ☐ Individualized care plan for child with special health care needs (medical, physical, developmental or behavioral).
- ☐ List of current medications.
- ☐ Current immunization records (CISform).
- ☐ Consent for emergency care.
- ☐ Preferred hospital.
- ☐ Any assistive devices used (e.g., glasses, hearing aids, braces).

The above information will be updated \_\_\_\_\_ (how often; annually is recommended) or sooner for any changes.

## MEDICATION LOG

Name of child

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Date							
Medicine							
Time Given	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
Dosage/ Amount							
Licensee Signature							
Notes Concerns							
Signature:							
Medication returned to parent: Date:							
Parent/guardian:				Licensee signature:			



## PLAN TO MEET THE SPECIAL NEEDS OF AN INDIVIDUAL CHILD

I request a special needs accommodation for the following child: WAC <a href="#">1701296A0050</a>		
Licensee Name	Date	Telephone Number
Name of Child	Age of Child	Child's Birthdate
Description of child's diagnosed special need(s): (Include description of challenges associated with each diagnosis).		
Identify the type of plan on file for this child (a copy should be in the child's file): ____ IEP (Individual Education Plan). Expiration Date: _____ ____ IHP (Individual Health Plan). Expiration Date: _____ ____ IFSP (Individual Family Service Plan). Expiration Date: _____ ____ OTHER (Please specify _____). Expiration Date: _____ Name and position of professional that completed the identified plan: Please list all the licensing standards that will be affected to meet this child's needs:		
What will be done to meet the child's health and safety needs when identified licensing standards are not followed?		
How will the health and safety needs of the other children be met?		
Will this request require you to care for this child past the maximum age as stated on your DEL issues license? ____ Yes ____ No		
Other comments:		
I declare this information is true and accurate to the best of my knowledge and I understand that my licensor may make a site visit to verify the information.		
Licensee signature:		Date:
Parent section		
Please provide other information regarding your child that you feel should be considered when DEL reviews this request:		

## Resources

Parents or providers who are unsure about what the immunization requirements are for children's attendance from preschool through K-12 school can go to the Washington State Department of Health (DOH) website and find the information needed.

[www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization/ChildCareStatusReporting.aspx](http://www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization/ChildCareStatusReporting.aspx)

DOH links to state laws and rules for immunizations and reporting are located at:

[www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization/Regulations.aspx](http://www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization/Regulations.aspx)

Child care providers who have questions can contact DOH at [OICPSchools@doh.wa.gov](mailto:OICPSchools@doh.wa.gov) or 360-236-3595.

Useful websites for child care providers and parents are listed on the DEL website at

[www.del.wa.gov/resources/useful.aspx](http://www.del.wa.gov/resources/useful.aspx)

**Recommended:** Prevent misunderstandings by having a clear child care agreement.

**CHILD CARE AGREEMENT**

Child's name

Parent or guardian name

Parent or guardian name

Days and times my child will receive care:

Check days of care	Sun	Mon	Tue	Wed	Thurs	Fri	Sat
Arrival							
Departure							

Fee \$\_\_\_\_\_ per \_\_\_\_\_

Date payment due:

Hour \_\_\_\_ Day \_\_\_\_ Week \_\_\_\_ Month \_\_\_\_

Source of payment:

Parent \_\_\_\_\_ Other  
(specify) \_\_\_\_\_

Overtime rate \$\_\_\_\_\_ per \_\_\_\_\_

Late fee \$\_\_\_\_\_ per \_\_\_\_\_

Other fees \$ \_\_\_\_\_ Description:

I agree to promptly notify the child care provider of any changes of the above information. I understand that I am fully responsible for the terms of this agreement as stipulated. I have read, understand and agree to comply with the policy and procedures and information for parents given to me by

(Name of Licensee).

Parent or guardian signature

Date

Parent or guardian signature

Date

I agree to provide child care services according to the above plan. I agree to promptly notify the parents or guardians of any changes to the above information.

Licensee signature:

Street address:

Comments:

## Licensee and staff records

See Section One: [The Licensing Process](#) for a chart of required training, education and related documentation for all persons working or living (household members) in the home where an FHCC is located. Also see, in the [First](#) section, the detailed guide to registration in MERIT.

Records on file for the licensee and each staff person (WAC [170-296A-2075](#)) must include the following documentation:

- Current first aid and infant, child and adult CPR training certification.
- HIV/AIDS training certification.
- TB test results or documentation as required under WAC [170-296A-1750](#).
- Current state Food Handler Permit for the licensee, and for other staff if required under WAC [170-296A-7675](#).

- Completed background check form, or non-criminal background check form if applicable under WAC [170-296A-1225](#), and copy of the department-issued authorization.
- Copy of a current government issued picture identification.
- Emergency contact information.
- Completed application form or resume for staff when hired.

Documentation for the licensee and primary staff person of:

- Child Care Basics training.
- Continuing education completed.
- Registration in MERIT.

A record of training the licensee provided to staff and volunteers.

A resume is required for the licensee only.

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### Provider health

1. You must document a tuberculin skin test (Mantoux method) within the past year, unless not recommended by a licensed health care provider.
2. If you have had a positive tuberculin skin test in the past, you will always have a positive skin test, despite having undergone treatment. In this case, you do not need documentation of a skin test. Instead documentation must be on record that you have had a negative (normal) chest x-ray and/or completion of treatment.
3. You do not need to be retested for tuberculosis unless you have had an exposure. If you change from a negative test to a positive test, medical follow up will be required and a letter from the health care provider must be on record that indicates you have been treated or you are undergoing treatment.
4. Let parents know you comply with all recommendations from the local health jurisdiction. (For example, TB is a reportable disease.).
5. If you have a communicable disease, you are expected to remain away from children until you are no longer contagious. You are required to follow the same guidelines outlined in EXCLUSION OF ILL CHILDREN in your policies.
6. You are encouraged to consult with your health care provider regarding your susceptibility to vaccine-preventable diseases.
7. If you are pregnant or considering pregnancy you are encouraged to inform your health care provider that you work with young children. When working in child care settings there is a risk of acquiring infections which can harm a fetus or newborn. These infections include Chicken Pox (Varicella), CMV (cytomegalovirus), Fifth Disease (Erythema Infectiosum), and Rubella (German measles or 3-day measles).

In addition to the infections listed here, other common infections such as influenza and Hand Foot and Mouth disease can be more serious for pregnant women and newborns. Good hand-washing, avoiding contact with ill children and adults, and cleaning of contaminated surfaces can help reduce those risks.

Recommendations for adult immunizations are available at:  
[www.doh.wa.gov/cfh/Immunize/immunization/adults.htm](http://www.doh.wa.gov/cfh/Immunize/immunization/adults.htm)

## RESOURCE

Application for Employment or Volunteer Services Licensed/Certified Child Care Agency  
This form may be obtained from the DEL website at:  
[www.del.wa.gov/publications/licensing/docs/Center\\_School-AgeEmploymentApplication.pdf](http://www.del.wa.gov/publications/licensing/docs/Center_School-AgeEmploymentApplication.pdf)

## REFLECT

How might you use a song to encourage hand washing? Go to this link for ideas:  
[www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Flu.aspx](http://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Flu.aspx)



## Household members' records

### REQUIRED RECORDS (WAC [170-296A-2100](#)) FOR HOUSEHOLD MEMBERS

Keep the following:

- ☐ Completed background check form and the department-issued clearance under chapter [170-06](#) WAC for each individual 16 years old and older.

- ☐ DEL-issued clearance for household members ages 13 to 16 under WAC [170-296A-1225](#).

- ☐ TB test results or documentation under WAC [170-296A-1750](#) for

- ☐ Household members age 16 or older.

- ☐ Any household member age 14-16 who is an assistant or volunteer.

## Child attendance records

### STAFF-TO-CHILD RATIO RECORDS (WAC [170-296A-2125](#))

Keep records of daily attendance for each child counted in capacity that includes the following:

- ☐ Child's dates of attendance.
- ☐ Time the child arrives or returns to the child care, including signature of the person

authorized by the child's parent or guardian to sign the child in.

- ☐ Time the child leaves from the licensee's care including signature of the person authorized by the child's parent or guardian to sign the child out, and

- ☐ Names of staff being counted to meet the daily staff-to-child ratio requirements.

#### Daily attendance record for child care facilities

Shaded section for child care staff used when child leaves and returns to licensee's care (such as when a child is also attending elementary school)

Date	Child's Name	Time In	Parent or authorized signature	Time out	Staff initial	Time in	Staff Initial	Time out	Parent or authorized signature

## Facility records

### KEEP THE FOLLOWING FACILITY RECORDS (WAC [170-296A-2150](#))


- ☐ Monthly fire inspections required under WAC [170-296A-3050](#).
- ☐ Fire extinguisher annual maintenance or receipts indicating annual purchase of new fire extinguisher(s), under WAC [170-296A-3000](#).
- ☐ Septic system inspection and maintenance, if required under WAC [170-296A-1375](#).
- ☐ Water testing results, if required under WAC [170-296A-1400](#).
- ☐ Installation or assembly instructions for new play equipment under WAC [170-296A-5000](#).
- ☐ (This requirement does not apply to used or hand-made play equipment built or installed by the licensee or homeowner, or to play equipment purchased prior to March 31, 2012.)
- ☐ Emergency preparedness evacuation drills under WAC [170-296A-2925](#).
- ☐ Documents from any department visits, inspections or monitoring checklists.
- ☐ As applicable, compliance agreements or safety plans between the licensee and the department.




