

Louth County Childcare
Committee Limited
Coiste Cúraim Leanaí Chontae Lú Teo



CIP

Critical Incident Plan
Toolkit for Childcare Providers



Acknowledgements

Critical Incident Plan – A Toolkit for Childcare Services

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Introduction

Expect the unexpected! Emergency situations usually come with little or no warning and often result in confusion and devastation. The purpose of this toolkit is to address basic emergency planning and response for a range of childcare emergencies. The outcome of a critical incident is dependent on how well the people involved have planned and prepared for such occurrences.

The aim is to create a sample critical incident response policy and procedure for childcare services allowing providers to have the capacity to respond appropriately in the event of a critical incident; to return to normal as quickly as possible after the incident and to limit the effects of the incident on children; families; staff/committee and any parties affected by the critical incident.

The plan outlines the roles of childcare providers; staff; parents and the community in responding to an emergency situation. All aspects, from identifying the risks to developing individualised emergency preparedness plans have been considered. The templates in this booklet outline all the steps necessary so that providers can create a critical incident plan to suit their own services. Consideration is given to the various types and sizes of childcare facilities and plans may be designed and utilised by services ranging from large full day care services to childminders operating in their own homes.

Frank Kavanagh, Senior Psychologist, NEPS who was an adviser in the early stages of planning, highlighted that in times of trauma and uncertainty children need to have familiar faces around them. Therefore, management and staff have a key role to play when a critical incident occurs. Also, childcare services should, in the process of planning the critical incident response, prioritise regular training drills so all staff are familiar with the process.

A national training programme has been developed to assist childcare providers to customise their individual Critical Incident Plans. Childcare Committees and National Voluntary Organisations will participate in the delivery of training nationwide.

1. Policy Statement

Emergency situations usually come with little or no warning and often result in confusion and devastation. The outcome of a Critical Incident is dependent on how well the people involved have planned and prepared for such occurrences. The purpose of this plan is to address basic emergency planning and response for a range of childcare emergencies.

2. Aim

The aim of this plan is to provide guidance to management and staff of childcare services on the prevention of and effective response to a critical incident. The purpose of this plan is to facilitate individual childcare services to:

- minimize the risks of a critical incident occurring;
- have an effective approach in responding to critical incidents as they occur;
- identify appropriate support and counselling structures in the event of an incident;
- identify and implement appropriate training and information resources for staff.

3. Scope

This plan refers to all childcare facilities as defined in the Child Care (Pre-School Services) (No 2) Regulations 2006, Department of Health & Children¹ and those Critical Incidents as defined in Section 4 and 5.

4. Definition of Critical Incident

A critical incident is any incident or sequence of events which overwhelms the normal coping mechanisms of the school².

5. Emergency Preparedness

Emergency preparedness is the preparation and planning necessary to effectively handle a critical incident. It involves individuals assessing the likelihood of specific critical incidents occurring and developing an emergency plan that identifies the services they require, and the resources they need to have on hand in case such an incident occurs. The goal of these preparedness activities is to make sure that a facility is ready and able to respond quickly and effectively in the event of a critical incident.

As a minimum, the following emergency situations should be addressed:

- Medical Emergencies
- Missing Child
- Natural Disasters: flood, storms, icy weather
- Utility Disruption, water, electricity, heating
- Fire/smoke Emergencies
- Hazardous Material; chemical spills
- Potentially Violent Situations (unauthorized/suspicious person/intruder)
- Disgruntled or Impaired Parent/Guardian
- Bomb Threat
- Pandemic Flu or other Pandemic Episodes
- Evacuation Process and Procedure for Sheltering Off-site
- Gas leak

Childcare facilities located in office buildings and other shared space need to identify the emergency response coordinator for the building and coordinate the programs' plans with the others involved. You will need to advocate for the unique needs of children.

