

YOUR GUIDE: Preparing Child Care for Emergencies

Are You Ready?

Children's Services ensures access to a coordinated, diverse range of affordable quality services and supports for young children and families. Children's Services, Community Services, Niagara Region. For more information call 905-984-6900.

Niagara  **Region**
COMMUNITY SERVICES

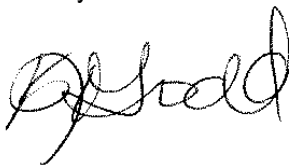
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Many parents consider child care as an essential service. Although child care may enable them to continue to work in the event of an emergency situation, it is equally important that parents know that their child care is equipped to deal with an emergency and that their children's safety is a priority and remains paramount at all times. There are many types of emergencies that could occur in Niagara, such as floods, tornadoes, utility disruptions as well as global threats such as a flu pandemic. In all cases, you and your child care staff can play a role in keeping children safe by being prepared.

This emergency response planning resource has been designed to assist child care service providers with a step-by-step approach to creating an Emergency Response Plan, including a Pandemic Plan, for your centre. If your centre already has such a plan, it is important to update it on a regular basis and as such some of the information contained in this resource may assist you to do so. Considering the current global H1N1 Flu Pandemic, specific attention has been given to pandemic planning. In recognition that not all child care operators have resources available for emergency readiness planning, Children's Services have endeavoured to consult the experts, including local child care operators on best practices and their own emergency readiness plans, in order to provide you with a practical approach and easy to use materials to assist your efforts.

We hope that you find this information valuable as your centre and staff prepare or update your own plans to be able to respond to emergency situations that may occur at or in and around your child care centre that will ensure peace of mind for parents and safety for the children in your care.

Thank you



Kathryn O'Hagan-Todd
Director, Children's Services
Niagara Region

For additional assistance with emergency response planning related to child care please call 905-984-6900 ext. 3803.

For more information on H1N1 call Niagara Region Public Health H1N1 Hotline at 905-688-8248 ext. 7950. To sign up for instant email alerts on the status of H1N1, visit: www.niagararegion.ca

PURPOSE

This Emergency Response Plan consists of 3 sections:

1. **USER GUIDE** – sets the ground for creating an Emergency Response Plan by:
 - assisting users to identify who is in charge of certain preparations and procedures;
 - preparing users for likely emergencies;
 - asking the user specific questions to think of how to handle emergency situations.
2. **PROCEDURES MANUAL** – tells the user exactly what to do in specific emergency situations with:
 - details on who should do what;
 - instructions on when to stay and leave the centre;
 - information to help users identify who makes decisions in different situations.
3. **TEMPLATES** – allows users to pick and choose applicable templates to fill out to create their own emergency plan regardless of the size of their child care program.

This Emergency Response Plan is available in Microsoft Word in order to allow you to be able to edit the templates to fit the need of your child care program. Once you have customized the templates with information related to your child care program, it is suggested you print off and place into a 3 ring binder so that:

- Materials can be easily updated as future information becomes available.
- Templates can be easily removed, copied as required and returned to the binder.
- Program Providers can add other information that is related to their Emergency Response Plan such as related emergency plans (if child care centre is located in a school or community centre), emergency related policies, and updated information such as contacts and lists as information becomes available.

This document is based on a review of extensive documentation from other child care facilities in Canada and other countries which have specifically addressed child care as an essential service in their Emergency Response Plans. This Plan also incorporates the roles and requirements of the Region of Niagara Community Services Emergency Response Plan and the Niagara Region Public Health Pandemic Plan.

Note: This document uses the term “child care facility.” This is an all encompassing term which includes all types of child care programs.

Important Icons to look for throughout the 3 sections which make up the Emergency Response Plan:



Indicates an important fact or procedure that you should pay close attention to.



Indicates to look in the templates section for a template to help you complete the task.



Indicates a good idea that you may want to use in your child care facility.



Indicates information is outlined in the Day Nurseries Act.

http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_90d02_e.htm

Or Day Nurseries Act for Child Care Supervisors of Ontario's interactive website:

http://childcarelearning.on.ca/child_care_setting/?room=17

NOTE OF IMPORTANCE:

This Emergency Response Plan has been developed as a recommended tool that child care facilities can use to create their own Emergency Response Plans. **Niagara Region will not be responsible for your use of this tool. If you decide to use this tool, you are agreeing that you will not have or make a claim against Niagara Region under any theory of law for any type of damage or loss.** You may already have similar policies, procedures, and forms that you use. You may choose to keep what you have, modify them or use what is presented here. You should cross check your child care program's current policies and procedures to ensure that anything that is utilized from this Emergency Response Plan is consistent with what your child care facility may already have in place. Any procedural information that you plan on implementing from this Emergency Response Plan should be brought forward to your Authority in Charge (Board of Directors, etc.)

Upon reading this guide you should be able to:

- Explain why your child care facility should have an Emergency Response Plan;
- Identify the most likely emergencies to occur in your area;
- Assign staff responsibilities in preparation of emergencies;
- Decide on evacuation sites;
- Be prepared for communication problems;
- Identify what contact information you need from staff and parents;
- Know how to protect your records and resources; and
- Explain a pandemic and why it is particularly important to plan for it.

Table of Contents

<u>Title</u>	<u>Page #</u>
Introduction	7
The Role of Niagara Region Children’s Services	8
Types of Emergencies/Disasters Your Child Care Program May Face	9
Identifying and Learning about Emergency/Disasters	10
Getting Started	14
How to Prepare for Communication Problems	15
Collecting Essential Information	16
Protecting Vital Records & Resources	18
Assigning Responsibilities	19
Evacuation	20
Sheltering	21
Snow & Ice Storms	22
Utility Disruption	22
Power Outages	23
Boil Water Advisory	23
Lightning & Thunder	24
Hurricanes & Tornadoes	24
Floods	25
Earthquakes	26
Fire	26
Hazardous Materials	27

Terrorism, Bomb Threats, Threatening Calls or Messages, Suspicious Articles & Potentially Violent Situations	28
Missing Child	28
Lockdown	29
Children with Special Needs	29
Influenza Pandemic	30
Business Continuity	40
Serious Occurrence Reporting	41
Communicating with the Media	43
Training	44
Keeping Your Emergency Response Plan Current	44
References	45

INTRODUCTION

Child care is a fact of life for most families in Niagara. Parents and employers rely on child care to protect the health, safety and well being of children so that businesses and organizations can continue to function during and after a disaster or emergency occurs. Child care is an essential service.

Why Plan for Emergencies?

Child care programs are particularly vulnerable to the impacts of a disaster or emergency for a number of reasons:

- The young age of children;
- Small in comparison to corporations;
- May have limited resources and support for planning and particularly recovery after a disaster has occurred;
- Located in one area and cannot spread the impact of the disaster over a larger geographic area; and
- Most centres rely on only a few local suppliers of goods and services that also can be affected.

Child care providers should be prepared to deal with emergencies in order to:

- Save children's lives;
- Save staff members' lives;
- Protect the program's property and other assets that may be impossible to recover after a disaster; and
- Enable programs to deliver essential child care services for first responders and essential service workers.

PREPARING FOR EMERGENCIES/DISASTERS

All child care facilities regardless of size, type, or who runs them should develop an Emergency Response Plan.

Child care centres should help their employees plan for their own families and transporting children should an evacuation be necessary.

Centres that are located in schools need to be part of the school's or school system's Emergency Response Plan.

Pandemic planning requires special considerations. In the event of a flu pandemic, child care has been deemed an essential service in order to accommodate parents that work in the essential services field. A section of this Emergency Response Plan is dedicated to pandemic planning in order to help you prepare for a flu outbreak.

ROLE OF NIAGARA REGION CHILDREN'S SERVICES

As the Consolidated Municipal Services Manager responsible for child care system management in Niagara, the role of Children's Services in relationship to emergency planning and child care is to:

- Assist child care providers with preparing emergency plans.
- Assist with key messaging for parents and families for certain emergencies such as pandemic.
- Represent the child care community within Community Services and Niagara Region emergency response planning.
- Provide a system for communicating with most, if not all, licensed service providers in the Niagara Region in the event of an emergency.
- Provide direction to child care service providers on emergency planning and represent the child care community in emergency planning at the Regional level.
- Offer suggestions for training, identify resources and other information related to health & safety.
- In the event of a pandemic, act as a link between Public Health and the child care community, and assist child care in planning for parents who are essential workers.
- Coordinate with identified child care providers for essential service staff in the event of an outbreak such as a pandemic.
- Help child care providers protect their child care businesses during and after emergencies.
- Help restore the quality and quantity of child care in a community after an emergency occurs.



TYPES OF EMERGENCIES/DISASTERS YOUR CHILD CARE PROGRAM MAY FACE

Emergency planning is difficult because of the number of different types of emergencies and disasters that can occur.

Some emergencies are more common or likely to occur, such as a flood or snowstorm, while others such as a bomb threat, are rare.