## Materials that must be posted


The following must be posted in the licensed space during operating hours and clearly visible to the parents, guardians and staff (WAC [170-296A-2175](#)):


- ☐ A statement of the licensee's philosophy of child development.
- ☐ Emergency information, including:
  - ☐ 911 or emergency services number.
  - ☐ Name of the licensee, telephone number(s), emergency contact information, address, and directions from the nearest major arterial street or nearest cross street to the licensed home.
  - ☐ Washington poison center toll-free phone number.
  - ☐ DSHS children's administration intake (child protective services) toll-free telephone number.
- ☐ Emergency preparedness plan and drills with the following information:
  - ☐ Dates and times of previous drills.
  - ☐ Procedure for sounding alarm.
  - ☐ Monthly smoke detector check, and carbon monoxide detector check if carbon monoxide detectors are required under WAC [170-296A-2950](#).
  - ☐ Floor plan with escape routes and emergency exits identified.
- ☐ Emergency medical information or explanation of where that information can be found.
- ☐ Child care licensing information including:
  - ☐ The current DEL-issued child care license.
  - ☐ If applicable, a copy of current department-approved exceptions to the rules.
- ☐ If applicable, notice of any current or pending department enforcement action. Notice must be posted:
  - ☐ Immediately upon receipt.
  - ☐ For at least two weeks or until the violation causing the enforcement action is corrected, whichever is longer.
- ☐ A notice stating that additional information about the child care license is available upon




request to the licensee.  is information includes:

-  Copies of department monitoring checklists.
-  If applicable, any facility licensing compliance agreements (FLCA).
-  If applicable, copy of any enforcement action taken by the department for the previous three years.

 If applicable, notice that the licensee does not have liability insurance coverage, or that the coverage has lapsed or been terminated. See RCW [43.215.535](#).

 A statement on how the licensee will communicate with the parent or guardian on their child's development and parenting support.

 A typical daily schedule as described in WAC [170-296A-6550](#).

## Resources for posting

Safety record and evacuation plan – DEL website form below may be printed from:  
[www.del.wa.gov/publications/licensing/docs/FH\\_Safety\\_Evacuation.pdf](http://www.del.wa.gov/publications/licensing/docs/FH_Safety_Evacuation.pdf)

SAFETY RECORD AND EVACUATION PLAN								
Year	Monthly fire drill record			Monthly smoke and carbon monoxide detector record		Quarterly disaster drill		
Month	# of children	Length of drill	Initials of staff present	Date smoke detector checked	Date Carbon monoxide checked	# of children	Length of drill	Initials of staff present
JAN								
FEB								
MAR								
APR								
MAY								
JUNE								
JULY								
AUG								
SEPT								
OCT								
NOV								
DEC								



## Lockdown/shelter in place annual drill

Date of annual drill	# of children	Length of drill	Initials of staff present

## Batteries replaced annually

## Fire extinguisher

Smoke detector date	Carbon monoxide detector date	Date

## Check daily

Evacuation plan and procedures are posted.

Exits open freely; exits are not blocked.

Electrical appliances are working properly.

Electrical outlets are not overloaded.

Extension cords are not used in place of permanent wiring.

Combustible trash is not allowed to accumulate.

Flammable or combustible material is stored safely.

Fireplaces, wood burning stoves, fireplace inserts, and heaters are used safely and out of reach of children.

## Fire evacuation plan

Please write your plan to evacuate children from your facility in case of fire.

1. How will you evacuate the children, especially those who cannot walk?
2. How will you sound an alarm? Where is it kept?
3. Where will the children and staff gather when waiting for the fire department to arrive?
4. How will you make sure all persons are evacuated and accounted for?

# Reporting Incidents

## REPORTING INCIDENTS TO 911 (EMERGENCY SERVICES)

Call 911 and report to emergency services the following (WAC [170-296A-2200](#)):

- A child missing from care, as soon as the licensee or staff realizes the child is missing.
- Medical emergency (injury or illness) that requires immediate professional medical care.
- Giving a child too much of any oral, inhaled or injected medication, or a child taking or receiving another child's medication.
- Fire and other emergencies.
- Poisoning or suspected poisoning.
- Other incidents requiring emergency response.

## REPORTING INCIDENTS TO WASHINGTON POISON CENTER (WAC [170-296A-2225](#))

First call 911 if you suspect a child has ingested poison.

Next, report to the Washington poison center:

- Any poisoning or suspected poisoning.
- A child receiving too much of any oral, inhaled or injected medication.
- A child taking or receiving another child's medication.

Finally report to a child's parent or guardian and to DEL Immediately (WAC [170-296A-2250](#)):

- Any incident reported under WAC [170-296A-2200](#), after calling 911.
- Any incident reported under WAC [170-296A-2225](#), after calling 911 and Washington poison center.
- A child's demonstrated acts, gestures or behaviors that may cause serious intentional harm to self, others or property.
- Use of physical restraint with a child.

Within 24 hours:

- Any child's injury or other health concern that does not require professional medical treatment (report to parent only).
- Change in child care staff, including serious illness or incapacity of the licensee that may impact child care staffing.
- Additions to the household of persons 16 years or older, or a change in the licensee's phone number or email.
- Any child's exposure to a communicable disease from the list in WAC [170-296A-3210](#).
- The licensee's plans to move, as soon as the licensee plans to move (WAC [170-296A-1475](#)).

The Washington Poison Center may be reached at 1-800-222-1222 and <http://www.wapc.org>

## OTHER INCIDENT REPORTING TO THE DEPARTMENT (WAC [170-296A-2275](#))

You must report to DEL any incidents or changes as required under WAC [170-296A-2200](#), or [170-296A-2225](#), [170-296A-2250](#), [170-296A-2300](#), and [170-296A-2325](#).

You or another person must report to DEL within 24 hours:

- The licensee's emergency absence, serious illness or incapacity of the licensee, staff or member of household, if the licensee has a reasonable expectation that the absence illness or incapacity will affect the licensee's ability to provide care.
- Who is going to continue to provide care.
- For the licensee, staff, volunteer or household member age 14 or older:
  - Pending charge or conviction for a crime listed in WAC [170-06-0120](#).
  - Allegation or finding of child abuse or neglect under chapter [26.44](#) RCW or chapter [388-15](#) WAC.

- ❑ Allegation or finding of abuse or neglect of a vulnerable adult under chapter [74.34](#) RCW.

- ❑ Pending charge, conviction, or negative action from outside Washington state consistent with or the same crime listed in WAC [170-06-0120](#), or “negative action” as defined in RCW [43.215.010](#).

## Reporting to DSHS Children’s Administration Intake

The licensee and each staff person are required (WAC [170-296A-2300](#)) to report the following to DEL, and to DSHS children’s administration intake-child protective services (CPS) or law enforcement within 48 hours as required under RCW [26.44.030](#):

- ❑ Suspected child abuse or neglect.
- ❑ A child’s disclosure of sexual or physical abuse or neglect (WAC [170-296A-2300](#)).
- ❑ Inappropriate sexual contact between two or more children.
- ❑ A child’s attempted suicide or talk about attempting suicide.

The licensee or primary staff person must immediately report the death of a child to CPS or law enforcement and to DEL if the death of a child occurred while in the licensee’s care, or if it resulted from injury or illness that may have occurred while the child was in the licensee’s care.

### Child Abuse and Neglect

- Child care providers are state-mandated reporters of child abuse and neglect; we immediately report suspected or witnessed child abuse or neglect to Child Protective Services (CPS). The phone # for CPS is 1-800-609-8764.
- Signs of child abuse or neglect are documented on \_\_\_\_\_ (name of report form), which is located \_\_\_\_\_ (where).
- Training on identifying and reporting child abuse and neglect is provided to all staff and documentation kept in staff files.
- Licensors are notified of any CPS report made.

### Reporting notifiable conditions to health department WAC [170-296A-2325](#)

The licensee must report a child in care diagnosed with a notifiable condition as defined in chapter 246-101 WAC to the local health jurisdiction or the DOH. Contact the local health jurisdiction for the list of notifiable conditions and reporting requirements.

Need to find contact information for your local health department? Go to [www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions.aspx](http://www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions.aspx)





# Policies

The licensee must have written policies (WAC [170-296A-2350](#)) for:

- Parents and guardians, also known as the parent handbook.
- Program and staff.

The licensee must submit all policies and revisions of policies to DEL.

## What is the purpose of parent policies?

The purpose of a parent handbook or parent policy is to guide your operations manual, staff policies and on-site policies. The parent handbook that you give to parents of the children in your care must include DEL licensing requirements, but you can also add your own rules and personal information as well.

As a provider and a business owner you should sit down with new clients (the parents or guardians of the enrolled children) and review your handbook. As each new family is introduced into your FHCC, take the time to explain your rules and make sure that the family or guardians understand what is expected from them and what they can expect from you.

If a problem arises regarding a subject that is addressed in your handbook, you can refer to your policy with the family and hopefully avoid conflict, or more easily work toward a resolution. If your policies regarding a topic are vague, or you and the family have differing assumptions, it can cause problems. Your handbook is the basis of your contract with families and should be clear at all times. Have both parents (if applicable) and guardians sign that they understand your policies and give them a copy. Keep a copy in your files. This advice is based on work done by Donna Horne of Volunteers of America, Family and Children's Services, in Everett.