¹ Child Care (Pre-School Services) (No 2) Regulations 2006, Department of Health & Children

² National Educational Psychological Service (NEPS), 'Responding to Critical Incidents, Guidelines for Schools', Department of Education and Science, 2007

6. Responsibilities and Roles in Emergency Planning and Response

A. The Childcare Provider/Manager/Person in Charge

- 1) Ensures that the facility remains in compliance with Child Care (Pre-School Services) (No 2) Regulations 2006 in regard to:
 - First Aid
 - Medical Assistance
 - Management and staffing
 - Registering of children
 - Records
 - Information for Parents
 - Fire safety measures
 - Premises and Facilities
- 2) Develops with help from a planning team the facility Emergency Preparedness Plan(s).
- 3) Trains staff and children in the provisions of Emergency Preparedness Plan(s).
- 4) Assigns emergency responsibilities to staff members as required, with regard to individual capabilities and normal responsibilities.
- 5) Secures necessary training for staff members (as applicable).
- 6) Conducts drills and initiates required plan revisions based on drill evaluations.
- 7) Keeps parents and staff members informed of Emergency Preparedness Plan revisions.
- 8) Supervises periodic safety checks of the physical facility, equipment and vehicles.

B. The Facility Staff (as available)

- 1) Participate in developing the facility's Emergency Preparedness Plan(s).
- 2) Participate in emergency preparedness training and drills.
- 3) Help children develop confidence in their ability to care for themselves.
- 4) Provide leadership during a period of emergency.

C. Facility Maintenance Personnel (as applicable)

- 1) Participate in developing the facility's Emergency Preparedness Plan(s).
- 2) Conduct periodic safety inspections of the facility.
- 3) Identify shut-off valves and switches for gas, oil, water and electricity. Post a chart showing shut-off locations so that others can use them in an emergency.
- 4) Provide for emergency shut-off of the ventilating system(as applicable).
- 5) Instruct all staff members on how to use fire extinguishers.

D. Facility Food Service Personnel (as applicable)

- 1) Shall ensure that suitable, sufficient, nutritious and varied food is available at all times.
- 2) Maintain adequate supplies of non-perishable food and water for emergency use.
- 3) Rotate supplies to ensure freshness.

E. Parents

- 1) Become familiar with the Emergency Preparedness Plan(s) and procedures they are to follow.
- 2) Know the procedures for picking up their children if an emergency causes the facility to relocate to another site.
- 3) Ensure that the information the facility has on the children and parents is current and correct.
- 4) Where appropriate, assist the facility manager in writing the plan.

F. Community

The community, especially local government, can be a source of:

- a) Warning
- b) Emergency Resources
- c) Information

This assistance should come primarily from:

- d) Government Departments
- e) Emergency Medical Services
- f) Gardaí Síochána
- g) Fire Department
- h) Non-Governmental agencies

Other possible sources of assistance include:

- i) Individuals with relevant expertise
- j) Churches
- k) Civic clubs and organizations
- l) Businesses and industries

7. Preparing the Emergency Preparedness Plan(s)

It is important that facilities have a comprehensive written plan with procedures to be followed when a Critical Incident occurs. The plan should be rehearsed periodically.

Authority for the plan and its implementation should be established and the circumstances during which emergency procedures are to be followed must be identified. An awareness of the natural and human-caused hazards likely to occur in a particular area and a thoughtful assessment of the facility and available resources - both material and human - are required.

The first step is to identify those who will form the Critical Incident Management Team (CIMT). The team should include but is not limited to the following:

- Critical Incident Team Leader/Childcare provider/Manager
- Senior staff members
- Local Garda(i)
- Health and Safety Representative
- Facilities Maintenance Manager
- Parent representative(s)
- Representative of local health services
- Psychologist
- Media liaison

It is recognised that the constitution of a CIMT will depend on the size and complexity of the childcare facility. In smaller facilities, there may be only one person to perform several of the roles outlined.

7.1 The responsibilities of the team will include:

- a) Risk assessment of hazards and situations which may require emergency action and to which the facility may be vulnerable (Appendix A);
- b) Analysis of requirements to address these hazards;
- c) Development of an emergency preparedness plan for each critical incident identified;
- d) Establishment of liaison with all relevant emergency services e.g. garda, fire brigade, ambulance, GP, community emergency services, hospital, poisons information centre, community health services;
- e) 24 hour access to contact details for all children and their families;
- f) 24 hour access to contact details for all relevant staff members needed in the event of a critical incident;
- g) Assisting with implementation of emergency preparedness plans;
- h) Dissemination of planned procedures;
- i) Organisation of practice drills;
- j) Coordination of appropriate staff development;
- k) Regular review of emergency preparedness plans.