Furthermore, some emergencies can occur at a national and global level such as flu pandemic where the response to the emergency may require plans to be modified as new information develops. Such emergencies require a coordinated community plan which includes ensuring the availability of child care – a vital part of a community’s ability to continue to deliver essential services.

It is fair to say that all child care programs, regardless of where they are located, face some risk from natural disasters. Part of the process of developing emergency readiness is identifying what types of emergencies or disasters could occur in your community and what you can do to prepare for it. Although there are some similarities in the plans you will make for each type of disaster, some require special preparations.

Types of Emergencies/Disasters

Natural	Technological	Human
Severe Weather	Electrical Outages	Terrorism
Snow and Ice Storms	Loss of Water	Sabotage
Tornados	Flooding (broken pipe)	Bomb Threat
Floods	Gas/Heat Outage	Explosion
High Winds	Fires	Criminal – Robbery
Wild Fires/Forest Fires	Exposure to hazardous materials	Criminal – Sabotage
Earthquake	Structural Failure	Work Stoppage – strike/walkout
Infectious Disease Outbreak/Epidemic	IT Failure/Sabotage	Civil Disorder

IDENTIFYING AND LEARNING ABOUT DISASTERS/EMERGENCIES

You may need to do some research about the area in which your child care is located to learn more about the type of natural disasters that are likely to occur. Although they may not have happened in the past, there may be indicators that such a threat could exist and should be considered in your emergency plan. Also keep in mind that some disasters can have cascading effects, such as the ice storm in Quebec that resulted in large scale power outages and loss of water which resulted in the relocation of many families to shelters.

Knowing When They May Occur

Many disasters occur without warning which is why having an Emergency Response Plan and knowing it is critical. However, there may be times, such as with a winter storm, that there is some advance notice. Knowing where to get information such as weather forecasts should be part of your plan.

Sources of Information:

The Weather Network: www.theweathernetwork.com/

Niagara Region Public Health Up-to-date Pandemic Information: www.niagararegion.ca

Canada's national influenza surveillance system:
www.phac-aspc.gc.ca/fluwatch/index-eng.php

Step 1 - Know the Risks. Know your Region.

On the following page, Table 1 contains natural risks, technical disasters and human threats. On the left hand side of Table 1, check off those that are most likely in your community.

Table 1. Knowing Your Risks

Potential Risk/Threat	Probability H/M/L	Impact H/M/L	Priority Order
Natural Disaster/Emergency			
<input type="checkbox"/> Severe Weather			
<input type="checkbox"/> Snow and Ice Storm			
<input type="checkbox"/> Tornado			
<input type="checkbox"/> Flood			
<input type="checkbox"/> High Winds			
<input type="checkbox"/> Wild Fires			
<input type="checkbox"/> Earthquake			
<input type="checkbox"/> Infectious Disease Outbreak/Epidemic/Pandemic			
<input type="checkbox"/> Other			
<input type="checkbox"/> Other			
Technical Emergency/Disaster			
<input type="checkbox"/> Electrical Outage			
<input type="checkbox"/> Loss of Water (Contamination)			
<input type="checkbox"/> Flooding (broken pipes)			
<input type="checkbox"/> Gas/Heat Outage			
<input type="checkbox"/> Fires			
<input type="checkbox"/> Exposure to Hazardous Materials			
<input type="checkbox"/> Structural Failure			
<input type="checkbox"/> IT Failure			
<input type="checkbox"/> Other			
Human Threat			
<input type="checkbox"/> Terrorism			
<input type="checkbox"/> Sabotage			
<input type="checkbox"/> Bomb Threat			
<input type="checkbox"/> Explosion			
<input type="checkbox"/> Criminal - robbery			
<input type="checkbox"/> Criminal – vandalism			
<input type="checkbox"/> Criminal – sabotage			
<input type="checkbox"/> Work Stoppage – Strike/Labour Walkout			
<input type="checkbox"/> Civil Disorder			
<input type="checkbox"/> Other			

Step 2 - Knowing About Your Risks

Table 1 contains natural, technological and human risks or threats.

1. For those emergencies/disasters you checked above, ask yourself “What is the probability of this risk occurring”? Assign either a **High** (very likely), **Medium** (somewhat likely) or **Low** (not very likely).
2. For each disaster that you have checked, ask yourself “What is the impact should this occur”? Assign either a **High** (would have catastrophic impacts), **Medium** (significant impacts) or **Low** (limited impacts).
3. For each of the potential risk/threat you have checked, go through and prioritize them according to their probability and impact.

Step 3 - Learning About Your Risk

The next step involves learning more about what each disaster means for child care. Complete Table 2 on the following page, titled “Learning about Common Emergencies & Disasters” for each type of disaster you have identified as a first step to developing more detailed plans. The template asks the following questions:

1. Describe the disaster
2. Why is it important to prepare for this type of disaster?
3. How will the child care facility know when this type of disaster is going to occur?
4. What should a child care facility do to protect lives and property during this type of disaster?
5. What should a child care facility do after this type of disaster?

By considering these questions, you will start to begin thinking of preparing for specific emergencies as well as the repercussions that can result.

Table 2. Learning about Common Disasters

<p>Emergency/Disaster Type</p>	<hr/> <p>Category: <input type="checkbox"/> Natural <input type="checkbox"/> Technological <input type="checkbox"/> Human Probability Rating: <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low Impact Rating: <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low</p>
<p>Describe the disaster/ emergency in your own words</p>	
<p>Why is important to prepare for this type of emergency/ disaster?</p>	
<p>How will your child care facility know when this emergency is going to occur or how will you get information during this emergency?</p>	
<p>What should your child care facility do to protect lives and property during this type of emergency?</p>	
<p>What should your child care facility do after this type of disaster?</p>	

GETTING STARTED...

As a first step, establish an Emergency Response Team that includes employees, parents and others with knowledge of, or are responsible for, critical operations.

The following are some general guidelines for all child care facilities to reduce the impact of a disaster:

- Regularly monitor for possible threats or hazards.
- Regularly clean and check heating, cooling, gas and electrical systems. Check that they are in good working order.
- Conduct monthly fire evacuation drills, check smoke alarms and carbon monoxide detectors.
- Ensure fire extinguishers are properly charged, mounted and easy to reach in case of fire.
- Be sure staff know how to use a fire extinguisher properly.
- Ensure that you have a facility floor plan with evacuation routes, shelter areas, fire alarms, and fire extinguishers labelled.



Insurance for Your Child Care Centre

According to the Day Nurseries Act (DNA), every operator shall ensure that a policy of insurance is obtained and maintained for their child care facility. Insurance should include comprehensive general liability and motor vehicle coverage for all vehicles owned by the operator.

HOW TO PREPARE FOR COMMUNICATION PROBLEMS

There may be disasters that occur where phone lines are not operating or cell phone lines can be jammed or inoperable due to large number of calls. If staff and/or families have had to evacuate the area, it may not be possible to reach them via home or cell phone.

Some ways to prepare for problems in communicating with staff and parents include:

- Collect the phone numbers for each staff member – home, cell, spouse's place of work, out of town contact, etc.
- Obtain a voice mail or an answering machine so that a recorded message can be left to provide staff and parents with the information they need during a disaster or after.
- Obtain a programmable phone so calls to the program's phone number can be forwarded to a phone out of the area or voicemail can be checked remotely.



Provide wallet contact cards for staff members and parents to carry with the most important contact information as well as evacuation locations.

- Identify a predetermined meeting place to help parents and staff find one another in the event of a total communication failure.
- Let staff and families know which radio and television stations or websites they can access to get information in the event of an emergency.

Employee Information

Having an accurate and complete list of information on the staff of a child care program is critical during any type of emergency. During emergencies, a program must be able to reach staff members at any hour of the day. If a telephone tree has been set up, calling can be done quickly and remotely from the centre which may be necessary in the event of a disaster that occurs at the centre.

COLLECTING ESSENTIAL INFORMATION

Licensing requires that programs keep certain information on the children and families that are enrolled. However, this information may not be enough in the event of an emergency. In particular, should a disaster strike an area where the centre is located, this information may be lost or inaccessible.

Parents may be injured or evacuated from either their home or place of business and may not have access to phone lines.

In addition to updated health information (allergies, medication, etc.), to ensure that parents, or another responsible adult can be contacted, programs should consider collecting and *maintaining* the following information on each child enrolled:

- Parent or guardian's contact information:
 - Work phone number
 - Home phone number
 - Cell phone number
 - Home email address
 - Work email address
 - Supervisor's work phone number and email
- The names, cell phone numbers, home phone numbers, and emails of two local emergency contacts per child/family (preferably individuals that do not live or work with the parents).
- The name, work phone number, home phone number and email of two emergency contacts who live *outside* of the area (preferably individuals, such as grandparents, aunts or uncles, who would assume responsibility for the child if the parents were unable to do so).



