

# **GUIDE FOR EMERGENCY CHILD CARE CENTER OPERATIONS**

**During disasters and emergencies**

**DEVELOPED BY THE  
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# EMERGENCY CHILD CARE CENTER OPERATIONS

This document is designed to be used as a guide to establish an emergency community child care center. The child care operation would be established as a temporary operation for as long as the disaster or emergency response required child care. An emergency child care center might be required following a disaster or emergency when children must be sheltered. It could also be required when community residents are involved in a long term response to a disaster and their children will require extended care outside of the home.

The guide presents the essential elements of what has become standard practice in child care operations. They address basic safety, health, food service, and general child care principles. As of this writing, an emergency child care operation need not be licensed under Alaska statute but to the extent possible the guidelines in this and other resources should be implemented to the maximum extent possible.

Adhering to these guidelines is extremely important in an emergency or disaster because of the disruptions and uncertainties and emotional distress on the community and especially children. Implementing strict standards for caring for children during a disaster ensures their safety and physical and emotional health during the disaster.

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## FACILITIES AND EQUIPMENT

**Facilities and Equipment.** The Emergency Child Care Center should provide a protective physical environment.

**Indoor Space.** There should be enough usable space indoors so children are not crowded.

1. Ideally there should be a minimum of 35 square feet of usable space per child in each activity room, with an additional minimum of 15 square feet for crawling and protected play for children 6 weeks to 24 months.
2. If possible provide a minimum of 50 square feet of usable space per child in rooms in which cribs are utilized for sleeping.
3. If possible use a barrier at least 6 feet high to separate the space for infants under 6 months from the space for older children.
4. Arrange the space to accommodate children individually, in small groups, and in large groups.

**Outdoor Space.** If possible provide outdoor playgrounds for each age group.

1. Have a minimum of 75 square feet of outdoor play area for each child playing on the play-ground.
2. Provide a separate playground area for children under 2 years of age.
3. Enclose the exterior of the outdoor play area with a fence at least 5 feet high.
4. Use gates that can be securely fastened and cannot be opened by children under 5 years of age. Unlock gates while children are in the building.

**Support Space.** Provide facilities and equipment to support staff managing the child care center. If possible provide:

1. An office.
2. Kitchen.
3. Laundry area.
4. Janitorial closet
5. Storage closet
6. An isolation area near a lavatory and flush toilet.

7. Provide individual storage space for each child's personal belongings in each activity room;
8. Provide enough space so that children's coats and hats do not touch other children's.

**Toilets and Diaper-Changing.** Locate toilets and sinks within or near room used by children 5 years and under.

1. Ideally provide a minimum of one flush toilet for every 15 children over 2 years and a sink with running water close to all toilet areas.
2. Provide a sink and an area for diapering and a separate area and sink for food service for each group of children in infant and toddler areas.
3. Perform food-service functions in the kitchen when a separate sink is not available.

**Equipment.** Provide age-appropriate equipment and furnishings in activity rooms.

1. To create a homelike environment, use soft elements, such as: Carpeting, Cushions, Rocking chairs, banners, wall hangings, play curtains, tablecloths, etc.
2. Provide one chair and table space for each child over 12 months of age.
3. Provide low shelving for storage of play materials. Shelves must be accessible to children. They may be used to divide the room into small areas.
4. Have a cot, crib, or mat, and tight-fitting bed linens and blanket available for each child.
5. Divide each room for children over 2 years into interest centers.
6. Make sure that when more than one group (two ratios) occupies a room, each group has its own clearly defined space and its own basic interest centers or areas.

## **FIRE PROTECTION**

**Fire Protection.** Facilities used for child development programs must be built and operated to protect children and adults from fires and related hazards.

**Structural Fire Certification.** Ideally have a fireman, engineer, environmental health and safety officer or other qualified individual inspect the facility used for an emergency child care center to determine that it meets National Fire Protection Association Life Safety Codes.

**Operational Fire Inspections.** If possible the emergency child care facility should be periodically evaluated with a comprehensive fire inspection.

