



West Virginia Department of
Human Services

Emergency Plan
Child Care Center and Family Child Care Facility

Child Care Program Information				
Name of Child Care Service/Name of Location if Different				
Physical Address				
	Street address			
		WV		
	City	State	Zip Code	Telephone Number

Primary Emergency Contact at Child Care Program			
Name			Position
Telephone Number		Alternate Telephone Number	
Email Address			

Staff Assignments During an Emergency		
Assignment	Name of Staff	Title
Direct Evacuation Manager		
Alternative Direct Evacuation Manager		

Person Count		
First Aid		
Telephone Emergency Numbers		
Transportation		
Other: _____		
Other: _____		

Emergency Telephone Numbers		
Name/Company	Contact Person's Name	Telephone Number
Fire		911
Police		911
Ambulance		911
Poison Control		
Health Consultant		
Gas Company		
Electric Company		
Water Company		

Electrician		
Plumber		
Child Protective Services		
Licensing Specialist/ Child Care Regulatory Specialist		
Relocation Site #1 (See Page 6 for Details)		
Relocation Site #2 (See Page 7 for Details)		
Red Cross		
Physician(s)		
Dentist(s)		
Hospital(s)		
Other: _____		
Other: _____		

Types of Disasters Most Likely to Occur In or Around the Program Area

Disaster Type	Describe how each disaster might affect the child care program
Fire	
Flood	
Wildfire	
Severe Winter Weather	
Hazardous Material Spill	<i>(Listen for Emergency System on evacuation or shelter in place instruction)</i>
Hostage/Active Shooter	<i>(Listen for Law Enforcement instruction)</i>
Other:	
Other:	

Exit Locations		
Post a floor plan showing exit path at each room exit. Attach a copy(ies) to this plan.	Exit path copies attached?	Circle one: Yes No

Utility Shut-off locations			
Name of Utility	Location	Name of Utility	Location
Electricity		Gas	
Water		Other:	

Disaster Plan Coordination Name and Phone Number	
If the program regularly picks up children from other locations (schools, church programs etc.,) list phone numbers and contact names at the pick up location.	
Local Emergency Management Officials	
Businesses	
Schools	
Churches	
Child Care Resource and Referral Agency	

Others:	
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Communications	
Describe how program staff will be trained on disaster plan procedures.	
Describe how parents will be notified of the emergency or relocation. Include plans for reunifying parents and children. (A copy of page 6 of this plan must be provided to parents annually)	
Describe how the program will coordinate with local emergency management officials.	

Describe disaster plan procedures to address the needs of individual children, including children with special needs, infants, etc.	

Completion Date and Annual Review	
Date the Emergency plan was completed	
Date the emergency plan will be reviewed and updated	

Continuity of Operations - Procedures for Maintaining Essential Functions	
Describe how will you ensure essential functions can be maintained so children are safe and healthy during an emergency:	
Toileting/Diapering	
Feeding	
Sleeping	
Engagement (age-appropriate play materials, books, toys, etc. so that children can be engaged in play during an emergency).	

Relocation Site#1 for Disaster or Emergencies

Location to which you and the children will evacuate nearby – Include a simple map of route as well as directions.

Name of facility				
Facility Address				
	Street address			
		WV		
	City	State	Zip Code	Telephone Number
Directions to facility				

Relocation Site #2 for Disaster or Emergencies

Location to which you and the children will evacuate out of the immediate area – Include a simple map of route as well as directions.

-- Relocation Site #2 needs to be a further distance away than Site #1.

Name of facility				
Facility Address				
	Street address			
		WV		
	City	State	Zip Code	Telephone Number
Directions to facility				

In the event the facility must be evacuated because of an emergency in the immediate are the children and staff will be transported by _____ to:

If necessary, children will be transported to this health care facility:

Facility Address				
	Street address			
		WV		
	City	State	Zip Code	Telephone Number

Directions to facility	
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