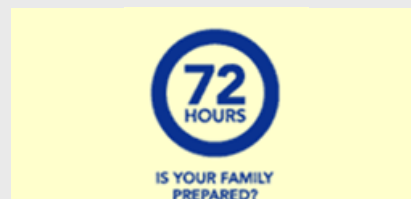
Consider scanning important paper documents (i.e. staff contact information, emergency procedures) into an electronic file or type-up emergency contact information into electronic files. Email them to yourself at an email address which is accessible from any computer. In the event of an emergency you will be able to access important information from virtually anywhere. Only email yourself documents that are public. Do not send any confidential information.

It may be difficult to get parents to provide the type of information that is required.

Consider collecting it as part of the regular registration and explain why it is important. Every six months you should ask parents to update their contact info.

As part of emergency planning, parents should be encouraged to think about their own family emergency plans. They may be more cooperative if they learn how your centre has prepared to keep their child safe during an emergency or disaster.

Personal Emergency Plan



Visit www.getprepared.ca

Other Emergency Contacts

Before, during and after an emergency, your program will need to be in contact with other organizations in your community. Some of these will be emergency contacts required as part of your licensing requirements. However, a disaster or a flu pandemic has other implications that should be considered as it relates to contact you may require.



A template is provided to guide you in completing your emergency contacts list. Once you have completed the template:

- Keep a copy of the list in each room of your facility and at the front desk.
- Put a copy in your Evacuation Kit and ensure staff have their own copy.
- Ensure the Board of Directors and supervisory staff have copies for their car, their home and their office.
- Send an email version of the list to yourself and someone outside of your area.
- Place a copy of emergency contacts by each phone.

Consider contacting some of the critical organizations on your emergency list before an emergency. Let them know there are young children you are caring for in your centre and that special help may be required should an emergency occur.

Keeping Track of Who is in the Facility

As part of an emergency plan, it is critical that you have a way of knowing who is in your building at all times. Knowing who is in the building prevents leaving a child or adult behind particularly when time may be critical.

An attendance form and sign-in sheet are useful. Requiring visitors and staff sign-in can go a long way to protecting the health and safety of anyone in your building during an emergency.

It is important that these attendance forms are easy to locate and are up to date.

Back-Up Supplies and Equipment

During an emergency, you may need to keep children and staff in the facility for an extended period of time.

For the purposes of emergency planning, you must consider that you will need to operate for as long as 72 hours *without* outside assistance. As well, you must consider what supplies you may need should there be no electrical power, heat, water and telephone service during this period.



There is a checklist of recommended supplies required for child care included in the templates section that accompanies this guide. You should do the following as part of your planning:

- Review the list and add any additional items you think your child care facility may require to operate for 72 hours.
- Consider the requirements of any special needs of children and staff.
- Store your kits in an area where they are likely to be accessible and unlikely to be damaged.
- Organize your supplies and equipment for a disaster into **two** kits – one for situations in which the staff and children have to remain in the facility (shelter-in-place) and one for evacuations.
- Make all staff aware of the location of the shelter kit and evacuation kit.
- For your Evacuation Kit, you may want to store supplies in backpacks so that staff can easily carry while possibly carrying children.

PROTECTING VITAL RECORDS & RESOURCES

Most programs would find it very difficult to operate without access to critical records and documents. As well, due to licensing, certain records containing information about children and employees is required to be available at all times. Depending on your facility, some or all of this information may be on computer. Some or all may be in paper files.

In addition to this information, you likely have other records, such as insurance policies, rental agreements, service agreements, building plans, floor plans, bank account records, supplier contracts and inventories and any other records that are vital to operating your program.

In an emergency, it is possible that a computer could be damaged or inaccessible particularly if electricity supply is interrupted. Likewise, paper copies could be destroyed and the information completely lost.



You will need to decide what information you would need to continue to operate and how you will ensure it will be available in different situations. Consider the following:

- What information would staff need to take with them during an evacuation?
- What information would you need to have access to if you had to operate from a remote site?
- What information would you need in order to meet licensing requirements?
- What information would be required in order to support an insurance claim if property, equipment and supplies were damaged or lost?
- How would computer records be backed-up? What would happen if computers were damaged or destroyed during a disaster?
- How would you back up the basic operating systems and reload critical software if necessary?

How to be Prepared

To ensure the records, documents and computer files the program needs to operate will continue to be available in different types of situations, you could do the following:

- Keep a copy of all important records and papers in a waterproof, fireproof, portable container.
- Make copies of all important documents, operating manuals, inventories, etc. and store them at an off-site location out of the area.
- Back-up all computer files regularly and send an electronic copy to a computer outside of your area.
- Keep a back-up copy of the computer's operating system, boot files, and critical software at a location away from your site.
- Keep the program's inventory of equipment and supplies current. Send an electronic copy or a printed copy to a remote site.
- Email yourself and other relevant staff a copy of computer and internet logon codes and passwords.

ASSIGNING RESPONSIBILITIES

One of the most important first steps to developing your Emergency Response Plan is to identify who will be in charge in the event of a disaster. Designate your Authority in Charge - a person who can provide leadership during an emergency. In most cases this would likely be the person who is managing the program when an emergency strikes. If this person is away from the facility, as a regular practice, they should have designated someone to be in charge in their absence – even if it is only for a short period of time.

Decide in advance who will be in charge and post that person's name in the office. Should you need to evacuate the building or perform critical functions, it will be easier if you have assigned responsibilities to staff and make them aware of what they may be required to do.

Using the templates provided, in the event that you must evacuate the building, detail who will:



- Bring the medications for the children & staff
- Bring the attendance lists
- Bring the emergency information on each child
- Call for help
- Carry cell phones
- Carry emergency kits
- Be sure everyone is out of the building

You should also discuss with staff who will be responsible for which group of children as well as who will be in charge of the children who have special needs.

There should be a back-up person for each person assigned to the task in case they are not available or unable to fulfil their responsibilities.

EVACUATION

Some disasters will require program facilities to be evacuated quickly. Since time may be critical to saving lives, developing an evacuation plan, training staff on the plan and practicing parts of the plan can make the difference.

- Post emergency exit route maps in advance so everyone knows how to get out of the building. Similar to your fire evacuation plan, there should be at least two ways to exit.



Use the same words and procedures to prepare the children for action in all situations, whether you are evacuating or sheltering in place (e.g. “ready” and “go”). This teaches the children and staff to stop what they are doing, line up, be quiet, listen for directions and “go” when instructed. A procedure such as lining up with the same partner or holding a knot in a long rope should be followed in all drills. This can reduce the risk of panic and leaving any children behind.



- If you are located in a school or in a building with other tenants, it is important to coordinate your evacuation plan with other tenants, businesses and staff to avoid confusion and congestion.



Since evacuation may be required for different types of disasters, designate two evacuation locations: an on-site location and an off-site location that would be used should an emergency affect the entire area where you operate.



Off-site Evacuation Location

Evacuation to the off-site location may be enough if the threat of the disaster is limited to the area in which the child care facility is located, for example, a fire or the release of toxic fumes. Factors to consider in choosing an off-site evacuation location include:

- How feasible is it to walk the children to the facility?
- Is the facility open for operation during the same hours as your child care facility?
- Will the owner or tenant approve? Do you have written approval?
- Is the facility suitable for young children? Is it suitable for children with special needs?
- How much protection would the facility provide from the types of hazards for which your area is at risk?
- See if you can make arrangements with other child care centres to be your off-site evacuation location. These centres should be in close proximity to your facility. Distance permitting, consider other sites that may be operated through your organization, or potentially one of the five Niagara Regional Child Care Sites.
- Ensure parents and staff family members know about the plans for an off-site evacuation.
- In a major evacuation, know how to contact the local government authority who may be making arrangements for an emergency shelter area.

SHELTERING¹

During some emergencies it may be better to keep children and staff in the facility instead of evacuating because it may not be safe or even possible to evacuate the building. Sheltering in place is defined as moving people into the building, (or moving them from one area of the building to another), and isolating the building environment from the outside. In most emergencies you will be advised to take shelter in place because it is safer to stay where you are rather than relocate children and staff. Sheltering in place is usually conducted in response to emergencies such as: hazardous materials incidents, tornadoes, terrorist attacks, and severe storms.

The first step is knowing when to stay and when to evacuate.

You should have already identified your Authority in Charge who will decide to stay at the child care facility or to evacuate. If a program has decided to shelter-in-place, there may be times that a further decision will have to be made concerning the location in the facility that is the safest for children and staff. For example, a tornado may result in everyone being moved to a basement or interior room or hallway on the first floor of the facility. Children would need to be kept away from windows, doors and outside walls. You should decide in advance the location within the building where everyone will locate to.



If a disaster occurs and a child care program has to remain in the facility, it is likely that utilities will be disrupted. You may be left with no power which means no lights, phone service, heat or cooling and possibly water and natural gas. As part of your planning, identify where you can get a portable generator to use during a loss of power.

Staff should also know how to store food during power outages and how to find out if food is safe to eat and if water is safe to drink. They also should know how to boil water and disinfect water if they are not sure of the safety of the water. Staff should also know how to protect children from exposure to heat and cold, electrical shock, power line hazards, cars and carbon monoxide poisoning.