**Evacuation Plan.** An evacuation plan should be developed. It should include

1. Responsibilities of each staff member
2. Evacuation plan – every room used for child care must have at least two exits. Exits could include both doorways and accessible windows.
3. Evacuation assembly area.

**Fire Drills.** A fire drill should be conducted at least weekly.

## ACTIVITIES

Ideally activities that promote children’s social, emotional, cognitive, and physical development should be conducted while children are cared for.

**Activity Plans .**The staff should prepare activity plans that include a balance of indoor/outdoor; quiet/active; individual/small group/large group; large muscle/small muscle; and child-initiated/adult-initiated activities.

**Materials.** Provide sufficient quantities of developmentally appropriate materials. These could include:

1. Rattles, squeak toys, action/reaction toys.
2. Cuddly toys.
3. Toys to mouth such as teethers, rings.
4. Push and pull toys.
5. Stacking toys, large wooden spools/beads/cubes.
6. Sturdy picture books, music.
7. Pounding benches, simple puzzles.

8. Play telephones, dolls, pretend toys.
9. Large paper, crayons.
10. Manipulatives such as stacking toys, large wooden spools/beads/cubes.
11. Active play equipment for climbing and balancing.
12. Unit blocks and accessories.
13. Puzzles
14. CDs, musical instruments, audio recordings/tapes.
15. Art materials, such as finger and tempera paints, crayons, scissors, and paste.
16. Dramatic play materials such as dolls, dress-up clothes and props, child-sized furniture, puppets.
17. Active play equipment and materials such as bats and balls for organized games.
18. Construction materials for woodworking, unit blocks, accessories for blocks.
19. Materials for hobby and art projects, science projects.
20. Materials for dramatics, cooking.
21. Board and card games.

**Use of Media.**

1. Use media, such as television, films, audiotapes, videotapes, and computer software to developmentally appropriate programming.
2. Use active media that children can control as part of the room environment along with other active learning materials that children can choose. Provide equal access to these materials to all children.
3. Have the staff help the children use these materials independently.

## **STAFFING**

**Director.** Each Emergency Child Care center must have a director who will be responsible for operation of the center.

**Staff Qualifications.** To the extent possible use staff that have the qualifications and training required to protect the health and safety of children and provide a program of developmentally appropriate activities.

**Orientation Training.** The Child Care Director will be responsible for providing orientation and training for staff.

**Staff-to-Child Ratios.** Have an adequate number of adults to protect the health and safety of children and implement a developmental program.

1. For infants 6 weeks to 12 months, have no more than 4 children per staff member at all times.
2. For pretoddlers 12 months to 24 months, have no more than 5 children per staff member at all times.
3. For toddlers, 24-36 months, have no more than 7 children per staff member.
4. For preschoolers, 3-5 years have no more than 12 children per staff member.
5. Ensure the staff-to-child ratios under all circumstances protect the health and safety of the children.
6. For mixed age groups, follow the staff-to-child ratio for the youngest age group if the children in the youngest age group make up 20 percent for more of the group. If the program combines children 6 months through 24 months, to maintain consistency in caregiving, use the ratio that is required for the youngest 20 percent of the children in the group.
7. During rest time the staff-to-child ratios for children over 24 months of age should not be more than twice the required staff-to-child ratio.
8. Have staff required to meet the staff-to-child ratios, remain in the building during rest time and available to assist with emergencies or have staff with no other evacuation duties assigned to perform their duties.
9. If any children with special needs are present, adjust the required staff-to-child ratio to ensure all children receive good care.

**Support Staff.**

1. Make support staff and substitutes available to meet the needs of parents and children and assist the caregiving staff.

2. When staff is scheduled to work 4 or more hours consecutively with children, ensure they are provided time away from children at least 15 minutes in each 4 hour period.
3. Have the food service staff deliver the food in a timely manner and in a way that minimizes the need for preparation by the caregiving staff.

## **NUTRITION AND FOOD SERVICE**

**Meal and Snacks.** Provide meals and snacks in a sanitary, pleasant way to meet children's nutritional needs and promote good food habits.