8. Development of Emergency Preparedness Plans

In the development of specific emergency preparedness plans, it should be recognised that there will be some common requirements and each facility should, at a minimum, have the following as standard:

- A current list of staff members' names, addresses and contact details for staff and next of kin;
- A current list of children including special needs requirements;
- An attendance log book;
- A current list of parents and second named guardian including contact details;
- Adequate first aid resources and a current list of staff with first aid training;
- A quick reference guide with contact details for the Critical Incident Team and essential services; (Appendix B)
- A clearly defined evacuation procedure which identifies pre-designated assembly areas and if required, a relocation shelter site;
- An evacuation bag (for suggested contents, see Appendix C);
- Up to date facility floor plans and maps outlining fire exits and location of essential services;
- Templates for communications with parents and the media (ref. Resource materials, Dept. of Education);
- Contact details for interpretive services if required;
- Maintaining a soft copy file of children's photographs, with parental consent, should be considered.

Emergency situations identified during risk assessment as being high risk to the facility should have a specific plan developed. These plans should be concise and consistent in their layout and format and should be in addition to organisation policies and procedures required by laws and regulation.

Each plan should identify:

- 1) The hazards – list the dangers should this emergency arise;
- 2) Preparedness – identify the measures in place to prevent this happening;
- 3) Response – include the specific actions required with relevant contact details included;
- 4) Recovery – outline the actions to be taken for recovery.

Sample plans are included in Appendix D.

9. Critical Incident Procedures

When an incident occurs, staff will immediately alert the facility manager or designated person. It is the responsibility of the manager to determine whether the incident is deemed to be critical. The facility manager or designated person will lead the emergency response and be guided by the Critical Incident Action Guide (Appendix E).

9.1 Immediate Response [within 24 hours]

- a) Identify the nature of the critical incident
- b) Implement the appropriate emergency preparedness plan
- c) Contact emergency services
- d) Delegate immediate first aid to trained staff
- e) If applicable, secure the area
- f) Ensure safety and welfare of children and staff
- g) Notify the critical incident team leader if not on site
- h) Liaise with emergency services, hospital and medical services
- i) Contact and inform parents and family members
- j) Identify children and staff members most closely involved and at risk
- k) Manage media and publicity
- l) Maintain Emergency Operational Procedure & Time Log (Appendix F)

9.1.1 Managing Stress Following a Critical Incident

Involvement in, or exposure to, abnormal workplace incidents can lead a person to experience distress. It is normal to react emotionally to a critical incident. It is important therefore that staff involved in a critical incident are kept informed and given the opportunity to rest and have time out from their routine duties following an incident.

The manager/person in charge should consider the following strategies:

- Convene a meeting for those involved as soon as possible;
- Summarise the incident and clarify uncertainties;
- Invite questions and discuss issues of concern;
- Show care and support for the individual;
- Draw up a plan of action, taking into account the needs of staff;
- Make short-term arrangements for work responsibilities;
- Ensure that staff are happy to leave the facility and are escorted home if necessary;
- Seek expert advice on debriefing.

9.2 Secondary Response [24–72 hours]

- a) Assess the need for support and counselling for those directly and indirectly involved.
- b) Provide staff, parents and wider community with factual information as appropriate.
- c) Arrange debriefing for all parents, children and staff most closely involved and at risk.
- d) Restore the facility to regular routine, program delivery, and community life as soon as practicable.
- e) Complete critical incident report.

