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EMERGENCY PREPAREDNESS AND RESPONSE PLAN (Subsidy Requirements for Family Day Homes 22VAC40-665-400) Name of Family Day Home

| | ed to Alert Caregivers and Occupants of Emergency: |
|------------|--|
| | |
| Methods to | Alert Emergency Responders After Evacuation (who calls 911/how): |
| | |
| | Ensure Everyone Arrived at Safe Location and is accounted for (using daily attendance sheet, room searches and head counts, etc.): |
| | |
| someone m | Ensure Children's Safety and Supervision at Assembly Point: (who will supervise children while eets emergency responders; how will emergency supplies such as blankets, medications, water, protection from rain/snow be readied and how will these supplies be made available at the assemb |
| | |
| | |
| Methods to | Ensure Children's and Staff's Emergency Contact Information is Available After Evacuation: |

| ethods to Contact Parents After Evacuation: ethods to Ensure Children are Released Only to Parent or Designated Person | |
|---|--|
| ethods to Ensure Children are Released Only to Parent or Designated Person | |
| ethods to Ensure Children are Released Only to Parent or Designated Person | |
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| ethods to Ensure Children are Released Only to Parent or Designated Person ——————————————————————————————————— | |
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| | |
| ame, Address, and Telephone Number of Person to Provide Emergency Back | kup Care (must be 18 years o |
| d be able to arrive at the home within 10 minutes): | |
| | |
| | |
| | |
| | |
| EVACUATION (The following procedures will be followed if evacuation is torms, flooding, tornadoes, loss of utilities, earthquakes, intruders, violence pills, and facility damage or situations that may require evacuation. Evacuat f the home). Evacuation drills will be conducted monthly and recorded on the clace, and Annual Lockdown Drill Record. | on or near the premises, chen tion routes are posted near the |
| uce, and Annual Lockdown Drui Necora. | |
| imary Route to Exit the Home: | |
| | |
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| | |
| | |
| | |
| econdary Route to Exit the Home: | |
| econdary Route to Exit the Home: | |
| econdary Route to Exit the Home: | |
| econdary Route to Exit the Home: | |
| | |
| econdary Route to Exit the Home: Designated Safe Assembly Point Outside the Home: | |
| | |

| | l Form Page 3 of 7 | | | |
|-------------------|--|---------|--|--|
| Me | ethods for home containment: | | | |
| | | | | |
| | | | | |
| sev dar the | SHELTER IN PLACE (The following procedures will be followed if shelter-in-place is necessary dusevere storms, tornadoes, earthquakes, intruders, violence on or near the premises, chemical spills, and damage or situations that may require shelter-in-place. Shelter-in-place procedures are posted near the the home). Shelter-in-place drills will be conducted twice annually and recorded on the <i>Monthly Evacus Shelter in Place, and Annual Lockdown Drill Record</i> . | | | |
| De | esignated Safe Location Within the Home: | | | |
| | | | | |
| | | | | |
| No saf | ote: The children and the provider will remain in the home until recued or notified that corfe. | ndition | | |
| Pri | Primary Route to Safe Location: | | | |
| | | | | |
| _ | | | | |
| Se | condary Route to Safe Location: | | | |
| | | | | |
| | | | | |
| _ | | | | |
| Pro | ovisions for transporting children to the shelter if necessary: | | | |
| Pro | ovisions for transporting children to the shelter if necessary: | | | |
| Pro | ovisions for transporting children to the shelter if necessary: | | | |
| _ | ovisions for transporting children to the shelter if necessary: ocation of shelter-in-place supplies: | | | |

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| | LOCKDOWN (The following procedures will be followed if lockdown is necessary due to a situation where children need to be isolated from a security threat and access within and to the home needs to be restricted; or other situations that may require lockdown). Lockdown drills will be conducted annually and recorded on the <i>Monthly Evacuation, Shelter in Place, and Annual Lockdown Drill Record</i> . | | | |
|--------|---|--|--|--|
| | Designated Safe Location Within the Home: | | | |
| | | | | |
| | Note: The children and the provider will remain in the home until rescued or notified that conditions as | | | |
| | Primary Route to Safe Location: | | | |
| | | | | |
| | Secondary Route to Safe Location: | | | |
| - - | | | | |
| | Provisions for transporting children to the shelter if necessary: | | | |
| | | | | |
| | | | | |
| | Methods to contact parents, guardians, and emergency contacts with alternate plans if different instructions received from emergency personnel: | | | |
| | | | | |
| | | | | |
| | Location of shelter-in-place supplies: | | | |
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E. RELOCATION (The following procedures will be followed if relocation is necessary due to fire, severe storms, flooding, tornadoes, loss of utilities, earthquakes, intruders, violence on or near the premises, chemical

| Designated Relocation Si | te Away from the Area of the Home: |
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| Mathed Hard to Alant Co | toff Children and Occurrents of Emperors |
| Method Used to Alert St | taff, Children, and Occupants of Emergency: |
| | |
| | |
| Method to Alert Relocat | tion Site. |
| —————————————————————————————————————— | ion site. |
| | |
| | |
| Method to Transport Ch transportation resources, | ildren and Staff to Relocation Site (prior arrangements made for emergency, if necessary): |
| | |
| | |
| Method to Alert Extra Tr | ransportation Providers: |
| | |
| | |
| Methods to Ensure Ever searches and head count | ryone is Moved to Relocation Site (using daily attendance record, performing room as): |
| | |
| | |
| Primary Route to Reloca | ation Site: |
| | |

Page 6 of 7 Secondary Route to Relocation Site: F. ADDITIONAL INFORMATION: Location of Mobile emergency kit supplies: *Supplies appropriate for the ages of the children in care will be maintained as part of the mobile emergency kit. Emergency supplies will be checked monthly and recorded on the evacuation drill form. Methods to for contacting poison control, health department, local media, etc.: Accommodations or special requirements for infants, toddlers, and children with special needs: Methods to ensure essential documents to include attendance record, parent contact information and special health supplies are carried to the designated assembly points: Methods for continuing operations during an emergency:

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|---------------------------|--|
| Other special procedures: | |
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| | |
| Date Plan Prepared | Provider's Signature |
| Data of Amm | val Dian Daviers |
| Date of Annu | ual Plan Review |
| Plan Updated Yes No | If yes, date assistant and substitute provider trained |
| | |
| Provider's Signature | |