## Write your policy after learning what needs to be in it!

The licensing standard is detailed below. After the policy standard you will find a series of questions to support you as you write your own parent policy or handbook that fits the specifics of your FHCC. See also Appendix A in this section for a disaster policy and refer



to Section Five – Safety, Health and Nutrition for additional information to support the writing of your required policies.

## PARENT/GUARDIAN POLICIES OR HANDBOOK (WAC [170-296A-2375](#))

The licensee's written parent/guardian policies (handbook) must include:

- Hours of operation including closures and vacations.
- Information on how children's records are kept current, including immunization records.
- Enrollment and disenrollment process.
- Parent/guardian access to their child during child care hours.
- Program philosophy (the licensee's view of child learning and development).
- Typical daily schedule, including food and rest periods. See WAC [170-296A-6550](#).
- Communication plan with parents/guardians including:
  - How the parent or guardian may contact the licensee with questions or concerns.
  - How the licensee will communicate the child's progress with the parent or guardian at least twice a year.
  - How the licensee will support parents regarding parenting.
- Written plan for any child's specific needs if applicable. See WAC [170-296A-0050](#).
- Fees and payment plans.
- Religious activities and how the parent's specific religious preferences are addressed.
- How holidays are recognized in the program.
- Confidentiality policy including when information may be shared. See WAC [170-296A-2025](#).
- Items that the licensee requires the parent or guardian to provide.

- Guidance and discipline policy. See WAC [170-296A-6050](#).
- If applicable, infant/toddler care including SIDS prevention, feeding, diapering and toilet training.
- Reporting suspected child abuse or neglect. See WAC [170-296A-6275](#).
- Food service practices. See WAC [170-296A-7125](#) through [170-296A-7200](#), and [170-296A-7500](#) through [170-296A-7650](#).
- On-site field trip requirements. See WAC [170-296A-2450](#).
- Transportation requirements. See WAC [170-296A-6475](#).
- Staffing plan. See WAC [170-296A-5600](#) and [170-296A-5775](#).
- Access to licensee and staff training and professional development records.
- Pet policies. See WAC [170-296A-4800](#).
- Health care and emergency preparedness policies including:
  - Emergency preparedness and evacuation plans. See WAC [170-296A-2825](#).
  - Injury or medical emergency response and reporting. See WAC [170-296A-3575](#), [170-296A-3600](#), and [170-296A-2275](#).
  - Medication management including storage and giving medications. See WAC [170-296A-3325](#);
  - Exclusion/removal policy of ill persons. See WAC [170-296A-3210](#); (e) Reporting of notifiable conditions to public health; (f) Immunization tracking. See WAC [170-296A-3250](#).
  - Infection control methods, including:
    - Handwashing (WAC [170-296A-3625](#)) and, if applicable, hand sanitizers (WAC [170-296A-3650](#)), and
    - Cleaning and sanitizing, or cleaning and disinfecting procedures including the methods and products used. See WAC

[170-296A-3850](#) through [170-296A-3925](#) and definitions in WAC [170-296A-0010](#).

☐ Napping/sleeping.

☐ No smoking policy consistent with WAC [170-296A-4050](#).

☐ Drug and alcohol policy consistent with WAC [170-296A-4025](#).

☐ If applicable, guns and weapons storage. See WAC [170-296A-4725](#).

☐ If applicable, overnight care requirements. See WAC [170-296A-6850](#).

## Checklist for writing your own parent policy

After reading the long list of requirements for your parent handbook you may be wondering where to begin. Remember this is your opportunity to tell parents who you are, what you believe in and why you have chosen this important field as your profession. You will also be identifying basic information that will prevent problems in the future based on misunderstandings. Use this list to get going and check the WAC detailed above, to be sure you have included all required areas.

### COVER AND FIRST PAGE OF THE PARENT HANDBOOK

Welcome parents and list your name, address and discuss the basics of your program under number one.

#### 1. What are your hours of operation and days you will be closed?

- ☐ Identify holidays, sick days, and vacations and closures. Plan a year ahead and let the families also plan!
- ☐ State your opening and closing times (for example, 6 a.m. to 6 p.m., weekdays).

#### 2. What child records are required? How will children's records be kept current?

- ☐ Give a sample of the forms for admission.
- ☐ State how often the information will be checked and updated.
- ☐ State how you will notify parents when you have any changes to policies.

#### 3. Enrollment and disenrollment information. Detail the following:

- ☐ Deposit and registration forms

☐ Trial period

☐ Withdraw policy

☐ Termination policy

#### 4. Access to children during child care hours

- ☐ You must state that you have an open-door policy, meaning parents may come unannounced or without an appointment if their child is in care.
- ☐ State who may have access to a child during child care hours (parents, guardians, DEL and CPS).
- ☐ Suggestion: Discuss how you address custody issues.

#### 5. Your philosophy

- ☐ What is your view of how children learn and develop?
- ☐ What is your view of how you and your staff will support children to learn and grow?
- ☐ Briefly give other details such as your goals for how the environment, routines, and other aspects of your program will support a healthy, safe and nurturing experience for children.
- ☐ Share anything else about how you will operate your child care business that will let families and others understand your approach to caring and educating children. There may be many ways to describe your philosophy. Here is one example:

- ☐ We believe children learn through play in an environment that is safe, interesting and set up for exploration and creativity.
- ☐ We believe children are capable, curious and 'little scientists' trying to figure



out how the world works. Our environment is set up and has materials that fit the ages and interests of our enrolled children.

- ❑ As caregivers and educators we believe it is our responsibility to value every child for who they are, to partner with families and to include the cultures and languages of our families in our program.
- ❑ We allow children to make choices based on their interests and we actively teach social skills to create a caring community of learners here.

#### 6. Daily schedule, food and rest periods

- ❑ See: WAC [170-296A-6550](#) and detail the daily schedule.
- ❑ Give a sample menu.
- ❑ State that you offer rest periods and naps and offer quiet activities for those children who don't need naps.

#### 7. Communications plan

- ❑ How will you communicate with parents?
- ❑ How will parents contact you?
- ❑ How will you communicate with parents at least twice a year about the child's progress?
- ❑ How will you support the parents regarding their own parenting?

#### 8. Plan for any child's specific needs if applicable

See: WAC [170-296A-0050](#)

- ❑ State what you will do if you have a child with specific needs. For example, how will you change your routine, modify your environment, or partner with other professionals to meet a child's identified special needs?
- ❑ Do you have any training or certifications that you want parents to know about?

#### 9. Fees and payment plan

- ❑ What is your payment policy?
- ❑ Do you have a required deposit?
- ❑ What rate do you charge for specific situations such as a second child in the same family? Do you offer a family discount if applicable?
- ❑ What are your late fees?

- ❑ How do you handle charges when a family goes on vacation, a child is ill or gone due to specific holidays?
- ❑ What rules must you follow for families who receive subsidized child care fees from the state of Washington programs for low income families (TANF/ DSHS)?

#### 10. Religious activities and how parent's or guardian's religious preferences are addressed

- ❑ Indicate whether specific holidays are or are not celebrated.
- ❑ Discuss your program's approach to religion. Are you a religious program or not? Give examples of what you do in your program in this area.
- ❑ If holidays are not celebrated, describe how you create a community feeling through other routines or means.

#### 11. Birthdays and holidays

- ❑ Holidays are / are not celebrated
- ❑ Birthdays are / are not celebrated
- ❑ If celebrated what is the parent's role? What might they contribute to the program? What would you like to avoid?

#### 12. Confidentiality policy including when and with whom information may be shared

See WAC [170-296A-2025](#) and then answer:

- ❑ Who will you tell and share children's files with?
- ❑ How will you keep the child's file confidential?

#### 13. What do parents need to bring to child care?

#### 14. Guidance and discipline after reviewing WAC [170-296A-6050](#).

Discuss your philosophy of:

- ❑ Behavior management
- ❑ Child care rules
- ❑ Consequences
- ❑ Respect
- ❑ No corporal punishment on premises

#### 15. Infant and toddler care

If you serve infants and toddlers, detail the following:

- ❑ Feeding



- ☐ Sleeping/SIDS prevention
- ☐ Diapering /Toilet Training

## 16. Child abuse, neglect and exploitation

Print WAC [170-296A-6275](#) exactly as it appears in your Parent Handbook.

## 17. Food service practices

See WAC [170-296A-7125/7200](#) and [170-296A-7500/7650](#), and describe:

- ☐ How you post daily meals.
- ☐ ☐ e type of food you serve or if you require parents to supply meals for their child.
- ☐ If you have an outside food allowance because you participate in a state food program.
- ☐ Culture and sensitive food practices.
- ☐ Views on sharing food.
- ☐ Allergy policy and notifications.
- ☐ Describe your qualifications such as the fact that you have a food handler's permit, you adhere to appropriate food storage practices, and you comply with healthy and safe food handling practices.

## 18. Off-site field trips

See WAC [170-296A-2450](#) and describe your plans for:

- ☐ Off-site field trips.
- ☐ How you will notifying parents in advance of a field trip.

## 19. Transportation

See WAC [170-296A-6475](#) and detail your:

- ☐ Plan for transporting children.
- ☐ Policy on car seats or booster seats. Who provides car seats?
- ☐ Emergency materials.
- ☐ Insurance information.