9.3 Ongoing Follow-up Response

- a) Identify any other persons who may be affected by the critical incident and provide access to support services for community members.
- b) Provide accurate information to parents and staff.
- c) Arrange a memorial service and occasional worship as appropriate.
- d) Maintain contact with any injured and affected parties to provide support and to monitor progress.
- e) Monitor staff and children for signs of delayed stress and the onset of post traumatic stress disorder; providing specialized treatment as necessary.
- f) Evaluate critical incident and Emergency management plan.
- g) Be sensitive to anniversaries.
- h) Manage any possible longer term disturbances e.g. inquests, legal proceedings.

10. Communication with the Media

At all times the CIMT must balance the need for clear and effective communication with the rights of those involved to privacy. Where a critical incident involves issues of a sensitive nature, the team should agree on the information which can be disclosed and that which should only be disclosed on a need to know basis.

Each facility should have clear direction for staff on who within the organisation can communicate with the media. The named person should be in a position of authority and may include the facility manager or a representative of the board of management.

It is advised that a sample statement is agreed by the CIMT during the planning process.

In the event of a critical incident it is very important that the CIMT agree the process for dealing with the media at an early stage. This should include agreement on the following:

- The location for communication. Decide whether this is best suited onsite or offsite;
- The statement to be released. A sample announcement to the media is available in *“Responding to Critical Incidents, Resource Materials for Schools”*, Department of Education and Science, 2007;
- Whether an interview should be given.

Further guidance is available in *“Responding to Critical Incidents, Guidelines for Schools”*, Department of Education and Science, 2007.

11. Business Continuity Planning

Business Continuity Planning is working out how to continue operations under adverse conditions such as fires in buildings and utility breakdowns, natural incidents like severe ice and floods, and national incidents like pandemic illnesses. In fact, any event that could impact operations should be considered, such as supply chain interruption, loss of or damage to critical infrastructure (major machinery or computing/network resource). Business Continuity Planning should therefore be included in all emergency management risk assessment activities.

12. Evaluation and Review of Management Plan

- 1) After a critical incident, a meeting of the critical incident team will be held to evaluate the critical incident report, the effectiveness of the management plan and to make modifications as required.
- 2) The evaluation process will incorporate feedback gathered from staff, parents and local community representatives
- 3) An evaluation report will be made available to the management team.

Appendices

- A) Sample template for Emergency Risk Assessment
- B) Sample template for Emergency Contact List
- C) Suggested content for Evacuation Bag
- D) Sample Individual Emergency Preparedness Plans –
 - Severe Cold/Ice
 - Missing Child/Abduction
- E) Sample Critical Incident Action Guide
- F) Emergency Operational Procedure & Time Log
- G) Contacting Emergency Services – What to Expect
- H) Principles of Evacuation
- I) Principles of Lockdown or Sheltering on Site

References

- 1) Child Care (Pre-School Services) (No 2) Regulations 2006, Department of Health & Children
- 2) National Educational Psychological Service (NEPS), *'Responding to Critical Incidents, Guidelines for Schools'*, Department of Education and Science, 2007

Appendix A

Sample Emergency Preparedness Risk Assessment

INSTRUCTIONS:

When conducting this risk assessment, you need to evaluate every potential event in each of the three categories of likelihood, risk, and preparedness. Add or remove events as appropriate to your facility.

Likelihood: Consider the following:

- 1) Known risks
- 2) Past events
- 3) Manufacturer statistics

Risk: Consider the following:

- 1) Threat to life and/or Health & Safety
- 2) Disruption of services
- 3) Possibility of failures
- 4) Loss of community trust
- 5) Financial impact
- 6) Legal issues

Preparedness: Consider the following:

- 1) What plans are in place
- 2) How many staff are trained
- 3) Insurance cover
- 4) Availability of back-up systems
- 5) Community resources

For each category assign the value that you believe accurately reflects the present situation.

Multiply the ratings for each event in the area of likelihood, risk and preparedness. The total values, in descending order, will represent the events most in need of focus and resources for emergency planning. Determine a value below which no action is necessary. Acceptance of risk is at the discretion of the organization.