Identifying a Shelter Area: The Supervisor will identify the safest place in the building that provides the most structural resistance from collapse. Shelter areas will:

- Be appropriately marked.
- Be free of items that may fall on sheltered people.
- Have a flashlight or emergency light available (Emergency kit).
- Have blankets available (Emergency kit).

Assign a staff member to shut off systems as directed (where applicable). Ensure the employee is properly trained by the centre's maintenance or utility personnel in the procedures for turning off as well as turning the systems back on.

SNOW & ICE STORMS

Snow and ice storms will happen every winter in Ontario and the Niagara Region. A blizzard is a winter storm with winds exceeding 40 km/h with visibility reduced by falling or blowing snow to less than a kilometre and lasting for at least three hours². Blizzards come in on a wave of cold arctic air, bringing snow, bitter cold, high winds and poor visibility in blowing snow. While these conditions must last for at least three hours to be designated a blizzard, they may last for several days. Poor visibility, low temperatures and high winds combine to create a significant hazard.

Freezing rain is common in Ontario, Quebec and the Atlantic provinces. Ice from freezing rain accumulates on branches, power lines and buildings. Do not bring children outside when a significant amount of ice has accumulated, as branches or wires could break due to the weight of the ice. Freezing rain makes roads extremely slippery and driving should be avoided. Rapid onsets of freezing rain combined with the risks of blizzards increase the chances for extreme hypothermia³.

Children should not be taken outside if there is a snow or ice storm, nor should they be taken outside if the temperature is **-15°C**.

You should have thermometers outside your child care facility to tell what the temperature is outside. Also listen to the radio or watch the local weather network on television to find out current information about inclement weather.

UTILITY DISRUPTION

A sustained power outage has the capacity to adversely affect safety and security. Utility disruption includes utilities needed for most child care operations to remain open (water, gas, electricity, ground phone service, or cellphone service). Tips on how you can be prepared for the disruption to utilities at your facility:



- Maintain an up-to-date listing of utility telephone contacts to report disruption and schedule repair or restoration.
- Inspect the water supply and equipment on a regular basis. Make improvements as necessary to ensure an adequate and reliable supply.
- Have maintenance performed on heating and cooling systems on a regular basis and make required repairs.
- Maintain battery operated radios, flashlights and emergency lights in working conditions, and keep a supply of back up batteries.
- Keep a cellphone in the facility.
- Have at least one land line phone that works when electrical power is out.
- Consider purchasing an emergency generator and having it attached to the facility power supply so power will be available if the electricity is disrupted. Be sure someone who will be present knows how to operate it safely.
- Maintain a supply of blankets to keep children warm if the power goes out.
- Have a supply of food that can be prepared when there is no electricity or gas.
- Have a can opener that does not require the use of electricity.
- Keep enough bottled water on hand to supply the staff and children for at least 72 hours.
 - Have a plan for minimizing the effect on children with special needs who use special equipment such as signalling devices.

POWER OUTAGES

Most power outages will be over almost as soon as they begin, but some can last much longer – up to days or even weeks. Power outages are often caused by freezing rain, sleet storms and/or high winds which damage power lines and equipment. Cold snaps or heat waves can also overload the electric power system⁴.

During a power outage, you may be left without heating/air conditioning, lighting, hot water, or even running water. If you only have a cordless phone, you will also be left without phone service. If you do not have a battery-powered or crank radio, you may have no way of monitoring news broadcasts. In other words, you could be facing major challenges⁵. By being prepared, you can lessen the impact of a power outage.

BOIL WATER ADVISORY/DRINKING WATER ADVISORY

Possible chemical contamination would warrant a **DWA (Drinking Water Advisory)** and typically boiling does not correct the problem. When a DWA is issued, recommendations on using the water are provided or it is simply advised not to use the water in question and to obtain an alternate known safe source of water.

Possible microbiological contamination would warrant a **BWA (Boil Water Advisory)** because boiling can destroy microorganisms.

Generally there are three different reasons for a boil water advisory being issued:⁶

1. A boil water advisory is **based on information other than bacteriological examination** indicating that the water is not safe to drink. (e.g., the lack or absence of disinfection residual in the drinking water.)
2. A boil water advisory may be **based on bacteriological (microbial) examination**, including the finding of bacteria or parasites.
3. A boil water advisory may follow the occurrence of an **outbreak of illness** in the community that has been linked to consumption of the water.

During a boil water advisory, everyone needs to boil water for one full minute before using it. This includes water used for drinking, making infant formula, cleaning fruit or vegetables, making ice, juice, puddings and other mixes, brushing teeth, or any activity involving children where they may have the opportunity to drink or swallow water, such as bathing⁷. Even if you have a water filtration system, filtered water should also be brought to a rolling boil for one minute before drinking or using it for cooking. Bottled water is recommended as an alternative.

Water in wading pools is not safe to use. Water usually gets into the mouths of small children, providing a possibility for infection. Adults and teens may shower with untreated water as long as no water is swallowed. Younger children should be sponge-bathed instead of bathing in a tub because they are likely to swallow tub water⁸.

LIGHTNING & THUNDER

Lightning occurs when the air becomes charged with electricity during a thunderstorm. Thunderstorms are often accompanied by high winds, hail, lightning, heavy rain and tornadoes. Thunderstorms are usually over within an hour, although a series of thunderstorms can last for several hours⁹. Summer thunderstorms are common in Canada, however usually only small numbers of people are affected by them with minimal damage to buildings.

HURRICANES & TORNADOES

Hurricanes and tornadoes are two different types of storms which can cause high winds, large amounts of rain, thunder, lightning, hail, power outages, floods, destroy buildings, trees, etc.

Hurricanes cause high winds and a tremendous amount of rain but the long term damage is usually caused by flooding which follows. Hurricanes are formed over water and are measured in categories (1 to 5) based on the speed of winds.

Tornadoes in general can generate much stronger winds than hurricanes but do not last nearly as long. Rain storms do not usually accompany tornadoes but sometimes hail does. Unlike hurricanes, tornadoes are usually formed over land. Tornadoes can form very quickly, sometimes within minutes. The damage from a tornado is due to the very strong winds which can uproot trees and damage buildings. Tornadoes typically occur between April and June while hurricanes generally occur in the months from June to November. The eye of a tornado is only a few feet in diameter, while the diameter of hurricane's eye extends to 10-20 miles¹⁰.

According to Environment Canada, "In Canada, during an average year, approximately 80 tornadoes occur and, on average, cause two deaths and 20 injuries, plus tens of millions of dollars in property damage¹¹."

Canada has a "Tornado Alley" which spans the areas of:

- British Columbia interior
- Province of Alberta
- Southern Saskatchewan through southern Manitoba to Thunder Bay, Ontario
- **Southern Ontario**
- Southeastern Quebec
- Western New Brunswick¹²

FLOODS

Floods are the most frequent natural hazard in Canada. They can occur at any time of the year and are most often caused by heavy rainfall, rapid melting of a thick snow pack, ice jams, or more rarely, the failure of a natural or man-made dam¹³. In order to prepare for a flood:

- Put weather protection sealant around basement windows and the base of ground-level doors.
- Install the drainage for downspouts a sufficient distance from your child care facility to ensure that water moves away from the building.
- Consider installing a sump pump and zero reverse flow valves in basement floor drains.
- Do not store your important records or documents in the basement. If you need to store items in your basement, put them up off the ground and protect them in large plastic containers or boxes (i.e. Rubbermaid containers).
- If you are aware a flood may be imminent:
 - Move furniture, electrical appliances and other belongings to floors above ground level.
 - Remove toxic substances such as pesticides and insecticides from the flood area to prevent pollution.
 - Keep your radio on to find out what areas are affected, what roads are safe, where to go and what to do if you are told to evacuate.

EARTHQUAKES

Earthquakes are very unlikely to happen in the Niagara Region. Except for one death in the 1700's, no one has ever died as a result of an earthquake in Canada. Western and Eastern Canada are most likely to have earthquakes.

FIRE

Each facility should have an Official Fire Safety Plan which includes an evacuation procedure, marked exits, fire/smoke detectors, fire extinguishers, safe storage and use of flammable materials, and fire safety training and fire drills. The Official Fire Safety Plan should specify when and how to evacuate in case of fire and under which conditions staff should attempt to control a fire using extinguishers.



Ontario As stated in the Day Nurseries Act:

- Each child care facility's written fire procedure needs to be approved by the local fire chief;
- Each staff member is instructed as to his or her responsibility in the event of a fire before commencing work for the first time;
- The written procedure is posted in an conspicuous place in each room in each child care facility that is used to care for children;
- A fire drill is conducted at least once a month;
- A written record is kept of all fire drills, all tests of the fire alarm system and all tests of fire protection equipment and that each record is retained for at least 2 years from the date of the drill and test;
- There is a designated place of shelter in the event the day nursery must be evacuated due to an emergency.

Check with fire officials to remain current on fire safety such as the use of fire extinguishers, detectors, and alternate heating sources. Staff are responsible for ensuring that all fire extinguishers, alarm boxes, exits, and paths to exits are unobstructed at all times.