## 20. Staffing plan

See WAC [170-296A-5600](#) and WAC [170-296A-5775](#) and describe your:

- ☐ Staffing ratios.
- ☐ Staffing plan.
- ☐ Supervision of children.

## 21. Licensee's and staff's training and professional development records

Identify the requirements that you and your staff have met in the areas of:

- ☐ Background checks.
- ☐ Documented training.
- ☐ CPR / first aid / bloodborne pathogen training.

## 22. Pet policies

See WAC [170-296A-4800](#) and note if you will have animals in the child care area and state that they will have:

- ☐ Shots and veterinary records.
- ☐ Care to meet all WAC requirements.
- ☐ A cleaning policy.

## 23. Health care and emergency preparedness policies

See WAC [170-296A-2825](#)

### a. Emergency preparedness and evacuation plans

- ☐ How long are you prepared to take care of children?
- ☐ What equipment do you have on hand?
- ☐ How far is the fire station from your home?
- ☐ Where is the closest place that you could go to as a back-up location if your home is unsafe?
- ☐ Request out-of-state phone numbers from enrolled families. Give parents an out of state phone number to call in the event of an emergency that prevents local calls.

### Evacuation and safety plans

- ☐ How often you do drills for children and staff?
- ☐ In case of evacuation where will you go or meet in the yard?
- ☐ What doors are open for an emergency?
- ☐ Are children trained to call 911?
- ☐ Are there procedures in place for fire, earthquake and lockdown?

### b. Injury or medical emergency response and reporting

See WACs [170-296A-3575](#), [3600](#), [2275](#) and then describe:

- ☐ When will parents be notified of cuts, bruises and falls that may be treated on site?

- ❏ How are parents notified of injuries requiring medical treatment?
- ❏ What are the procedures for reporting a questionable injury?
- ❏ What is the procedure for handling emergencies?

#### c. Medication management

See WAC [170-296A-3325](#) and describe practices.

#### d. Exclusion/removal of ill children

- ❏ How will you handle a child who becomes ill in care?
- ❏ Under what circumstances is a child be excluded from care?

#### e. Reporting to public health and DEL within 24 hours

- ❏ What is reported?

#### f. Immunization tracking

What is your:

- ❏ Policy on tracking and updating?
- ❏ Form for parents to use?

#### g. Infection control methods

Describe:

- ❏ Cleaning and sanitizing.
- ❏ Hand washing.
- ❏ Hand sanitizers.
- ❏ Handling contaminated material, blood, fluids.

### 24. Napping and sleeping

Answer the following:

- ❏ Who takes a nap?
- ❏ What is your napping policy?
- ❏ What are non-napping children doing while others nap?
- ❏ What sleeping equipment is used?

### 25. No smoking policy

See WAC [170-296A-4050](#) and then describe:

- ❏ What are policies for parents, staff?

### 26. Drug and alcohol policy

See WAC [170-296A-4025](#) and then describe:

- ❏ What are the state's policies? Your personal policies?
- ❏ What you would do if a parent was under the influence?

### 27. Weapons storage, if applicable

See WAC [170-296A-4725](#) and then detail:

- ❏ What is the policy?
- ❏ If you have weapons, how are they stored?

### 28. Overnight care

See WAC [170-296A-6850](#) and describe

- ❏ What sleeping equipment will be provided for overnight care?
- ❏ Where will children sleep?
- ❏ Where will providers sleep?

Additional information that you may want to address in your parent handbook:

- ❏ Provider information.
- ❏ References.
- ❏ Licensing and liability insurance.
- ❏ Employees/substitute caregivers.
- ❏ Backup child care ideas.
- ❏ Nondiscrimination policy.
- ❏ Photograph policy.
- ❏ School districts close to the FHCC.
- ❏ Extra services and charges.

Now that the parent handbook is finished you can start the program operations, staff and on-site policies. You can address these policies by including most information in the parent handbook or you can choose to have a separate manual. Either way, most of the information needed will have been addressed in the parent handbook.

The following list is what DEL requires in your operations, staff and on-site policies. As you will notice, a lot is already in your parent handbook. If you don't have staff or if you don't go on field trips, then you don't need these policies. After you review the WACs below, a list of what needs to be in your remaining policies is listed.



# Program/ Operations Policies (WAC 170-296A-2400)

In addition to parent policies and procedures required under WAC [170-296A-2375](#), the licensee must have written program/operations policies that include:

- ❑ Plans to keep required program/staff records current.
- ❑ Child supervision requirements.
- ❑ Mandatory reporting requirement of suspected child abuse and neglect and other incidents under WAC [170-296A-2300](#).
- ❑ Plan for off-site field trips.
- ❑ Plan for transporting children.
- ❑ Plan for preventing children's access to uncensored space.
- ❑ Medical emergency, fire, disaster and evacuation responsibilities.
- ❑ Guidance and discipline responsibilities.
- ❑ Overnight care, if applicable.
- ❑ Plan for staff (when applicable) to include:
  - ❑ Staff responsibilities.
  - ❑ Staff training.
  - ❑ Staff expectations.
  - ❑ Professional development.







# Staff Policies

Policies (WAC [170-296A-2425](#)) must include:







- ❑ All the information in the parent/guardian handbook under WAC [170-296A-2375](#), except fees.
- ❑ Plan for keeping staff records current including:
  - ❑ Completed background check forms and department clearances.
  - ❑ First aid and CPR certification.
  - ❑ TB test results.
  - ❑ Required training and professional development for primary staff persons.
  - ❑ Training that the licensee must provide to staff.
- ❑ Job description.
- ❑ Staff responsibilities for:
  - ❑ Child supervision requirements.
  - ❑ Guidance/discipline techniques.
  - ❑ Food service practices.
  - ❑ Off-site field trips.
- ❑ Transporting children.
- ❑ Preventing children's access to unlicensed space.
- ❑ Health, safety and sanitization procedures.
- ❑ Medical emergencies, fire, disaster and evacuations.
- ❑ Mandatory reporting of suspected child abuse and neglect.
- ❑ Overnight care, if applicable.
- ❑ Staff responsibilities if the licensee is absent from the child care operation.
- ❑ The licensee must keep documentation of all staff training on policies.



**Resource:**

Go to: [www.del.wa.gov/publications/licensing/#family](http://www.del.wa.gov/publications/licensing/#family).

Scroll down to the Family Home Child Care section and open the document you need. The documents are available in Spanish and English and include:

-  Family Home Written Plan for Licensee Absence (WAC [170-296A-5775](#)).
-  Family Home Written Plan for Dangerous or Aggressive Pet or Animal.
-  Family Home Child Care - Request to Provide Overnight Care (WAC [170-296A-6850](#)).
-  Inspection of fireplaces, wood stoves, or similar wood-burning heating devices (WAC [170-296A-2650](#)).
-  Request for Fire Department visit.
-  Written Plan for Bodies of Water (WAC [170-296A-5250](#)).



# Off-site Activity Policy

The licensee must have a written policy (WAC [170-296A-2550](#)) for off-site activities that includes:

- ❑ Parent notification and permissions. See WAC [170-296A-6400](#).
- ❑ Supervision plan.
- ❑ Transportation plan. See WAC [170-296A-6475](#).
- ❑ Emergency procedures including bringing each child's:
  - ❑ Emergency contact information.
  - ❑ Medical records.
  - ❑ Immunization records.
  - ❑ Individual medications if required for specific children.
  - ❑ Medication administration log.
- ❑ Medication management.
- ❑ Maintaining a complete first-aid kit.
- ❑ Charging of fees, if any.





Family Home Child Care  
 Off-Site Permission Authorization for Occasional Trips

WAC <a href="#">170-296A-6400</a> Off-Site activities - Parent or guardian permission	
The licensee must:	
a) Have written permission from the parent or guardian prior to the child engaging in off-site activities. The written permission must be kept in the child's file.	
b) Have a separate permission for activities that occur less often than once per calendar month.	
Child's name	Licensee Name
A special outing is planned to:	Address:
Date: _____ Departure Time: _____ Return Time: _____	
The children will be transported by motor vehicle: ____ Yes ____ No	We will be going on this outing using public transportation: ____ Yes ____ No
Notes:	
Please return this permission slip by:	
I give permission for my child _____ (Child's name)	To attend the outing to: Date: _____
This permission is granted when the licensee follows all the requirements for transporting children (WAC <a href="#">170-296A-6475</a> ).	
In case of emergency, I give permission for my child to receive medical treatment. In case of such emergency please contact: _____	
Name:	Telephone number
Parent or guardian signature:	
Date:	
Give a copy to the parent or guardian and keep a copy in the child's file.	



## CHECKLIST FOR YOUR PROGRAM OPERATIONS, STAFF AND OFF SITE POLICIES

## Program and operations policies






The following subjects may be addressed in your parent handbook if you prefer one document. Redundant requirements are underlined>.