Critical Incident Plan
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Appendix A

Emergency Preparedness Risk Assessment

EVENT	LIKELIHOOD			LIFE THREAT	HEALTH/ SAFETY	RISK			PREPAREDNESS			TOTAL
	HIGH	MOD	LOW			HIGH Business Impact	MOD Business Impact	LOW Business Impact	POOR	FAIR	GOOD	
SCORE	3	2	1	5	4	3	2	1	3	2	1	

HUMAN

Bomb threat													
Child Abduction /Missing Child													
Community Disaster													
Medical Emergency (Anaphylaxis, choking, fracture)													
Violence													

NATURAL

Epidemic													
Lightning occurrence													
Severe storm/flooding													
Severe cold conditions													
Water contamination													

TECHNICAL

Electrical Failure													
Fire, Internal													
Generator Failure													
Hazmat Exposure													
HVAC Failure													
Gas Leak/explosion													

Appendix B

EMERGENCY CONTACT LIST

CRITICAL INCIDENT MANAGEMENT TEAM	Role	Name	Phone No. (Mobile)	Phone No.	
				Day	Night
	Director/Manager				
	Staff member 1				
	Staff member 2				
	H&S Officer				
	Facilities Manager				
	Parent Representative 1				
	Parent Representative 2				
	Psychologist				
Media Contact					
Health Services					

Life-threatening or time-critical emergency	999/112	999/112	999/112
Local Garda Station			
Ambulance			
Fire Services			
Local Doctor			
Hospital(s)			
Electricity			
Water Supplies			
Gas			
Priest/Spiritual leader			
County Childcare Services			
HSE Preschool services			
Health & Safety Authority			
Local Authority			

Emergency Evacuation Bag Checklist

Keep the Emergency Evacuation Bag in a designated, easily accessible place. It is advised that the bag should be designed to wear over the shoulder or on the back (rucksack) and should be a distinctive colour. The contents of the bag should be checked weekly.

Have you:	
Child Data	
Children and staff with special needs list	
Child Release Forms	
Staff Data	
Emergency Contact List	
Traffic safety vests	
Keys	
Standard portable First Aid kit with bandages, Savlon, antiseptic wipes	
Medical and special needs list: children with asthma, allergies including special medications e.g. asthma inhalers, EpiPens	
A charged mobile phone	
Torch with replacement batteries (or wind up torch)	
A megaphone/loudspeaker	
Portable battery powered radio	
Bottled water	
Portable non perishable snacks such as sultanas, dried fruits, energy bars	
Copy of facility site plan and evacuation routes	
Toiletry supplies & sunscreen	
Whistle	
Plastic rubbish bags and ties	
Portable DVD player & DVDs	
Other:	