1. Ensure children and adults thoroughly wash their hands immediately before serving food or assisting with meals and snacks and eating.
2. Serve breakfast, lunch, afternoon snack, dinner, and evening snack based on the program hours of operation.
3. Provide chairs, tables, and eating utensils suitable for the size and developmental levels of the children.
4. Use dishes and utensils that are easily washable.
5. Do not use Styrofoam products.
6. Make meals and snacks a pleasant, social learning experience for children. Use meal times to promote good nutrition habits.
7. Do not use food as a punishment or reward.
8. Have preschoolers and older children assist with table setting and clean up.
9. Ensure at least one adult sits with each group of children during meal/snack time and samples the food provided.
10. Provide children safe, drinking water throughout the day.

### **Bottle Feeding.**

1. Hold infants less than 8 months old for bottle and spoon-feeding.
2. Ensure bottles are removed when babies fall asleep.
3. Do not allow children to carry bottles around.

4. Do not prop bottles for babies who cannot hold their bottles.

## **CHILD ABUSE PROTECTION**

**Child Abuse Protection.** Operate the program in a way that protects children from child abuse and neglect while they are in out-of-home care.

**Supervision of Children.** Ensure a staff member supervises children at all times. Supervise children when they leave the group for toileting or other reasons.

1. Ensure each child is under the care of a specific adult and the adult knows where the child is at all times.
2. Ensure the physical design of the building permits visual monitoring of the care.
3. Monitor the care throughout the day to minimize the risk of child abuse or neglect.
4. Identify and report any suspected child abuse and neglect of children.
5. Do not permit staff members who have committed substantiated child abuse or neglect to be employed in the program.
6. Permit parents access to their children's rooms at all times.

## **PARENT INVOLVEMENT AND STAFF-PARENT INTERACTION**

**Parent Participation.** Give parents opportunities to be actively involved and for staff and parents to talk about the program and the care of the children.

**Parent Advisory Board.** Have a parent advisory board consisting only of parents.

**Parent Involvement.** Encourage parents to be involved in the program and in their children's care. Encourage parents to visit the program and assist with their child's care to the extent that their duty permits.

**Parent Notification.** Notify parents when their child is injured, exposed to disease, experiencing distress, or has experienced any other unusual occurrence.

1. Notify parents when their child is exposed to a communicable disease.

2. Notify parents immediately of any physical injury to their child, when the child is experiencing significant emotional distress, or when the child becomes ill.
3. Notify parents when their child has been the victim of suspected child abuse or sex play.
4. Notify all parents when there has been a substantiated child abuse or sex play incident in the center; protect the confidentiality of those involved.

**Communication with Parents.** Maintain regular, on-going two-way communication with parents to build trust and mutual understanding and to ensure that children's learning and developmental needs are met.

## **SAFETY**

**Safety Precautions.** Maintain facilities and operate programs in a way that protects the safety of the children, staff, and parents.

**Safety Monitoring.** Monitor the building, outdoor area, and all equipment for safety hazards.

**Chemicals.** Protect children from exposure to dangerous chemicals.

1. Store all chemicals and other potentially dangerous products (except bleach water solution), including medicines and cleaning supplies, in their original, labeled containers.
2. Store bleach water in a non-brand name container and clearly label it as bleach water. Use the same type of container throughout the facility. Keep it out of reach of children.
3. Keep all chemicals stored in locked closets or cabinets inaccessible to children.
4. Do not store chemicals with food.
5. Do not use cleaning products, which include a warning that they may not be used in areas occupied by children.

**Unsafe Equipment.** Protect children from unsafe equipment.

1. Do not use merry-go-rounds, narrow steep slides, trampolines, animal figure and hard seat swings, infant walkers, infant cushions and pillows, playpens, and toy boxes or other large hinged items.

2. Ensure heating elements, electrical appliances, tools, and other dangerous equipment are not accessible to children except when they are being used for educational experiences under direct staff supervision.
3. Do not have toys and other objects within the reach of infants and toddlers that are so small that they could be swallowed and cause choking.
4. Have no sharp objects such as adult scissors and knives accessible to children.
5. Keep the sides of infants' cribs in a locked position when cribs are occupied.

