



## Aligning Standards

### Head Start Standards:

- Caring for Our Children basics: Disaster Planning, Training and Communication/Emergency and Evacuation Drills (9.2.4.3/9.2.4.5)
- Written Plan and Training for Handling Urgent Medical Care or Threatening Incidents (9.2.4.1)

### Caring for Our Children Basics:

#### Policies

- 9.2.4.1 Written Plan and Training for Handling Urgent Medical Care or Threatening Incidents: The program should have a written plan for reporting and managing any incident or unusual occurrence that is threatening to the health, safety, or welfare of the children, staff, or volunteers. Caregiver/teacher and staff training procedures should also be included. The management, documentation, and reporting of the following types of incidents should be addressed:
  - a) Lost or missing child;
  - b) Suspected maltreatment of a child (also see state's mandates for reporting);
  - c) Suspected sexual, physical, or emotional abuse of staff, volunteers, or family members occurring while they are on the premises of the program;
  - d) Injuries to children requiring medical or dental care;
  - e) Illness or injuries requiring hospitalization or emergency treatment;
  - f) Mental health emergencies;
  - g) Health and safety emergencies involving parents/guardians and visitors to the program;
  - h) Death of a child or staff member, including a death that was the result of serious illness or injury that occurred on the premises of the early care and education program, even if the death occurred outside of early care and education hours;
  - i) The presence of a threatening individual who attempts or succeeds in gaining entrance to the facility.
- 9.2.4.3/9.2.4.5 Disaster Planning, Training and Communication/Emergency and Evacuation Drills: Early care and education programs should consider how to prepare for and respond to emergency situations or natural disasters that may require evacuation, lock-down, or shelter-in-place and have written plans, accordingly. Written plans should be posted in each classroom and areas used by children. The following topics should be addressed, including but not limited to regularly scheduled practice drills, procedures for notifying and updating parents, and the use of the daily class roster(s) to check attendance of children and staff during an emergency or drill when gathered in a safe space after exit and upon return to the program. All drills/exercises should be recorded.



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### NAFCC Standards:

- 4.14 There is a working telephone, and emergency phone numbers are easy to access by all caregivers. Emergency phone numbers include parents' daytime numbers or the local emergency numbers for:
  - ambulance, police, and fire department
  - poison control
  - a nurse, doctor, or other medical consultant
  - an emergency back-up caregiver
  - two back-up contacts for each child
- 4.15 The provider helps children, as they are able, to learn their full names, addresses, phone numbers, and how to dial 911 using equipment that is available, accessible, and familiar to them.
- 4.26 The provider conducts monthly emergency drills and keeps a log which includes the type of drill, date, and time of drills practiced.

### Developing Skills:

- Emergency preparedness
- Practice of emergency response (fire drills, evacuations, etc.)

### Resources:

**HS Emergency Preparedness Manual (2015 edition):**

<https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/head-start-emergency-prep-manual-2015.pdf>

**Caring for Our Children (Ch. 3; Health Promotion and Protection**

<http://cfoc.nrckids.org/CFOC/Database/3>

**Child Care Aware of America**

[www.childcareprepare.org](http://www.childcareprepare.org)