Appendix D

EMERGENCY PREPAREDNESS PLAN

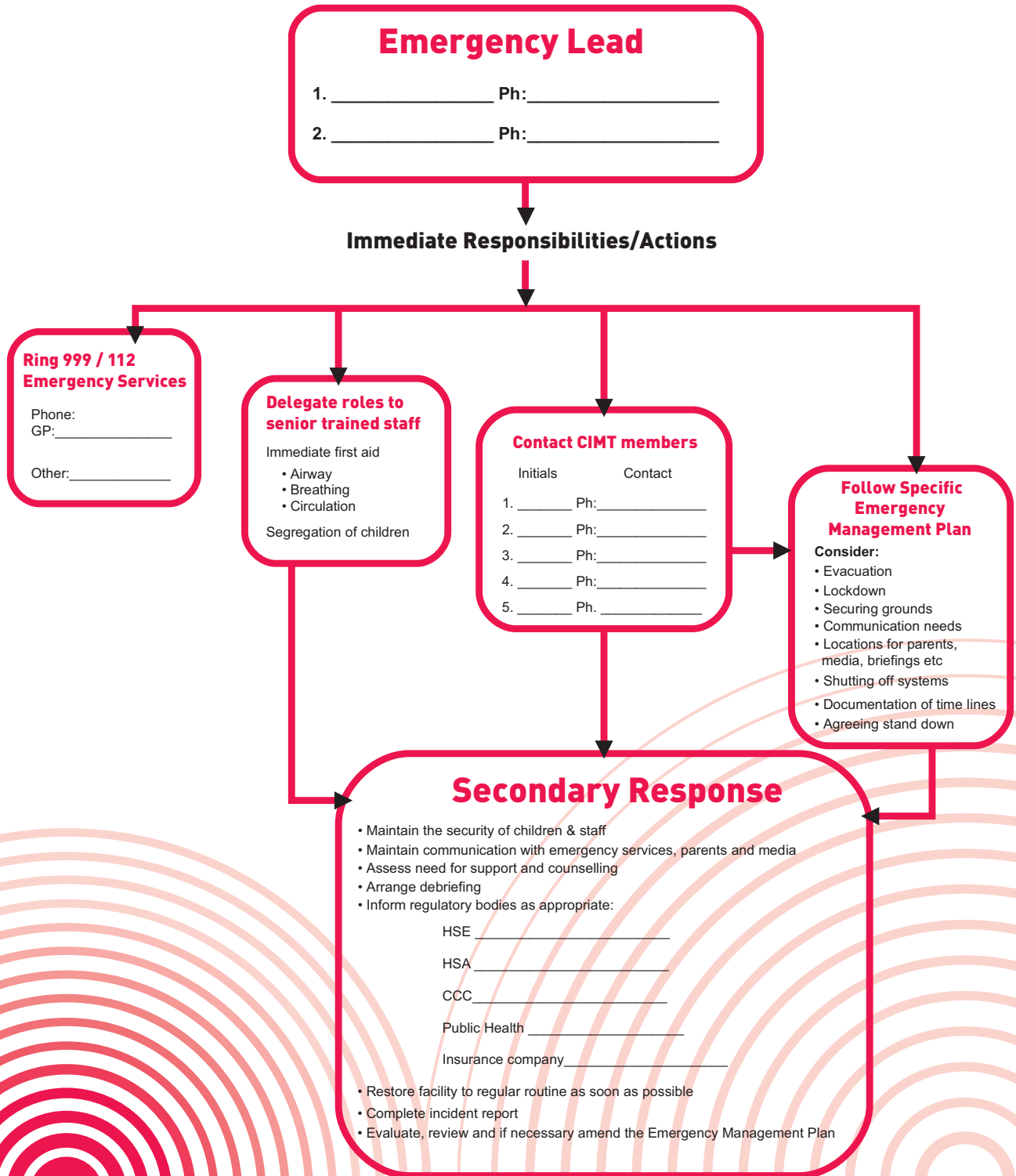
	EMERGENCY: Severe Cold/Ice
RISKS	<ul style="list-style-type: none">• Damage to pipe work systems• Damage to premises or plant items exposed• Vehicle accident• Slips and falls
PREPAREDNESS	<ul style="list-style-type: none">• Frost protection system in place• Heat sources near water tanks• Sourcing of salt supplies in early Autumn• Building is checked when unoccupied during cold spells• Monitoring of weather forecasting• First aid equipment on site• Web texting in place
RESPONSE	<ul style="list-style-type: none">• Respond to warnings received from media or local authorities• Check facility systems, water, gas etc• Check the building• Contact maintenance re distribution of salt on all external pathways and driveways• Assess Health & Safety risks –structures, sources of heat and/or water compromised, grounds unsafe etc• Risk assess the need for shutdown of services• Use web texting for communication with parents <p>Plumber: _____</p> <p>Electrician: _____</p> <p>Facility manager: _____</p>
RECOVERY	<ul style="list-style-type: none">• Full inspection of facilities and grounds• Repair structures as necessary• Liaise with parents in regard to restoration of services• Review emergency preparedness plan