1. Plans to keep required program and staff records current.
2. Child supervision requirements.
3. Mandatory reporting requirement of suspected child abuse and neglect and other incidents.
4. Plan for off-site field trips.
5. Plan for transporting children.
6. Plans for preventing children's access to unlicensed space.
7. Medical emergency, fire, disaster and evacuation responsibilities.
8. Disaster Plan (See Section 6x, Appendix A)
9. Evacuation of children
10. Evacuation locations
11. Earthquake procedures
12. Fire
13. Immediately following the fire
14. Lock down or shelter in place
15. Lock-down procedures
16. Injury or medical emergency response and reporting
17. Injury to child
18. First aid
19. Guidance and discipline responsibilities
20. Overnight care, if applicable
21. Plan for staff
22. Staff responsibilities
23. Responsibilities of a primary staff person supervising staff
24. Staff training
25. Staff expectations
26. Professional development

Staff policies Only if you have staff

1. What is required by staff to read and know?
2. Have required staff records and a plan for keeping staff requirements current
3. Training that the licensee must provide to staff
4. Job description
5. Staff responsibilities
6. Child supervision requirements
7. Guidance/discipline techniques
8. Food service practices
9. Off-site field trips
10. Transporting children
11. Preventing children's access to unlicensed space
12. Health, safety and sanitization procedures
13. Cleaning and sanitizing toys
14. Disaster plan
15. Evacuation of children
16. Evacuation locations
17. Earthquake procedures
18. After ground stops moving
19. Fire
20. Immediately following the fire
21. Lock down or shelter in place
22. Lock-down procedures
23. Injury or medical emergency response and reporting
24. Injury to child
25. First aid
26. Mandatory reporting of suspected child abuse and neglect
27. Overnight care, if applicable
28. Staff responsibilities if the licensee is absent from the child care operation.
29. The licensee must keep documentation of all staff training on policies.


**Resources:** For a review of model child care policies and plans consult the following resources:

-  American Academy of Pediatrics
-  American Public Health Association
-  National Resource Center for Health and Safety in Child Care and Early Education
-  Caring for our children: National health and safety performance standards, 2011.
-  Guidelines for early care and education programs. 3rd Edition. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Also available at <http://nrckids.org>.

Aronson, S. A. (2002). Model child care health policies. WA, DC: NAEYC.

Aronson, S.A. (2012). Healthy young children: A manual for programs. WA, DC: NAEYC.

National Association for the Education of Young Children (NAEYC).  
(2013). Coping with disasters. See:  
[http://www.naeyc.org/newsroom/  
Resources on coping with disasters](http://www.naeyc.org/newsroom/Resources_on_coping_with_disasters)

NAEYC has gathered online resources to provide information about disaster preparedness for child care and preschool programs in the U.S. and how to talk to young children about disasters they learn about in the media.  e site also provides information about helping children during and after a disaster.



# Section Six Appendix A: Disaster Preparedness

The following are examples of different ways to create a disaster plan.

## Disaster Plan Approach 1

### PLAN AND TRAINING

We have developed a disaster preparedness plan/policy. Our plan includes responses to the different disasters our site is vulnerable to, as well as procedures for on-and off-site evacuation and shelter-in-place. Evacuation routes are posted in each classroom. Our disaster preparedness plan/policy is located \_\_\_\_\_

(where).

Staff are oriented to our disaster policy \_\_\_\_\_

(when/how often; at least annually).

Parents/guardians are oriented to this plan \_\_\_\_\_

(when/how).

Staff are trained in the use of fire extinguishers \_\_\_\_\_

(when, by whom).

The following staff persons are trained in utility control (how to turn off gas, electric, water): \_\_\_\_\_

Disaster and earthquake preparation and training are documented.



## Supplies

Our center has a supply of food and water for children and staff for at least 72 hours, in case parents/guardians are unable to pick up children at usual time.

\_\_\_\_\_ (name)  
is responsible for stocking supplies. Expiration dates of food, water, and supplies are checked \_\_\_\_\_  
(how often) and supplies are rotated accordingly. Essential medications and medical supplies are also kept on hand for individuals needing them.

## HAZARD MITIGATION

We have taken action to make our center earthquake/disaster-safe. Bookshelves, tall furniture, refrigerators, crock pots, and other potential hazards are secured to wall studs. We continuously monitor all rooms and offices for anything that could fall and hurt someone or block an exit – and take action to correct these things.

\_\_\_\_\_ is the primary person responsible for hazard mitigation, although all staff members are expected to be aware of their environment and make changes as necessary to increase safety.

## DRILLS

Fire drills are conducted and documented each month. Disaster drills are conducted \_\_\_\_\_

\_\_\_\_\_ (how often; quarterly at a minimum – monthly recommended).

## Disaster Plan Approach 2<sup>1</sup>

Our program's name and address is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Our nearest cross-streets are: \_\_\_\_\_

\_\_\_\_\_

Our program's phone number is: \_\_\_\_\_

Our out-of-area contact is: \_\_\_\_\_

Phone number: \_\_\_\_\_

\_\_\_\_\_

The purpose of this plan is to assist child care and other early learning and school-age programs in preparing for and responding to an emergency or disaster.

All programs are encouraged to seek additional information and training around emergency/disaster preparedness from local emergency management and/or public health.

This plan was prepared by the Child Care Health Program of Public Health - Seattle and King County with a great deal of input from Seattle Emergency Management.

It is individualized by each program. For an electronic copy of the plan and other supporting documents, go to:

<http://kingcounty.gov/healthservices/health/child/childcare/preparedness.aspx>

Revised 7/2011

<sup>1</sup> Section Six Appendix A: Disaster Plan 2 adapted from: Seattle-King County Public Health document. See: [www.kingcounty.gov/healthservices/health/child/childcare/preparedness.aspx](http://www.kingcounty.gov/healthservices/health/child/childcare/preparedness.aspx)

## EMERGENCY INFORMATION

Police \_\_\_\_\_ 911

Fire/medics \_\_\_\_\_ 911

Poison control center \_\_\_\_\_ 1-800-222-1222

Child protective services \_\_\_\_\_ 1-800-562-5624

Hospital emergency room \_\_\_\_\_

Electric/gas company \_\_\_\_\_

Water/sewer provider \_\_\_\_\_

Insurance agency \_\_\_\_\_

Auto policy number \_\_\_\_\_

Home policy number \_\_\_\_\_

Radio station with emergency broadcasting \_\_\_\_\_

Program cell phone \_\_\_\_\_

Child care licenser \_\_\_\_\_

Public health nurse \_\_\_\_\_

Center's planned evacuation sites

Off site \_\_\_\_\_

On site \_\_\_\_\_

Program out of area contact \_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We have developed this emergency/disaster plan to provide safe care for our children should an emergency or disaster occur during the program day. A copy of this plan is always available for review. It is located \_\_\_\_\_

\_\_\_\_\_.

Staff is introduced to this plan during orientation. Additionally, we review the plan with staff \_\_\_\_\_ (how)

\_\_\_\_\_ (how often; recommended: monthly, required: annually).

Fire extinguishers are located: \_\_\_\_\_.

All staff are trained in the use of fire extinguishers \_\_\_\_\_ (when/how often), \_\_\_\_\_ (by whom).

Gas shut-off (if applicable) is located: \_\_\_\_\_.

Electrical panel is located: \_\_\_\_\_.

Water shut-off is located: \_\_\_\_\_.

The following staff members are trained in utility control (how to turn off gas, electric, water):

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

Parents/Guardians are oriented to this plan: \_\_\_\_\_ (when, how).

A parent/guardian from each family is asked to sign that they have reviewed the plan.

We ask staff to develop their own disaster plan for home. We encourage families to do the same. Having a plan helps you be in control and decreases anxiety when a disaster occurs. Resources for developing a plan include:

- American Red Cross: [www.redcross.org](http://www.redcross.org)
- Federal Emergency Management Agency (FEMA): [www.fema.gov](http://www.fema.gov)
- Your county health department \_\_\_\_\_

## Hazard mitigation

Assuring a safe environment is an important step in disaster planning. Earthquakes, for example, can move (throw, topple or cause to jump) very heavy objects. Hazard mitigation is key to preventing injuries during a disaster as well as on a daily basis; it is done throughout the facility. Walk through all rooms and look for anything that could fall and hurt someone or block an exit. A common hazard in family home child care is a tall and heavy shelf that a young child could pull down onto themselves, with potential to crush a limb or fracture their skull.

**Hazard mitigation priorities. When reviewing areas in your home child care space, ask yourself:**

1. Are there objects here that could break and fall and hurt someone?
2. Would/could an object (furniture, light fixture, etc.) break and fall and block a primary exit from the room?

3. Would/could an object (furniture, shelf, etc.) break and fall and keep your program from opening the next day (or soon thereafter)?
4. Would/could a favorite possession break and fall and break your heart?

Knowing that our environment is ever-changing, we regularly re-assess for hazards and correct them as soon as possible. Staff members continuously review their areas to assure the environment is safe. In addition, to assure each area is viewed objectively, we ask staff to look for hazards in program areas in which they usually do not work.

The charts on the following pages track the work done to reduce any hazards in our facility. (Copy and complete one for all rooms, including classrooms, offices, hallways, storage rooms, and kitchen.)



We formally review our environment for hazards every \_\_\_\_\_ (recommended: monthly).

Hazard mitigation for: \_\_\_\_\_ (room, area)

Safety action taken	Date and comments
Tall or heavy furniture is secured to a wall stud	
Heavy objects are placed low or properly secured	
Shelves have adequate lips or strapping to prevent items from flying off in an earthquake	
Overhead cupboards have safety latches	
Chemicals and poisons are stored safely (including: out of reach of children, in closed cabinets, no bleach and ammonia together)	
Windows are made with safety glass or are adapted to prevent shattering and injury	
Evacuation/exit routes are free from hazards such as equipment, furniture, and other large objects	
All exits are unlocked or can be unlocked or locked from the inside without a key	

Ongoing room review:

Date and initials:						
Action taken:						

## Emergency/disaster supplies

☞ Suggestion: grab-and-go bag

☞ ☞ three-day supplies

### Notes about supplies:

☞ ☞ three-day supply lists were adapted from the American Red Cross disaster supply lists for schools.

