

# Division of Early Care and Education



**SC Child Care**  
EARLY CARE & EDUCATION

## Registered Family Child Care Home Emergency Plan Template

*Child Care Licensing has developed this template to serve as a model to assist Registered Family Child Care providers in developing their own emergency plan. Fill in the blanks with information that applies to your child care facility to create your emergency plan.*

Visit us on the Web at: [www.schildcare.org](http://www.schildcare.org)

**Regional Office Phone Numbers**

<b>Region 1 (Upstate):</b>	<b>864-250-5576</b>	<b>or</b>	<b>1-800-637-8550</b>
<b>Region 2 (Midlands):</b>	<b>803-898-9001</b>	<b>or</b>	<b>1-888-202-1469</b>
<b>Region 3 (Low Country):</b>	<b>843-953-9780</b>	<b>or</b>	<b>1-800-260-0211</b>
<b>Region 4 (Pee Dee/Grand Strand):</b>	<b>843-661-6623</b>	<b>or</b>	<b>1-800-464-9138</b>
<b>Central Office:</b>	<b>803-898-9020</b>	<b>or</b>	<b>1-800-556-7445</b>

**EMERGENCY LINE: 1-888-825-7174**

**DISASTER RESPONSE E-MAIL:  
[childcare.disaster.response@dss.sc.gov](mailto:childcare.disaster.response@dss.sc.gov)**



## Emergency Plan for

Provider: \_\_\_\_\_ Phone (with Area Code): \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## 1 Emergency Phone Numbers

Title/Agency	Contact Name	Phone Number
Emergency	N/A	911
Police (non-emergency)		
Fire (non-emergency)		
Poison Control		
Local Health Dept.		
Building Inspector		
Dept. of Social Services		
Licensing Specialist		
Alternate/Evacuation Site		
County Emergency Management		

## 2. Medical Emergencies

A. List any medical emergencies that would require immediate attention by a health care professional or cause you to call 911. (A list of possible medical emergencies is provided in section II A of the “Child Care Emergency Plan Guidelines,” which is available at [www.schildcare.org](http://www.schildcare.org).)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. List the steps you will follow in a medical emergency: (A sample of these steps is provided in Section II B of the “Child Care Emergency Plan Guidelines” which is available at [www.schildcare.org](http://www.schildcare.org).)

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3. Evacuation Plans

***In-Place Evacuation:*** Where in your house will you take children during a tornado, storm, or other emergency that does not make you leave the house? \_\_\_\_\_

***On-Site Evacuation:*** Where on your property will you take children if there's a fire or other emergency that makes you evacuate your home? \_\_\_\_\_

***Relocation Site:*** (if you need to move children to a place close by)

Name of Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please call your county emergency management agency to find out where your Evacuation Shelter and Radiological Evacuation sites are located.**

***Evacuation Shelter Site:*** (If officials tell you to evacuate due to a disaster)

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

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

***Radiological Evacuation Site:*** (Complete this section if you are within 10 miles of a nuclear power plant)

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

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

4. In case of an evacuation, a sign with the relocation site and address will be posted at this location of my home: \_\_\_\_\_

5. Briefly describe the procedures you will follow for the safe and prompt evacuation of infants, toddlers, and special needs children: \_\_\_\_\_

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

6. Briefly describe the procedures you will follow for releasing children to authorized adults. Include safeguards to prevent the inappropriate release of a child to an unauthorized person:

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

7. Evacuation Checklist

<i>Item</i>	<i>Check-off</i>
Contact List for Children’s Families	
Children’s Emergency Information	
Medications/Medical Supplies	
Charged Cell Phone	
First Aid Kit	
Flashlights w/ extra batteries	
Battery operated radio w/ extra batter-	
Hand Sanitizer/Cleansing Agent/ Disinfectant	
Wet Wipes and Tissues	
Disposable Cups	
Water and Non-Perishable Food	
Diapers for infants	
Formula for infants	
Blankets	
Vehicle Keys	

8. The hospital children will be taken to if they are injured is:  
\_\_\_\_\_

9. The method of transportation to be used in an emergency is: \_\_\_\_\_  
\_\_\_\_\_

***Reminder: Take the child’s emergency medical information with him/her to the hospital and stay with the child at the hospital until the parent/guardian arrives.***

**Location of First Aid Kit:** \_\_\_\_\_

**Location of Fire Extinguisher:** \_\_\_\_\_

**Location of Electricity Shut-Off:** \_\_\_\_\_

**Location of Gas Shut-Off:** \_\_\_\_\_

**Location of Water Shut-Off** \_\_\_\_\_

In all emergency situations, child care staff will:

- ***Pay attention to warnings***
- Remain with the children throughout the event
- Check attendance every time the children are relocated
- Take any necessary medications and emergency supplies with them during an evacuation
- Take the children's emergency records with them during an evacuation
- Take a cell phone if available to use for notifying parents/guardians