EMERGENCY PREPAREDNESS PLAN

EMERGENCY: Missing Child/Child Abduction	
RISKS	<ul style="list-style-type: none"> • Injury, trauma or death of a child
PREPAREDNESS	<ul style="list-style-type: none"> • Security systems in place • Up to date contact details for parents • Registration and log in of all visitors • CCTV monitoring • Staff training • Local protocol in place for field trips • Local procedure in place for child collection • Reference file of child photographs, updated annually • Plan tested annually
RESPONSE	<ul style="list-style-type: none"> • Confirm that the child is missing • Ensure that all other children have been accounted for • Conduct search of building and local area • Inform facility manager/person in charge • Call Emergency services – 999 or 112 • Convene CIMT meeting • Gather information to establish when and where the child was last seen • Furnish Gardaí with photograph and accurate details of child's age and what the child was wearing • Notify the child's parents • Refer media enquiries to the designated person • Consider press release to local radio seeking assistance with advice from Gardaí • Undertake search of the locality under the direction of the Gardaí
RECOVERY	<ul style="list-style-type: none"> • Establish the safety and wellbeing of the child when found • Arrange child medical review • Seek support from counselors where appropriate • Conduct root cause analysis and review of systems • Amend emergency preparedness plan as necessary • Initiate new systems as appropriate

Appendix E

CRITICAL INCIDENT ACTION GUIDE



EMERGENCY OPERATIONAL PROCEDURE & TIME LOG

Emergency: _____ **Date:** _____

Time of Initiation: _____ **Time of Stand down:** _____

Issues to Be Addressed	Time	Comments
Coordinator identified		
CIMT members contacted		
Initiate appropriate emergency preparedness plan		
Assess child/staff safety		
Outside sources to be contacted		
Gardai/Ambulance/Fire Brigade		
Will evacuation/lock down be required		
Activate fire alarm		
Do children need to move to relocation site?		
Add food supplies to evacuation bag		
Delegation of duties to Staff <ul style="list-style-type: none"> • First aid • Segregation of children • Services need to be isolated • Are all entrances secure • Front door • Emergency exits • Assistance required for evacuation • Secure Site 		
Have off duty staff to be contacted?		
Do parents need to be contacted?		
Do services need to be cancelled		
Organize for collection of children		
Consider impact on electricity supply		
Consider impact on gas supply		
Consider impact on water supply		
Consider impact on other services		
Consider impact on security		
Is there an Infection risk?		
Are there P.R. issues to be addressed		
Involve commercial services		
Locate supply of specialist equipment		
Locate approved subcontractors		
Record specialist contractor contact details		
Emergency lead calls stand down		
All Parties informed of stand down		

Co-ordinator Signature: _____ Date: _____

Copies of report to: Board of Management, CIMT members

Appendix G

Contacting Emergency Services – What to Expect

What happens when you call 112 or 999

When you dial 112 (or 999), your emergency call is answered at a Public Safety Answering Point (PSAP). The specially trained call-taker will request you to state which service you require (i.e. An Garda Síochaná, Fire Service, Ambulance Service or Coast Guard) and will also check your location with you. The call is then transferred to the Emergency Service Control Centre you requested based on your location and handled accordingly. Most importantly if the line is busy, please do not hang up. The call will be answered as quickly as possible.

You will be asked the following:

Depending on which emergency service you request, you will need to clearly communicate the following information:

- Where the emergency is:** Give the exact address of the incident or emergency and/or any noticeable landmarks nearby. Try to give clear directions to the scene of the emergency
- Contact details:** The telephone number you are calling from
- What has occurred:** Details on the incident itself, when it occurred and whether it will require more than one of the services e.g. ambulance and fire services
- Who is involved:** The number of persons involved, the description of any visible injuries and knowledge of any pre-existing medical conditions

Remember, it is important to wait for the call-takers instructions, try and stay calm and don't hang up until they tell you to.

Placing the facility address with accompanying directions near the telephone can help staff, children, or even visitors, should they have to dial 112 (or 999).

PRINCIPLES OF EVACUATION

General

- The emergency procedures for facilities should include evacuation plans for the building.
- All members of staff should be familiar with the details of these plans and be trained in fire safety.
- It is essential that the plans are practised on a regular basis to ensure that evacuation can be carried out effectively in a real emergency.
- Because of differences in the layout of buildings, the evacuation methods should be developed to suit the individual circumstances.
- The procedures and techniques involved should be as simple as practicable and easily performed by a minimum number of staff.
- The presence of an adequate number of staff at all times to deal effectively with any emergency and to carry out evacuation as required is essential.
- The evacuation bag will be taken whenever evacuation is to occur.