☞ Supplies can be expensive. To “grow” your stock of appropriate supplies:

- ☞ Review the lists and decide which supplies are priorities at your site.
- ☞ Develop a supply rotation system that allows you to use perishable supplies in your normal operations before the expiration date. For example, buy canned food that is normally on your menu, and plan to replace and serve it every 6 months.
- ☞ Team up with another program to buy supplies in bulk.
- ☞ Request a small disaster supply fee from families or specific donations.
- ☞ Seek specific donations from the community.

### Suggestion: Grab-and-go bag for child care programs

Place a backpack somewhere you can grab it easily on the way out the door – every time your children leave your home! ☞ The backpack should be labeled for easy identification and should contain:

- ☞ Emergency forms for students and staff
- ☞ “Rescue” medications with authorization forms
- ☞ First aid kit
- ☞ Flashlight and batteries
- ☞ Whistle
- ☞ Bottle of water
- ☞ Age-appropriate snacks/infant formula

☞ Paper cups and/or infant bottles

☞ Tarp or ground cover and emergency blankets

☞ Tissues or toilet paper and/or wipes and diapers, as needed

☞ Plastic bags

☞ Age-appropriate time passers (books, crayons, paper, etc...)

### What is a grab-and-go grab-and-go bag?

- ☞ A grab-and-go bag contains essential items for an emergency.
- ☞ It includes things that you may need in the first hour or so following an emergency/disaster.
- ☞ A grab-and-go bag contains only a small portion of your disaster supplies, but is a key part of your preparedness and response.
- ☞ A grab-and-go bag should be easy to transport. A backpack (daypack) usually makes the best carrier.

### What should our grab-and-go contain?

A grab-and-go bag should include current emergency contact information, a first aid kit, any rescue\* medications with paperwork, and a flashlight. Tarps and/or blankets are also helpful for all ages. Include other items appropriate to the age(s) of children served. Make sure that you can easily carry your grab-and-go bag!

### Should the grab-and-go bag have enough formula and diapers for all infants?

No. Remember that this bag is designed to meet immediate needs for a limited time. Make sure that you have additional supplies in your three-day disaster supply kit.

### Where should we keep our grab-and-go bags?

☞ The best place to keep it is on a hook by the door that you usually use to exit (and that you are most likely to evacuate through). Your grab-and-go bag should be with you on the playground, field trips, fire drills, or any other planned or unplanned classroom departure. ☞ The grab-and-go bag should be out of children’s reach at all times. Don’t make it

too heavy – no one should be tempted to set it on the ground where it would be easily accessible to children.

**We'll have to update our grab-and-go bag from time to time, won't we?**

Absolutely. Make sure you have a system in place for keeping emergency contact information current. Check expiration dates of food, water, batteries, and any medication, and replenish those items regularly. Keep first aid supplies fully stocked.

\*Rescue medications include EpiPens® asthma inhalers, or any other medications that a specific child may need to keep him/her alive.

## Survival: Three-day supplies per 50 people

Consider what you will need if all of your enrolled children, your household members and even some neighbors ask for your help because no one can leave the area for three days.

- Most FHCC's would cut the following amounts in half to support a maximum of 25 people for three days, in the event of a disaster.

Water	Shelter
<div>FO</div> <div>RS</div> 3 gallons of water per adult <div>FO</div> <div>RS</div> (1 gallon/adult x 3 days) <div>FO</div> <div>RS</div> 1.5 gallons of water per child <div>FO</div> <div>RS</div> (1/2 gallon/child x 3 days) <div>FO</div> <div>RS</div> any tools needed to open water containers <div>FO</div> <div>RS</div> cups to dispense water Stored: _____	<div>FO</div> <div>RS</div> (2) 12' X 16' tarps <div>FO</div> <div>RS</div> (3) 10' poles <div>FO</div> <div>RS</div> (100 ft) ¼ in. nylon rope <div>FO</div> <div>RS</div> Flashlight w/ (2) extra sets of batteries per staff person <div>FO</div> <div>RS</div> blanket (fleece, wool, &/or "space") per person <div>FO</div> <div>RS</div> (5) extra blankets <div>FO</div> <div>RS</div> (30) plastic sanitation bags <div>FO</div> <div>RS</div> privacy shelter <div>FO</div> <div>RS</div> (30) rolls toilet paper <div>FO</div> <div>RS</div> (50) sanitary napkins <div>FO</div> <div>RS</div> (30) plastic garbage bags <div>FO</div> <div>RS</div> (30) rolls paper towels <div>FO</div> <div>RS</div> (750) soap towelettes packets or baby wipes <div>FO</div> <div>RS</div> (15) bars of soap <div>FO</div> <div>RS</div> (5) 5 gal plastic buckets for sanitation/emergency toilets <div>FO</div> <div>RS</div> (30) 12-hour light sticks <div>FO</div> <div>RS</div> battery-operated lanterns w/ extra batteries Stored: _____
<b>Food Emergency Food:</b>	
<div>FO</div> <div>RS</div> <div> <div>✓</div> Is easy to serve  <div>✓</div> Does not require cooling or heating  <div>✓</div> Has a long shelf life  <div>✓</div> Is stored protected from heat, cold, and pests </div> <div>FO</div> <div>RS</div> Our emergency food is part of our regular menu rotation. Food for 3 extra days is always on site. (Familiar food can be a comfort during a disaster.) It is rotated _____ (how often) by _____ (whom). <div>FO</div> <div>RS</div> We have a separate supply of emergency food. Expiration dates are checked _____ (how often) by _____ (whom). We include food for those with food allergies or on special diets. We include age-appropriate food, such as formula and pureed food for infants (when enrolled). Supplies kept with food include: <div>FO</div> <div>RS</div> Plastic dishes and utensils <div>FO</div> <div>RS</div> Manual can opener <div>FO</div> <div>RS</div> Bottles for infants Stored: _____	<div>FO</div> <div>RS</div> Special Equipment/Other <div>FO</div> <div>RS</div> Medical supplies for children with special health care needs: _____ _____ _____ _____ _____ _____ Stored: _____

## Life safety & First aid

Life Safety	First Aid
FO RS (2) laminated maps of site	FO RS masking tape
FO RS (6) hardhats	FO RS permanent marking pens
FO RS (1) am/fm battery powered radio	FO RS first aid reference book
FO RS (4) walkie talkies	FO RS assorted adhesive bandages
FO RS (4) whistles	FO RS (100) 4 in. by 4 in. compresses
FO RS (1) orange vest per staff member	FO RS (15) 8 in. by 10 in compresses
FO RS (2) shovels	FO RS (50) roll gauze bandages
FO RS tools for simple search & rescue*:	FO RS (5) triangular bandages
FO RS (1) bolt cutter	FO RS (2) sm, med, and large
FO RS (1) pry bar	FO RS cardboard splints
FO RS (1) crowbar	FO RS (20) steri-strips or butterfly
FO RS (1) pliers	FO RS bandages
FO RS (1) hammer	FO RS (5) boxes of water in sealed
FO RS (1) set of screwdrivers	FO RS containers for flushing wounds, etc.
FO RS (1) wrench	FO RS (1) small bottle bleach
FO RS (1) utility knife	FO RS (1) backboard
FO RS (1) shovel	FO RS (1) scissor
FO RS (3) rolls barrier tape	FO RS (3) tweezers
FO RS (3) rolls duct tape	FO RS (100) non-porous medical gloves
FO RS Other: _____	FO RS (5) oval eye patches
FO RS Other: _____	FO RS (7) rolls 1" cloth tape
FO RS Other: _____	FO RS (5) rolls 2" cloth tape
* For search and rescue training, contact your local emergency management agency.	FO RS (25) dust masks
Stored: _____	FO RS thermometer
	FO RS 3-day supply of critical medications, with autho- rization forms
	Stored: _____

## Administrative

Administrative Supplies	
<input type="checkbox"/> Master keys to facility and supply container(s) <input type="checkbox"/> Office supplies <input type="checkbox"/> pens <input type="checkbox"/> paper <input type="checkbox"/> tape <input type="checkbox"/> paper clips <input type="checkbox"/> clipboards <input type="checkbox"/> Signs for "Student Release" <input type="checkbox"/> (2) sets staff and student rosters <input type="checkbox"/> Emergency Contact forms	<input type="checkbox"/> Copies of all necessary forms: <input type="checkbox"/> Incident Report Log <input type="checkbox"/> First Aid Log <input type="checkbox"/> Notice of First Aid Care <input type="checkbox"/> Child Release Log <input type="checkbox"/> Child/Staff Accounting Log <input type="checkbox"/> Expenditure Log <input type="checkbox"/> Staff Time Log <input type="checkbox"/> Communications Log <input type="checkbox"/> message form  Stored: _____

☐ Our supply inventory is complete; we have obtained all needed supplies. (On-site supplies are indicated by a check in the boxes above.) We have a plan for rotating perishable items.

☐ We are continuing to gather supplies. The supplies we have on site are indicated above. We have a plan for rotating perishable items. Our plan for obtaining additional supplies is as follows:

Supplies needed	Plan to obtain	Date to be completed	Person Responsible

## Education

Staff, children, and parents/guardians must be educated about your program's disaster plan and what is expected of them in the event of an emergency or disaster. All adults should be reminded that children take their emotional cues from adults. In general, calm (at least on the outside) adults = calm children.