HAZARDOUS MATERIALS

Hazardous materials are substances that are flammable, combustible, explosive, toxic, noxious, corrosive, oxidizable, an irritant, or radioactive. A hazardous materials accident (natural gas leak, spilling of a solvent on a roadway, etc) could occur at or near a child care centre or may occur as a result of suspicious mail. In order to prepare for a hazardous materials emergency:

- Identify businesses and other organizations in your area that use hazardous materials, including materials transported on roadways or railways near your program.



- Identify hazardous materials in your child care facility.

Examples of Hazardous Materials you may have in your Child Care Centre Facility:

- Cleaning Products – bleach, ammonia, oven cleaner, carpet cleaner, floor cleaner, toilet cleaner, window cleaner, all purpose cleaner, laundry detergent, aerosols
- Others – hairspray, nail polish and removers, perfume, cologne, aerosol deodorant, batteries, air fresheners, antifreeze, fertilizers, insecticides, gasoline, hydrogen peroxide, glues & adhesives, paint thinner, paint and varnish remover.

TERRORISM, BOMB THREATS, THREATENING CALLS OR MESSAGES, SUSPICIOUS ARTICLES, AND POTENTIALLY VIOLENT SITUATIONS

Although it is very unlikely that your child care facility will ever be faced with a terrorist attack or a bomb threat, you should be prepared to expect the unexpected. These types of attacks are more difficult to predict compared with natural disasters. Your job is to be aware and alert at all times. Below are some general tips when dealing with surprising and potentially dangerous situations:

- If an unusual looking package arrives in the mail or is delivered by an unfamiliar person, take precautions. Don't touch the package – protect it for fingerprints, call 911, and remove children and staff from the area where the suspicious package is located.



Bomb threats, hostage calls, or calls of a threatening nature should be taken seriously and believed to be true until they are proven otherwise. Record the call as accurately as possible and report to the police. In the event of a hostage situation listen to the caller and do not put yourself in danger. Depending on the situation, you may need to evacuate with the assistance of police - or without police by making a judgement call in the best interests of the children and staff.

A potentially violent situation (i.e. hostage situation, unstable custody situations) may require a selective evacuation procedure or in-classroom lock down. A selective evacuation enables large numbers of children and staff to move out of harm's way when a potentially violent individual is on-site.

- If a parent, guardian, family member or visitor to the child care facility engages in behaviour (including being impaired) which may potentially affect the wellbeing of the children and/or staff, the person should be asked to leave the facility immediately. Speak in a calm manner, be polite, stay in control and try to diminish the behaviour of the individual.

MISSING CHILD

There can be nothing more distressing for a parent than to know their child has gone missing. In 2005, more than 66,500 children were reported missing in Canada (includes runaways, abductions, kidnappings, accidents, wanderers, and other reasons for being missing). The majority of missing children were runaways (51,280), compared with 30 kidnappings and 349 parental abductions. Females were more likely to go missing than males and accounted for 57 per cent of all missing kids¹⁴.

LOCKDOWN

Lockdown describes the steps that staff members take to ensure the safety and security of staff and children during a violent incident such as threats, intruders, drive by shootings, active shooters etc. *Lockdown* should only be used when there is a major incident or threat of violence within or in relation to the facility.

Hold and Secure should be used when it is desirable to secure the facility due to an ongoing situation outside and not related to the child care facility (e.g., a bank robbery occurs near the child care facility but not on the facility's property). In this situation, the child care facility continues to function normally, with the exterior doors being locked until the situation is resolved.

Shelter in Place should be used for an environmental or weather related situation, where it is necessary to keep all occupants within the school, to protect them from an external situation. Examples may include chemical spills, blackouts, explosions or extreme weather conditions¹⁵.

CHILDREN WITH SPECIAL NEEDS

As a child care provider you need to speak with the child's parents to understand all of the needs of the child in the event of a disaster. When making an Emergency Response Plan with special needs children, consider if there was:

- no water, heat, air-conditioning, electricity or refrigeration, telephone, or computer;
- no access to prescription refills or health products;
- limited health care access;
- lack of transportation;
- limited emergency rescue services.

If the child depends on dialysis or other life-saving treatment you need to know where to go if you need to obtain more of this treatment or life-saving medications.

INFLUENZA PANDEMIC **(“FLU PANDEMIC”)**

Unlike most other emergency scenarios, a pandemic will not be a localized phenomenon. A pandemic is an infectious disease which affects a large geographic area. This section is dedicated to pandemic planning because it presents a special type of circumstance that is not quite a disaster. However, due to the global scope of a pandemic, the implications of a flu pandemic on staff requires some consideration on how you would continue to operate your child care program in the event of a pandemic.

What is a Pandemic?

Influenza has been with us for many centuries. It causes severe illness and death every year in North America, attacking the elderly and the debilitated with particular intensity. Every winter, influenza outbreaks in hospitals and long-term care homes require public health resources to control the spread and minimize the impact of influenza.

The 20th Century saw three influenza pandemics:

- The Spanish Flu (1918-1919)
- The Asian Flu (1957-1958)
- The Hong Kong Flu (1968-1969)

The most deadly, the "Spanish Flu" of 1918-19, killed an estimated 40-50 million people worldwide (in Canada, 50,000 died)¹⁶. Public health officials have warned that a global influenza pandemic is long overdue.

Influenza A viruses periodically cause worldwide epidemics, or pandemics, with high rates of illness and death. A pandemic can occur at any time, with the potential to cause serious illness, death and immense social and economic disruption throughout the world. Experts believe that although a future influenza pandemic is inevitable, the timing is unpredictable¹⁷.

It is estimated that the next pandemic virus will arrive in Canada within three months after it emerges in another part of the world. However, it could appear much sooner due to increases in the volume and speed of global air travel. The influenza pandemic will occur in two or more waves. In any locality, the length of each wave of illness will be 6 to 8 weeks. The pandemic will last 12 to 18 months and more than one wave may occur within a 12 month period.¹⁸

Here is what you should know about a flu pandemic¹⁹:

ORDINARY FLU	INFLUENZA PANDEMIC
Seasonal flu happens every year.	An influenza pandemic happens only two or three times a century.
Seasonal flu is usually around from November to April – and then stops.	An influenza pandemic usually comes in two or even three waves several months apart. Each wave lasts about two months.
About 10% of Ontarians get ordinary seasonal flu each year.	About 35% of Ontarians may get the influenza over the course of the full outbreak.
Most people who get seasonal flu will get sick, but they usually recover within a couple of weeks.	About half of the people who get influenza during a pandemic will become ill. Most will recover, but it may take a long time. And some people will die.
Seasonal flu is hardest on people who don't have a strong immune system : the very young, the very old, and people with certain chronic illnesses.	People of any age may become seriously ill with influenza during a pandemic. This depends on the virus.
In a normal flu season, up to 2,000 Ontarians die of complications from the flu, such as pneumonia.	During an influenza pandemic, Ontario would see many more people infected and possibly many more deaths.
There are annual flu shots that will protect people from seasonal flu.	There is no existing vaccine for an influenza pandemic. It will take four to six months after the pandemic starts to develop a vaccine.
There are drugs that people can take to treat seasonal flu.	These same drugs may also help people but we will not know their full effectiveness until the virus is identified.

What are the Differences Between Influenza and a Common Cold?²⁰

Symptom	Cold	Influenza
Fever	Rare	Usual; high fever (102 ° F/39 ° C - 104 ° F, 40 ° C), sudden onset, lasts 3 to 4 days.
Headache	Rare	Usual; can be severe
Muscle aches and pains	Sometimes, generally mild	Usual; often severe
Tiredness and weakness	Sometimes, generally mild	Usual; severe, may last up to 2 to 3 weeks
Extreme tiredness	Unusual	Usual; early onset, can be severe
Runny, stuffy nose	Common	Common
Sneezing	Common	Sometimes
Sore throat	Common	Common
Chest discomfort, coughing	Sometimes, mild to moderate	Usual, can become severe.
Complications	Can lead to sinus congestion or infection, and ear aches.*	Can lead to pneumonia and respiratory failure, and become life-threatening. Can worsen a chronic condition.
Prevention	Frequent hand washing	Annual immunization and frequent hand washing

What is the Avian (Bird) Flu?

It is a disease caused by influenza viruses and spread mostly among wild birds. Humans do not easily contract bird flu viruses and can ONLY get bird flu by handling infected birds or coming into contact with contaminated feces. There is NO evidence that bird flu is passed by eating cooked poultry products. One way the pandemic flu can occur is if bird flu mixes with human flu and creates a new strain of flu virus that can spread easily from human to human.²¹ At this time, there is no vaccine to provide people with specific protection against avian flu. However, for most Canadians, the risk of getting avian influenza (bird flu) is extremely low.

What is H1N1 (Swine Flu)?

H1N1 Flu Virus is a strain of the influenza virus that usually affects pigs, but also makes humans sick. H1N1 Flu Virus is not transmitted through pork meat²². H1N1 flu virus is a respiratory illness that causes symptoms similar to those of the regular human seasonal flu²³. The symptoms include fever, fatigue, lack of appetite, coughing and sore throat. Some people with H1N1 Flu Virus have also reported vomiting and diarrhea.