Assessing the Situation

The situation should be assessed before the decision to evacuate is made. In doing this, consideration should be given to:

- the location of the fire;
- the seriousness and extent of the fire;
- the presence and extent of smoke;
- the proximity of flammable materials;
- whether the immediate action taken to control the fire is having the desired effect;
- the age and ability of children in the vicinity.

IF IN DOUBT, EVACUATE!

The authority to order the evacuation should be clearly established in the emergency procedures. The authorized persons should act on their own initiative, pending the arrival of the fire brigade. Evacuation should be conducted in distinct stages, as follows:

Stages of Evacuation:

- Phase 1:** Evacuation from the room/area of origin of the fire
- Phase 2:** Evacuation to a place of relative safety (behind a fire door)
- Phase 3:** Evacuation of parts of the building
- Phase 4:** Total evacuation of building to identified assembly points
- Phase 5:** Evacuation from assembly points to the identified relocation site

Evacuation Priorities

The first priority is to move any children or staff who are in immediate danger to a safe area. For the purpose of speedy evacuation, it is normal to carry out the evacuation in the following order of priorities:

- (a) ambulant children requiring only a member of staff to guide or direct them;
- (b) non-ambulant children/babies who have to be physically moved or carried.

Evacuation Techniques

Special care will be needed in the evacuation of non-ambulant children/babies. Various items of equipment may be employed to assist with evacuation, including wheeled trolleys and wheelchairs, blankets, carry sheets, stretchers, evacuation sheets, etc. It is important to ensure that a sufficient number of staff are available for effective evacuation, when required.

Shelter Outside the Facility (Relocation Site)

If the hazard is more widespread, it may be necessary to relocate the children and the staff to a shelter in a safe area. This relocation site should be convenient to the facility but far enough away to ensure safety. A relocation site should be agreed during emergency planning and all parents should be aware of its location. You may wish to have a formal agreement with the relocation facility and it is advised that you visit the potential relocation facility and explain the types of circumstances under which you may need to use their facility. This is a good opportunity to agree issues of notification, access and requirements while on site.

Appendix I

Principles of Lockdown or Sheltering on Site

Lockdown

If there is a dangerous person inside or immediately outside the facility, the best procedure may be to lock all interior doors and to protect the staff and children in their rooms. To do this requires immediate action on the part of staff and should be done quietly and in an orderly fashion.

- A coded signal should be agreed during the emergency planning process and all staff must be trained to recognise this signal which warns them that there is a danger and that all rooms should be locked.
- Children should be kept inside the rooms, away from doors or windows where they can be seen
- The senior on-site person should summon the Garda Síochaná. Efforts to get the dangerous person(s) to leave the facility should only be taken if it is safe to do so.
- Staff should only unlock the doors to their rooms if they hear a previously agreed-upon “stand down” signal.

Shelter in the Facility

If it is unsafe for the occupants of the facility to go outside, provisions should be made to provide “protected spaces” inside. Depending on time available to move the children, it may be necessary to try to shelter in a “close” part of the facility, rather than the most protected space.

In either case, these spaces should:

- Be in the interior of the building away from glass that may shatter.
- Not be in rooms with large ceiling spans (like gymnasiums or auditoriums) that may fall if subjected to strong winds
- Have furniture and wall-hangings secured so that they will not fall onto occupants.

Suggestions on where to find these “protected spaces” are:

- Interior hallways, toilets/bathrooms, or other enclosed small areas away from large glassed-in areas or open rooms. These locations should be identified during the planning process and made known to all staff. Consider marking these sites on a facility floor plan
- If hallways are not suitable, use the inside wall of a room on the opposite side of the corridor from which the storm is approaching.
- Check the space available and number of persons who will use each area (match people with space).
- If you are being kept inside because of smoke or toxic chemicals outside, all air intakes and openings should be closed to protect the atmosphere inside.
- While basements may offer protection from dangerous weather conditions, be aware that:
 - There may be items stored in the basement that are not child-friendly,
 - You may be unable to use mobile phones.
 - There may be danger of flooding or a real danger of not being able to get out – making it even more important that the emergency services know where you are.