Staff are educated about:

- ☐ Personal preparedness, including
  - ☐ Emergency contacts
  - ☐ Home/family plan
  - ☐ Three-day supply of food and water at home
- ☐ Program's emergency/disaster plan
- ☐ Personal role in plan and responsibilities before, during & after disaster
- ☐ Safe actions in the event of a fire or earthquake
- ☐ Reducing hazards in environment
- ☐ Controlling utilities
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

We educate staff \_\_\_\_\_  
\_\_\_\_\_ (when).

Children are educated about:

- ☐ Safe actions to take in event of a fire or earthquake (if age-appropriate)
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

We educate children \_\_\_\_\_  
\_\_\_\_\_ (when).

Parents/guardians are educated about:

- ☐ The program's plan, including
  - ☐ Care provided to children in all circumstances
  - ☐ Communication in case of a disaster
  - ☐ Procedures for releasing children

• ☐ \_\_\_\_\_  
• ☐ \_\_\_\_\_

We educate parents/guardians \_\_\_\_\_  
\_\_\_\_\_ (when).

## Drills

Drills provide people with the skills and confidence necessary to respond in an actual disaster situation.

We practice three critical drills regularly to assure our staff and students are prepared to respond to emergencies:

- ☐ Fire (evacuation drill) is practiced monthly, as required by WAC
- ☐ Earthquake (drop, cover & hold) is practiced \_\_\_\_\_ (how often\*)
- ☐ Lockdown (Secure building, stay together) is practiced \_\_\_\_\_ (how often\*)
  - ☐ Lockdown is most often completed with just staff.
  - ☐ If children are included, we use these words, \_\_\_\_\_  
(Recommended: "Let's practice being together and staying safe.")
  - ☐ Parents/guardians are informed prior to the drill and informed of exactly what to expect.

All of our drills are done with the intent to learn something more. We are thoughtful of what we want to accomplish, and plan accordingly. Each time a drill is completed, we utilize the attached "Drill Record Form" to keep a history of what's been practiced, evaluate how it went, and plan for any needed changes.

Following the drill record form, we have included two sample earthquake drills and two sample lockdown drills - a year's worth of disaster drills (assuming they are done quarterly).

In addition, we practice other parts of our plan at various times of the year to assure we are ready. Typical practice could include:

- ☐ Distributing water
- ☐ Setting up shelters
- ☐ Reuniting children and their families
- ☐ Getting an "emergency" message to families, etc.

CHILD CARE/EARLY LEARNING DISASTER DRILL RECORD			
Date of drill		Time of drill	
Brief description of drill			
Objectives	Evaluation	Changes to be made	When changes are made
Name of person/licensee organizing drill			



## Response

It is helpful to know which disasters could occur in your area. The following pages provide a response guide to the particular situations listed below (in alphabetical order).

This guide is a reference for responding to an incident. Situations and sites differ – use your best judgment.

### BOMB THREAT

In the event someone calls in with a threat, check caller ID if available.

- Signal to another staff member to call 911, if able. (Write “BOMB threat” on piece of paper, along with phone number on which call was received.)
- Before you hang up, get as much information from caller as possible.

Ask caller:

- Where is the bomb?
- When is it going to explode?
- What will cause the bomb to explode?
- What does the bomb look like?
- What kind of bomb is it?
- Why did you place the bomb?

Note the following:

- Exact time of call
- Exact words of caller
- Caller’s voice characteristics (tone, male/female, young/old, etc.)
- Background noise
- Do not touch any suspicious packages or objects.
- Avoid running or anything that would cause vibrations in building.
- Avoid use of cell phones and two-way radios.
- Confer with police regarding evacuation. If evacuation is required, follow evacuation procedures.

### CHEMICAL OR RADIATION EXPOSURE

- If emergency is widespread, monitor local radio for information and emergency instructions.
- Prepare to shelter in place or evacuate, as per instructions.
- If inside, stay inside (unless directed otherwise).
- If exposed to chemical or radiation outside:
  - Remove outer clothing, place in a plastic bag, and seal. (Be sure to tell emergency responders about bag so it can be removed.)
- Take shelter indoors.
- If running water/shower is available, wash in cool to warm water with plenty of soap and water. Flush eyes with plenty of water.

### DANGEROUS PERSON

If a person at or near your program site is making children or staff uncomfortable, monitor the situation carefully, communicate with other staff, and be ready to put your plan into action.

- Immediately let staff know of a dangerous or potentially dangerous person.
- Initiate lockdown.
- Call 911 from a safe place.

If the person is in building:

- Try to isolate the person from children and staff.
- Do not try to physically restrain or block the person.
- Remain calm and polite; avoid direct confrontation.

If children are outside:

and dangerous person is outside:

- Quickly gather children and return inside and initiate lockdown procedures. If this is not possible, evacuate to designated evacuation site.

and dangerous person is in the building:

- Quickly gather children and evacuate to designated evacuation site.

If children are inside: Keep children in secure rooms or classrooms and initiate lockdown.

- Escort children to designated meeting spot outside and account for all children, staff, and visitors.
- Shut off main gas valve if you smell gas or hear hissing sound.
- Monitor radio for information and emergency instructions.
- Stay off all phones (for 3-5 hours) unless you have a life-threatening emergency.
- Call out-of-area contact when possible to report status and inform of immediate plan.
- Remain outside of building until it has been inspected for re-entry.

## EARTHQUAKE

---

Indoors: Quickly move away from windows, unsecured tall furniture, and heavy appliances.

- Everyone DROP, COVER, and HOLD.
  - Drop to floor
  - Cover head and neck with arms and take cover under heavy furniture or against internal wall
  - Hold on to furniture if under it and hold position until shaking stops
- Keep talking to children in a calm manner until safe to move.
- Do not attempt to run or attempt to leave building while earth is shaking.

Outside: Move to clear area, as far as possible from glass, brick and power lines.

- Drop and cover.

After earthquake: Account for all children, staff, and visitors.

- Check for injuries and administer first aid as necessary. Call 911 for life-threatening emergency.
- Expect aftershocks.
- Determine if evacuation is necessary and if outside areas are safe. If so, evacuate building calmly and quickly.

## EVACUATION

---

On site: Escort children to designated meeting spot, taking:

- Attendance sheets
- Emergency contact information\*
- First aid kit\*
- Critical and rescue medications (including EpiPens and asthma inhalers) and necessary paperwork\*
- Cell phone
  - Food, water, and diapers\*

If safe to do so, search all areas, (bathrooms, closets, play structures, etc.), to ensure that all have left the building.

Account for all children, staff, and visitors.

Our pre-planned, on-site evacuation place is: \*\*

Off site: Escort children to designated meeting spot.

- Search all areas, including bathrooms, closets, playground structures, etc., to ensure that all have left the building.
- Account for all children, staff, and visitors.

- Leave note at program site indicating where you are going.
- Evacuate to safe location, taking:
  - Attendance sheets
  - Emergency contact information\*
  - First aid kit\*
  - Critical and rescue\* medications (including EpiPens and asthma inhalers) and necessary paperwork
  - Cell phone
  - Food, water, and diapers\*
  - Battery-operated radio

- Once out of danger, contact parents/guardians or emergency contacts. If unable to get through, phone out-of-area emergency contact or 911 to let them know of your location.

Our pre-planned, off-site evacuation places are: \*\*

\*Include in "grab-and-go" backpack next to exit door for quick and easy access.

\*\*Circumstances of any given disaster may necessitate changing evacuation site. You are responsible for identifying an alternate location, if needed. Post evacuation location on main door to program or previously designated place.

## FIRE

Activate fire alarm or otherwise alert staff that there is a fire (yell, whistle).

Evacuate the building quickly and calmly:

- If caught in smoke, have everyone drop to hands and knees and crawl to exit.
- Pull clothing over nose and mouth to use as a filter for breathing.
- If clothes catch fire, stop, drop, and roll until fire is out.
- Take attendance sheets and emergency forms, if immediately available.

- Have staff person check areas where children may be located or hiding before leaving building.

Gather in meeting spot outside and account for all children, staff, and visitors.

Call 911 from outside of building.

Do not re-enter building until cleared by fire department.

Have a fire plan and make sure everyone is familiar with it. Practice fire drills every month!

## FLOOD

Be aware of any flood watch: flooding may occur in your area.

Flood warning: flooding will occur or is occurring in your area.

If flooding is in area:

- Determine if program should be closed.
- Notify parents/guardians to pick up or not drop off children if program is to be closed.
- Monitor radio for storm updates and any emergency instructions.

If site is in imminent danger of being flooded:

- Escort children to designated meeting spot.
- Search all areas, including bathrooms, closets, playground structures, etc., to ensure that all have left the building.
- Account for all children, staff, and visitors.
- Leave note at program site indicating where you are going.

EVACUATE to safe location on higher ground, taking:

- Attendance sheets
- Emergency contact information
- First aid kit
- Critical and rescue medications (including asthma meds, EpiPens) and forms
- Cell phone

- Food, water, and diapers
- Battery-operated radio.

Do not try to walk or drive through flooded areas.