Phases of an Influenza Pandemic

The World Health Organization (WHO) has identified 6 phases of an influenza pandemic detailed in the table below²⁴:

Period	Phase	Description
Interpandemic Period* "Know it"	Phase 1	No new influenza virus subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk* of human infection is considered to be low.
	Phase 2	No new influenza virus subtypes have been detected in humans. However, a circulating animal influenza subtype poses a substantial risk of human disease.
Pandemic Alert Period** "Prevent It"	Phase 3	Human infection(s) with a new subtype, but no human-to-human spread, or at most rare instances of spread to a close contact.
	Phase 4	Small cluster(s) with limited human-to-human transmission but spread is highly localized, suggesting that the virus is not well adapted to humans.
	Phase 5	Larger cluster(s) but human-to-human spread still localized, suggesting that the virus is becoming increasingly better adapted to humans, but may not yet be fully transmissible (substantial pandemic risk).
Pandemic Period "Manage It"	Phase 6 *Current Phase*	Increased and sustained transmission in general population.
Post-Pandemic Period		Return to interpandemic period.

The distinction between phase 1 and phase 2 is based on the risk of human infection or disease from circulating strains in animals.

** The distinction between phase 3, phase 4 and phase 5 is based on the risk of a pandemic.

WHO uses a series of six phases of pandemic alert as a system for informing the world of the seriousness of the threat and of the need to launch progressively more intense preparedness activities²⁵. The world is currently in **Phase 6** (as of July 8, 2009): the pandemic phase, is characterized by community level outbreaks in at least one other country in a different WHO region in addition to the criteria defined in **Phase 5**.

Impact of a Pandemic

Estimated Impact of an Influenza Pandemic on Ontario²⁶

- Up to 8 million people will be infected;
- Up to 4 million will be clinically ill;
- Up to 12,000 will die; and
- Up to \$2.5 billion in direct health care costs and an additional \$10 to \$24 billion in societal and lost opportunity costs.

Estimated Impact on Niagara²⁷

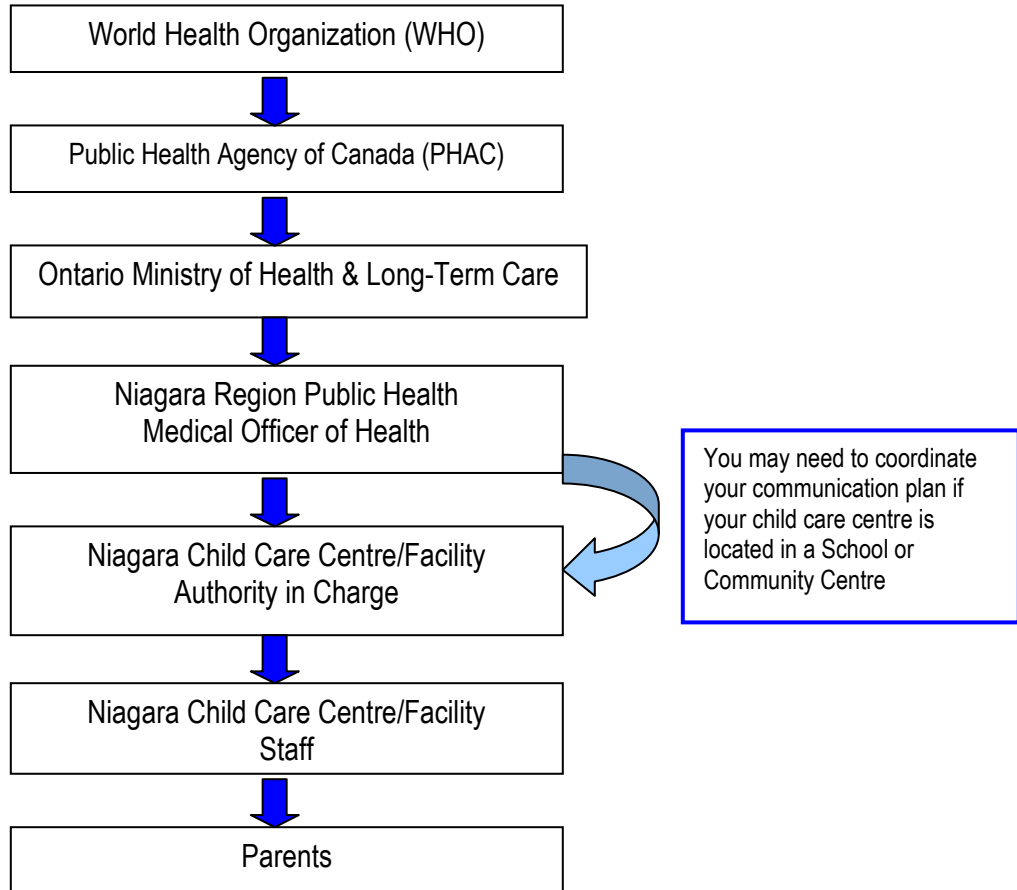
	Amount of People Affected
# Requiring Outpatient Care	34,425 to 80,323
# Requiring Hospitalization	829 to 1,934
# of Deaths	203 to 473
# of Daily ER Visits	690

The above figures are used to provide estimates of the low to high impact range of an influenza pandemic on Niagara Region for planning purposes.

The impact is dependent on such factors as the virulence of the virus (poisonous or lethality of virus), availability of a vaccine, and anti-viral drugs. Special guidelines will need to be in place to address critical issues that will occur as service access is maximized and resources are depleted.

Who will declare a Pandemic?

In the event of a pandemic, the World Health Organization (WHO) is responsible for surveillance and alerting the international community. In declaring a pandemic, the flow of communication would filter down as follows:



Communicating During a Pandemic



Communication is one of the most critical components of an effective Pandemic Plan. It is important in all phases of a pandemic to know who is in charge, where you will get information and who you need to communicate with depending on a variety of circumstances.

Niagara Region Public Health (NRPH) has a lead role for pandemic public health communication for the Niagara community, in conjunction with the Ministry of Health and Long-Term Care and key stakeholders.



During a pandemic you can monitor the regional status through the Niagara Region's website:

<http://www.niagararegion.ca/>

Currently (July 8, 2009) we are in Phase 6 of a H1N1 Pandemic and daily information is available at:

http://www.niagararegion.ca/living/health_wellness/pandemic-planning/Swine-Flu.aspx?banner=1

Additional information on the communication objectives, principles and accountabilities can be found in the Niagara Region Influenza Pandemic Plan: http://www.niagararegion.ca/living/health_wellness/pandemic-planning/PandemicPlan.aspx

Multiple communication methods will be employed to ensure that information conveyed is transparent, accessible, accurate, and real time, in order to assist residents, businesses, the health care sector, and other community stakeholders with their pandemic response. Similar methods will be used to inform residents of Niagara about changes to Regional services during the different outbreak phases.

Communication Methods

Niagara Region Public Health will use a number of communication methods to inform the public and stakeholders, including child care and families receiving services, about the Region's operations and changes to services.



You will likely be communicated with key messages concerning a pandemic through email/fax.

If your contact information changes, call Niagara Region Public Health 905-688-8248 ext. 7330 and Niagara Region Children's Services to update their records: 905-984-6900 ext. 3817.

The general public and other key groups will require information regarding disruption in regional services, business continuity planning, infection control practices, personal precautions and general preparedness. Some of the communication activities that have been identified by Niagara Region Public Health include:

- Teleconferences
 - Information Line – General Public (905) 688-8248 Ext 7765
 - Pre-recorded messages for public and FAQ's
 - Web-pages: www.niagararegion.ca
 - Media Releases – local, National and International
 - Public Information Sessions
 - Print Materials and Advertisements
 - Mass Faxing

It is important to know where to get accurate and up to date information to make appropriate decisions for the children in your care and their families. If you are unsure of what to do, please call **Niagara Region Children's Services at 905-984-6900 ext 3803**.

What to Consider when Planning for a Pandemic...²⁸

- The pandemic virus may spread rapidly leaving little or no time to prepare due to high level of global traffic;
- The pandemic will be widespread with simultaneous outbreaks in Niagara Region;
- There may be significant border crossing problems;
- There will be a need for cooperation with U.S. State and Federal health authorities;
- There will be shortages of healthcare, emergency and essential services and personnel due to illness;
- There may be severe disruptions in essential services;
- There may be shortages of equipment and supplies;
- There may be limited or no vaccines and anti-virals available during the early stage of the pandemic;
- There will be a need to cope with large numbers of ill people, from all age groups, who will require treatment; and
- There will be intense and unrelenting scrutiny from the media and the public, and fear will be abundant.

Informing Parents of Your Pandemic Plan



Send a letter home to parents so that they understand the policies and procedures of your child care facility in preparation of a pandemic. The letter should include:

- A summary of the key points of your pandemic plan.
- Procedure information such as:
 - Where to go for information during a pandemic (website, telephone messages, notices posted, etc).
 - If children become ill, they will be isolated from the group (as best as possible) and parents will be required to pick up their child immediately.