- Stay away from moving water and downed power lines.
- Once out of danger, contact parents/guardians or emergency contacts. If unable to get through, phone out-of-area emergency contact or 911 to let them know of your location.
- If you have come into contact with floodwaters, wash hands well with soap and water.
- Throw away food that has come into contact with floodwaters.
- Consult with local health department regarding cleanup measures.

## HEAT WAVE

Limit outdoor play when heat index is at or above 90 degrees F.

- Ensure everyone drinks plenty of water.
- Remove excess layers of clothing. (Encourage parents/guardians to dress children in light-weight, light-colored clothing.)
- Keep movement to a minimum.

Be alert for signs of heat exhaustion:

- Cool, moist, pale or flushed skin
- Heavy sweating
- Headache
- Nausea
- Dizziness
- Exhaustion
- Normal or below normal body temperature

Administer first aid and take steps to cool person down and call for help, if necessary.

Heat stroke:

- Very high body temperature (more than 102 degrees F axillary)
- Hot, red skin either dry or moist from exercise
- Changes in consciousness
- Weak rapid pulse
- Rapid, shallow breathing
- Vomiting

Call 911 immediately and take steps to cool person down.

Children may not adapt to extremes of temperature as effectively as adults because they produce more heat (relatively) than adults when exercising and have a lower sweating capacity.

## LANDSLIDE OR MUDFLOW

Landslides are generally associated with heavy rainfall and rapid snowmelt.

Mudflows are fast-moving landslides that usually begin on steep hillsides. Volcanic eruption may also cause mudflows.

Recognize signs of slides:

- Unusual sounds outside, such as rumbling, trees cracking, or rocks colliding
- New cracks appearing in building
- Fences, poles, trees tilting or moving
- Evacuate, if possible.

If too late to evacuate:

- Indoors: Take cover under sturdy furniture.
- Outside: Get out of path of slide.  
Run to high ground (up hill), away from slide.  
If debris approaching, run for cover of trees or building.  
If escape not possible, curl into ball and protect head.

- Account for all children, staff, and visitors.

- Check for injured or trapped persons near slide area, but stay clear of danger and await rescue personnel.
- Stay away from slide area – additional slides may follow.
- Be alert for flooding, which may follow slide.

## LIGHTNING

### Indoors:

- Avoid use of telephone, electrical appliances, and plumbing as much as possible. (Wires and metal pipes can conduct electricity.)
- Move away from windows. Cover windows with shades or blinds, if available.

### Outside:

- Seek shelter inside an enclosed building.

## LOCKDOWN

- Lock outside doors and windows.
- Close and secure interior doors.
- Close any curtains or blinds.
- Turn off lights.
- Keep everyone away from doors and windows. Stay out of sight, preferably sitting on floor.
- Bring attendance sheets, first aid kits, pacifiers and other comforting items, and books to lockdown area, if possible.
- Maintain a calm atmosphere in room by reading or talking quietly to children.
- If phone is available in classroom, call 911 to ensure emergency personnel have been notified.
- Remain in lockdown until situation resolved.
- Notify parents/guardians about any lockdown, whether practice or real.

## MISSING OR KIDNAPPED CHILD

### Missing child

- Search program site, including all places a child may hide and nearby bodies of water.
- Contact parent(s)/guardian(s) to determine if child is with family.
- Call 911 with:
  - Child's name and age
  - Address of program
  - Physical description of child
  - Description of child's clothing
  - Medical condition of child, if appropriate
  - Time and location child was last seen
  - Person with whom child was last seen.
- Have child's information, including photo, available for police when they arrive.
- Continue to search in and around site for child.

## KIDNAPPED CHILD

- Call 911 with:
  - Child's name and age
  - Address of program
  - Physical description of child
  - Description of child's clothing
  - Medical condition of child, if appropriate
  - Time and location child was last seen
  - Person with whom child was last seen.

Have child's information, including photo, available for police when they arrive. Parent(s)/guardian(s) should be contacted by police to explain situation.

### Help prevent kidnapping:

- Do not release child to anyone other than parent, guardian, or designated emergency contact.
- Call 911 if adults or children express concern about a person at or near program site.

- Encourage parents and guardians to make you aware of any custody disputes, which may put child at risk for kidnapping.

## --- PANDEMIC FLU/CONTAGIOUS DISEASE

- Wash hands well and often.
- Remind parents and guardians that emergency contact information must be current and complete.
- Enforce illness exclusion policies for children and staff. Insist that sick children and staff stay home or go home.
- Have and follow a plan to keep ill children away from well children while they are waiting to go home.
- Keep an illness log of sick children and staff - those sent home and those kept at home.
- Close rooms as necessary due to staff illness (to maintain safe ratios).
- Reinforce teaching about good respiratory etiquette:
  - Use a tissue (or a sleeve, in a pinch) to catch a sneeze or cough.
  - Throw used tissues in a hands-free trash can.
  - Wash your hands after using a tissue or helping a sick child.
- Monitor local and state public health websites and other news media for current pandemic flu status information, recommendations, and instructions.

## --- POWER OUTAGE

Determine why power is out.

- If electrical problems are in building: Take out flashlights and prepare to evacuate.
- If severe weather caused outage:
  - Take out flashlights. (Do not use candles or any alternate lighting source with a flame.)

- Account for all children, staff, and visitors.
  - Report power outage to power company on hard-wired phone.
  - Do not call 911, except to report an emergency.
  - Turn off or disconnect any appliances, electrical equipment, or electronics that were in use.
  - Leave one light on to indicate when power returns.
- Keep refrigerator and freezer doors closed.

If weather is cold:

- Ensure everyone is wearing several layers of warm, dry clothing.
- Have everyone move to generate heat. (Lead the class in physical activity or movement games.)
- Never use oven as source of heat.
- Never burn charcoal for heating or cooking indoors.
- Only use an available generator outdoors and far from open windows and vents.

If weather is hot:

- Move to lower floors, if possible.
- Remove excess layers of clothing.
- Ensure everyone drinks plenty of water.

## --- SEVERE STORM











- Be aware of any storm watch: storm may affect area

Storm warning: storm will soon be in or already is in area

- Determine if program should be closed.
- Notify parents/guardians to pick up or not drop off children if program is to be closed.
- Monitor radio for storm updates and emergency instructions.
- Use telephone for essential communication only.

## SHELTER-IN-PLACE



Shelter-in-place means to take immediate shelter where you are (in your home). It may also mean “seal the room”—in other words, take steps to prevent outside air from coming in. This is because local authorities may instruct you to shelter-in-place if chemical or radiological contaminants are released into the environment. It is important to listen to TV or radio to understand whether the authorities wish you to merely remain indoors or to take additional steps to protect yourself and your family.<sup>2</sup>

-  Gather everyone inside.
-  Shut down ventilation system, fans, clothes dryer.
-  Close doors and close and lock windows.
-  Gather all children, staff, and visitors in room(s) with fewest doors and windows toward center of building.
-  Bring attendance sheets, first aid kits, and emergency supplies.
-  Account for all children, staff, and visitors.
-  Close off nonessential rooms. Close as many interior doors as possible.
-  Seal off windows, doors, and vents as much as possible.
-  Monitor radio for information and emergency instructions.
-  Phone out-of-area emergency contact.

## TSUNAMI

If your program is located in a tsunami hazard area:

Know:

-  Height of your street above sea level \_\_\_\_\_
-  Distance of your street from coast or other high risk waters \_\_\_\_\_



Evacuation orders may be based on these numbers.

<sup>2</sup> CDC, Retrieved from:  
<http://emergency.cdc.gov/preparedness/shelter/>



Have a plan for rapid evacuation out of hazard area.

Practice your tsunami evacuation route with staff.

Be aware of signs that a tsunami may be approaching:

-  Noticeable rapid rise or fall in coastal waters.
-  Strong earthquake lasting 20 seconds or more near the coast.

In case of strong earthquake lasting 20 seconds or more near the coast:

-  Drop, cover, and hold.
-  When shaking stops, gather children and staff and evacuate quickly to higher ground away from coast.

If you learn that an area has experienced a large earthquake, even if you do not feel shaking, listen to local radio station or NOAA Weather Radio for information from the Tsunami Warning Centers.



Tsunami warning: Tsunami expected. Full evacuation suggested.

Tsunami watch: Danger level not yet known. Stay alert for more information and prepare to evacuate.




A tsunami is a series of waves that may continue for hours. Wait for official notification before returning to site.

## VOLCANO






Monitor radio for information and emergency instructions.

-  If there is ashfall in your area, be prepared to stay indoors.
-  Evacuate if advised to do so by authorities.






Indoors:

-  Close all windows and doors.
-  Closely monitor anyone who has asthma or other respiratory difficulties—follow care plan.
-  Ensure that infants and those with respiratory difficulties avoid contact with ash.

#### Outside:

-  Cover nose and mouth.
-  Wear goggles to protect eyes.
-  Keep skin covered with clothing.
-  Avoid driving in heavy ashfall – driving will stir up ash and stall vehicles.
-  Clear roofs of ashfall. (Do not allow accumulation of more than 4 inches.)




#### Be aware that volcanoes are often accompanied by:

-  Earthquakes
-  Ashfall and acid rain
-  Landslides and rockfalls
-  Mudflows and  Ash Floods • Tsunamis


## WINDSTORM

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#### Indoors:

-  Move away from windows. Cover windows with shades or blinds, if available.
-  Consider moving to interior rooms/hall and lower  floors.

#### Outside:

-  Move indoors, avoiding any downed power lines or trees.