- Children who are ill with the flu (or flu like symptoms) will not be admitted to the program until 7 calendar days after the onset of the illness
- The importance of parents informing the child care centre if their child is ill and what symptoms they have.

How to Create a Pandemic Response Plan

The information presented is a guide that a child care facility could use to plan for a pandemic. It should be used in conjunction with your policies and procedures required by Public Health and Ministry of Children and Youth Services licensing requirements for health and safety and recording keeping. As well, should your centre be located in a school, you will need to coordinate this plan with Ministry of Education requirements. Your school principal should be in a position to provide this information.

Create a Staff Illness Policy²⁹

It is important that staff do not come to work at the child care facility when they are not feeling well, and particularly if they have symptoms of fever, vomiting or diarrhea. If staff arrive at work and are obviously not feeling well, they should be sent home.

Staff must be informed and aware that they are not to return to work until they are no longer infectious.



Those with **seasonal influenza** can be contagious for up to **24 hours before** the onset of symptoms and for approximately **5 days** after the onset of symptoms. Those with **H1N1** can be contagious for up to **24 hours before** and up to **7 days after** the onset of symptoms. It is recommended that a record be made about staff who become ill during the workday and with whom they came in contact.

In your staff illness policy you should consider the following:

- What if staff members refuse to come to work because they are afraid they will catch the flu?
- What if staff are off ill with H1N1, will you still pay them?
- What if staff are off ill with H1N1, will this count as sick time? Will it be punitive?
- What if a staff member's child is ill with H1N1? Does this count as sick time? Will it be punitive?
- What if a staff member thinks they are ill with H1N1? Will you require a doctor's note to ensure that they do have H1N1?
- What if your child care facility needs to close temporarily? For 1 day or for 1 month? In either case, decide if you will pay staff or if staff will be laid off.
- Ensure that your policy does not contradict existing labour laws.

These are just a few things you should think about. If a staff member becomes ill, he or she will ask these types of questions and it is best that you are prepared in advance. Once you have created your staff illness policy, share it with your staff so that they are aware of the policy.

Niagara Region Public Health Department staff (Public Health Nurses & Public Health Inspectors) can help you with the following during outbreaks:

- Provide guidance on Outbreak Control Measures.
- Provide information about the specific illness.
- Collection & submission of specimens (i.e. Stool) for laboratory testing to identify a possible cause for the illness.
- Identify those children considered to be susceptible (i.e. not immunized) for certain diseases.
- Information that parents should receive.
- Information on medications and/or vaccination for contacts when appropriate (i.e. disease specific).

Be aware of any children with cancer, including leukemia or other immune deficiency illnesses. Parents should be informed of all illnesses in the facility immediately. For more information about reducing the spread of diseases: refer to “Common Communicable Diseases in Schools and Child Care Facilities” In the Regional Niagara Public Health: Health and Safety Manual for Child Care Providers.



Pandemic Planning Checklist:

- Identify one staff member responsible for pandemic planning for your child care centre.
- Identify one staff member to teach, practice, monitor and evaluate prevention techniques as described in “A Health & Safety Manual for Child Care Providers” by Niagara Region Public Health for information regarding Preventing the Spread of Disease (Chapter 3) to staff, parents and children.
- Identify one staff member who will communicate with parents and how (through website, radio, voicemail, develop and implement a phone tree, etc.).
- Encourage families to learn about pandemic planning and to create their own home emergency plan.
- Encourage parents to have a “Plan B” for finding care for their children if the program is closed during a pandemic.
- Have a plan for obtaining back up staffing support (supply list, buddy with another centre for staffing support, etc).
- Develop a staff illness policy. Make sure your policies do not contradict existing labour laws.
- Develop policies related to children being ill. Will parents pay for services they do not receive in the event of a pandemic? Look at existing attendance policies and procedures.
- Make sure staff and families are then aware of your facility’s policies on ill children and ill staff, including what will happen in the event of an outbreak (daily screening, enhanced cleaning, protective measures such as wearing masks, etc).
- Organize where the sick room or area will be for ill children and notify staff.
- Stock pile supplies that may be required during a pandemic, including: disposable dishes, extra cleaning supplies such as disinfectant, hand-sanitizer, gloves, garbage bags, masks, thermometers, batteries, tissue, bleach. Ensure you have a 4 – 8 week supply.
- If mail service is interrupted, is there critical mail delivery which you need to make alternative arrangements for?



- Ensure proper hand-washing technique signs are posted and given to each staff and family for reference at home.
- Ensure “cover your cough” signs are posted throughout the center, including the parent entrance. Post and distribute notices for families/staff especially during cold and flu season: The difference between influenza and a common cold.
- Determine what it would take to close operations. Will it be that more than 3 staff are ill? More than 50% of children are ill? Make sure to put those benchmark numbers in writing.
- Who is in charge of tracking child and staff illnesses? Who will report illnesses on the “Child Care Absenteeism Report” template to Niagara Region Public Health?



BUSINESS CONTINUITY

In the event of an emergency where staff are ill, you will need to prioritize how you will operate your business functions. Child care operators will need to make decisions to close their programs, continue operating with less resources, or to continue functioning as normally as possible. Most likely these decisions will depend on staff and child absence rates.

During an emergency, operators should consider creating alternative staffing options in order to stay open:

- Increasing usage of volunteers,
- increasing part time staff to full time,
- teaming up with another child care facility to combine staff,
- screen additional applicants as potential staff, etc.



You will have to keep in mind that you must operate within the designated child to staff ratios as defined by the Day Nurseries Act.



- Essentially you will need to decide in advance:
- What you must keep doing (essential business)
 - What you will try to do if possible (necessary business)
 - What you will stop/postpone doing (required business)
 - Are there any tasks staff could be performing from home or alternate locations?
 - Consider the implications should child care fee subsidy payments be delayed.

SERIOUS OCCURRENCE REPORTING³⁰



In the event of a Serious Occurrence, the Program Advisor (Ministry of Community and Social Services/Ministry of Children and Youth Services) is contacted within 24 hours and a Preliminary Inquiry Report form is submitted within seven (7) working days of a Serious Occurrence. Enhanced Serious Occurrences will be reported within one (1) hour to Early Alert System and Hamilton/Niagara Regional Office.

A **Serious Occurrence** includes:

- Any death of a client that occurs while the client is participating in a service;
- Any serious injury to a client that occurs while the client is participating in a service (a) caused by the service provider, (b) accidental and/or (c) self-inflicted/unexplained where treatment is required;
- Any alleged abuse** or mistreatment of a client that occurs while the client is participating in service;
- Any situation where a client is missing, in accordance with Ministry requirements for applicable program sectors; otherwise, where the service provider considers the matter to be serious;
- Any disaster, such as fire, on the premise where a service is provided;
- Any complaint concerning the operational, physical or safety standards of the service that is considered by the service provider to be of a serious nature including any report of adverse water quality;
- Any complaint made by or about a client, or any other serious occurrence concerning a client, that is considered by the service provider to be of a serious nature; and
- Any use of a physical restraint of a resident in a residence licensed as a children's residence under the Child and Family Services Act or a service provider funded under the Developmental Services Act that provides group living supports to adults with developmental disabilities.
- If an emergency service is involved (fire, police and/or ambulance) and if the incident is likely to result in significant public or media attention, it is considered to be an "Enhanced Serious Occurrence".

**Abuse includes:

- a) to suffer physical harm;
- b) to be sexually molested or sexually exploited; and
- c) to require but not be provided with medical treatment.

DUTY TO REPORT SUSPECTED ABUSE CASES

THE LOCAL CHILDREN'S AID SOCIETY must be notified of all suspected abuse cases as required by the Child & Family Service Act, 1984, section 68(2)(3)(4). In an investigation of a suspected child abuse case, the school and the CAS should cooperate and share information about the process of the investigation.

Once you have related your concerns to the Intake Worker at the CAS, they will decide whether to investigate or not and will inform the centre of any steps to take. Do not interview the children or discuss the incident with other staff or parents unless specifically directed to by the CAS.

Anyone reporting Child Abuse is protected unless there is intent to cause mischief.

If child abuse, physical, emotional or sexual is suspected by a staff or student, the staff or student with reason to suspect will, without further discussion, immediately report the incident to the Local Children's Aid Society.

If a staff or student is involved in the alleged abuse the management will decide whether the person should be suspended from the centre pending further investigation. The CAS usually informs the parents, if not they will inform the centre if they are to call the parents.

Any person who observed the alleged incident must document their observations, (as in the Serious Occurrences preliminary report) date and sign the report and provide it to the CAS.

In any of the above cases, a Serious Occurrence report is to be completed and forwarded to the Ministry of Community, Family & Children's Services, Toronto office, within 24 hours.

COMMUNICATING WITH THE MEDIA

In an emergency the first few hours are critical. Communication is key. Whether you are communicating with parents, or the media (newspapers, radio, television), you need to be able to provide timely and accurate information in the event of an emergency.

You should have already identified who is in charge of communications within your child care facility. Many times it is the Authority in Charge, Executive Director or one of the Board of Directors.

When an emergency, disaster or anything newsworthy happens near or in your child care facility, you may be contacted by the media for information. What the media wants from you is³¹:

- Their calls returned;
- Accurate information;
- Access to senior managers;
- Your side of the story; and
- “Action” clips/quotes



Whoever is in charge of Communications for your Child Care Facility needs to be prepared. In times of uncertainty, people always want to know these 8 fundamentals³²:

1. What is really happening?
2. How will this affect me?
3. What are you doing?
4. What do I need to do?
5. Detailed and specific instructions
6. When will things get back to normal?
7. Reassurance
8. People they can trust

Interview Tips:

- Know your key messages (what you want the public to remember).
- Be clear, concise, polite and confident
- Always get your key messages in, don't just answer the reporters questions.
- Be consistent in your messaging, reiterate the same points
- Start with these types of phrases:
 - “We are cautiously optimistic that...”
 - “We are making good progress towards...”
 - “We have the situation under control and are now moving on to...”
- Never say “no comment”. If you can't answer the question, explain why you cannot.
- If you feel unprepared to answer a certain question, ask the reporter if you can get back to him/her.
- If you are caught off guard, tell the reporter you would like to get them the most up-to-date information and agree on a time when you will hold the official interview. This gives you time to organize your messages and get prepared.

TRAINING

Your Emergency Response plans are only effective if staff and children know what to do in an emergency. Training and practicing your evacuation plan and fire drills increases the potential that the plan will be carried out effectively should an emergency occur.



Training of staff will help minimize panic and increase their ability to manage the children in their care during an emergency. Try reviewing one emergency procedure at each staff meeting. Make this a common practice at meetings and encourage staff discussion around emergency procedures.



It is also important to teach children how to follow evacuation plans and have the staff and children practice. These sessions should be held at different times during the day, including when children are eating, outside and resting. It is best to practice for those disasters that are most likely to occur in the area where the program operates rather than creating alarm for disasters that are not likely to happen. Since many disasters may occur with a loss of electricity, practicing evacuation without the lights on may be beneficial.

KEEPING YOUR EMERGENCY RESPONSE PLAN CURRENT

You must also consider how you will keep your Emergency Response Plan up-to-date. As part of training, it may be suitable to include a mechanism for feedback, such as lessons learned, and then update your emergency readiness plans accordingly. Ensuring that your manual or practices have a revision control mechanism (such as a version and date, who completed, file location, etc.) when last updated may be helpful. A complete review of your Emergency Response Plan at least once per year is recommended with a semi-annual or quarterly update of contact information.

Keep in mind that some of the templates, such as emergency contacts for families may change more frequently than your regularly scheduled update or training. Therefore, you must consider how you will keep these lists current – after all, you cannot predict when an emergency will occur. As well, your staff lists, which indicate who will be in charge and responsible for certain duties during a disaster, needs to be kept up to date. Sometimes, emergency contact information for your staff will be obsolete due to staff turnover. Review and update these lists several times a year.

Similarly, your list of contacts, emergency numbers and suppliers also need to be kept current as many organizations also have staff changes, may move their locations or offices, or have other situations where the contact information will change.

References:

- ¹ Adapted from A Child's World. (2007). Emergency Planning. Policies and Procedures Manual.
- ² Government of Canada. (2008). Severe Storms in Canada. Retrieved Online from <http://getprepared.ca/knw/ris/str-eng.aspx#b1>
- ³ Government of Canada. (2008). Severe Storms in Canada. Retrieved Online from <http://getprepared.ca/knw/ris/str-eng.aspx#b1>
- ⁴ Government of Canada. (2008). Severe Storms in Canada. Retrieved Online from <http://getprepared.ca/knw/ris/str-eng.aspx#b1>
- ⁵ Government of Canada. (2008). Severe Storms in Canada. Retrieved Online from <http://getprepared.ca/knw/ris/str-eng.aspx#b1>
- ⁶ Ontario Ministry of Health and Long Term Care. (2009). Public Water Safety. Retrieved online July 23, 2009 from:
http://www.health.gov.on.ca/english/public/pub/watersafe/watersafe_boiled.html
http://www.niagararegion.ca/living/health_wellness/wainfleet/default.aspx
- ⁷ Regional Municipality of Niagara. (2009). Wainfleet Boil Water Advisory. Retrieved online July 23, 2009 from:
- ⁸ Ontario Ministry of Health and Long Term Care. (2009). Public Water Safety. Retrieved online July 23, 2009 from:
http://www.health.gov.on.ca/english/public/pub/watersafe/watersafe_boiled.html
http://www.niagararegion.ca/living/health_wellness/wainfleet/default.aspx
- ⁹ Government of Canada. (2008). Severe Storms in Canada. Retrieved Online from <http://getprepared.ca/knw/ris/str-eng.aspx#b1>
- ¹⁰ Ramdasi, A. (2009). Retrieved online July 15, 2009 from: <http://www.buzzle.com/articles/difference-between-hurricane-and-tornado.html>
- ¹¹ Fleury, M. (2009). Retrieved Online July 15, 2009 from:
http://tornadoeshurricanes.suite101.com/article.cfm/top_ten_deadliest_tornadoes_in_canada
- ¹² ¹² Fleury, M. (2009). Retrieved Online July 15, 2009 from:
http://tornadoeshurricanes.suite101.com/article.cfm/top_ten_deadliest_tornadoes_in_canada
- ¹³ Government of Canada. (2008). Severe Storms in Canada. Retrieved Online July 15, 2009 from <http://getprepared.ca/knw/ris/str-eng.aspx#b1>
- ¹⁴ CBC News. The National. (2009). Missing Children. Retrieved Online July 23, 2009 from:
<http://www.cbc.ca/news/background/missingchildren/>
- ¹⁵ Ministry of Education. (2009). Guidelines for Developing and Maintaining Lockdown Procedures for Elementary and Secondary Schools in Ontario. Retrieved Online July 23, 2009 from: <http://cal2.edu.gov.on.ca/june2009/LockdownGuidelinesEn.pdf>
- ¹⁶ Public Health Agency of Canada. (2006). The Canadian Pandemic Influenza Plan for the Health Sector.
- ¹⁷ Public Health Agency of Canada. (2006). The Canadian Pandemic Influenza Plan for the Health Sector.
- ¹⁸ Public Health Agency of Canada. (2006). The Canadian Pandemic Influenza Plan for the Health Sector.
- ¹⁹ Ministry of Health and Long Term Care. (2009). Influenza Pandemic. Retrieved Online July 8, 2009 from:
http://www.health.gov.on.ca/english/public/program/emu/pan_flu/pan_flu_mn.html#4
- ²⁰ Ministry of Health and Long Term Care. (2008). Get the Flu Shot. Retrieved Online July 8, 2009 from:
<http://www.gettheflushot.ca/public/coldvsflu.html>
- ²¹ Public Health Agency of Canada (2008). Understanding Pandemic Influenza. Retrieved Online February 23, 2009 from:
<http://www.phac-aspc.gc.ca/influenza/faf-eng.php>
- ²² Public Health Agency of Canada (2009). General Information. H1N1 Flu Virus. Retrieved Online July 9, 2009 from:
http://www.phac-aspc.gc.ca/alert-alerte/swine-porcine/faq_rg_swine-eng.php#faq6
- ²³ Public Health Agency of Canada (2009). General Information. H1N1 Flu Virus. Retrieved Online July 9, 2009 from:
http://www.phac-aspc.gc.ca/alert-alerte/swine-porcine/faq_rg_swine-eng.php#faq6
- ²⁴ World Health Organization (2005). WHO Global Influenza Preparedness Plan.
- ²⁵ World Health Organization (2005). Current WHO Phase of Pandemic Alert. Retrieved Online July 8, 2009 from:
http://www.who.int/csr/disease/avian_influenza/phase/en/index.html
- ²⁶ Public Health Agency of Canada. (2006). The Canadian Pandemic Influenza Plan for the Health Sector.
- ²⁷ *Estimates are based on information extrapolated from previous pandemic based on population estimates for Niagara of 421,571 1998 data. Niagara Region Public Health (2008).*
http://www.regional.niagara.on.ca/living/health_wellness/pandemic-planning/default.aspx
- ²⁸ Alberta Emergency Management Agency. (2007). Business Continuity for Pandemic Plan Retrieved Online July 15, 2009 from:
http://aema.alberta.ca/documents/Municipality_Business_Continuity_for_Pandemic_Plan_06-24.doc
- ²⁹ Region of Durham. (2008). Guidelines: Pandemic Planning for Child Care Operators in the Region of Durham.
- ³⁰ Niagara Region. (2009). Serious Occurrence Reporting Procedures. Children's Services Policy Manual.
- ³¹ Stanton Associates (2009). Emergency Public Information Manual.
- ³² Stanton Associates (2009). Emergency Public Information Manual.