**Toxins.** Ensure no flaking or deteriorating paint or lead-based paint is accessible to children.

1. Post the names of children with allergies in every room in which the child has meals/snacks in the same way and similar location.
2. Do not permit smoking or use of alcohol or illegal drugs in facilities or outdoor areas used for child care.

**Other Dangers.** Protect children from electrical shock, hot water, unhealthy or dangerous animals and other dangers.

1. Ensure electrical outlets, except those with built-in protection, are covered with protective caps in rooms used by children 5 years and under.
2. Ensure hot water at outlets used by children does not exceed 120 degrees F.
3. Do not use microwave ovens/bottle warmers/crock pots/heated pans of water to warm baby bottles or infant/toddler food.
4. Ensure all pets and animals brought into the center are safe and healthy to be with children.
5. Do not use baby powder or similar powders for diapering.

**Medications.** Administer medications in a way that protects children.

1. Administer medications only under daily written direction of parents or a health care provider.
2. Ideally medications should be administered by the same person each day, when possible.

**Outdoor Hazards.** Keep the outdoor play area a safe and healthy place for children to play.

1. Ensure there are no sharp edges, pinch points, protruding or rusty objects, missing parts, or hot surfaces.
2. Remove debris, sharp objects, holes, feces, glass, trash, and standing water.
3. Ensure culverts, drainage ditches, sewer accessories, and all similar hazards are inaccessible to children.
4. All areas of the playground must be visible for supervision.

**Playground Equipment.** Keep playground equipment and play zones safe.

**Indoor Safety.** Keep the indoor play area a safe place for children.

1. Floor coverings must be attached to the floor or backed with nonslip coverings.
2. Ensure stairways have nonslip surfaces and stairways with over three steps, which are used by children, have handrails.
3. Keep floors, stairs, ramps, walks, and porches free of hazards.
4. Interior doors in areas used by children must be operable from either side.

**Emergencies.** The program must be prepared to respond to emergencies.

1. Post emergency telephone numbers and evacuation routes in a conspicuous place.
2. Have first aid supplies readily available. In the first aid supplies include bandages, sterile gauze, adhesive tape, medicated soap, cotton, disposable gloves, and tweezers.
3. Ideally have a person certified in first aid and rescue breathing available in each facility during all hours of operation.
4. Ensure staff and volunteers are familiar with emergency procedures.

**Sudden Infant Death Syndrome (SIDS).** Follow recommended practices to reduce the potential for SIDS.

1. Place infants on their back to sleep.
2. Do not place infants face down on soft cushions, comforters, etc.
3. Keep pillows and other soft materials out of cribs and play areas.

## HEALTH

**Health Protection.** Protect the health of staff, children, and parents while they are in the program.

1. **Access.** Limit the access of well children to children or adults with contagious illnesses.
2. Do not admit children with an illness or after an illness when their presence will endanger the health of others.
3. Screen children at the time of entry and during care for signs of illness.
4. Have an isolation room for children who become ill. The room should have a bed/crib and be in a location where children can be readily observed.
5. Request the child's medical provider provide specific instructions for the care of children with special health problems.
6. Ensure adults with contagious diseases are not in contact with children.
7. Place cribs, mats, and cots at least 1.5 feet apart when in use unless they have closed sides.
8. Have children sleep head-to-toe.

**Sanitizing Solution.** Household bleach is the best sanitizing agent for disinfecting and killing germs on surfaces. An effective sanitizer can be made by adding 1 tablespoon of bleach to one gallon of water. This solution can be used in a spray bottle.

After cleaning an area or object with soap and water, the sanitizing solution should be sprayed on the surface and allowed to air dry.

**Cleanliness.** Keep rooms and surfaces clean and disinfected to reduce the spread of disease.

1. Disinfect all surfaces surrounding toilets, diaper changing areas, and tables and chairs at least daily.
2. Clean and sanitize hard surface play contact surfaces with bleach solution daily.
3. Ensure all carpets are vacuumed each day and shampooed at least quarterly.
4. Sweep and disinfect hard surface floors daily and after use for lunch service.

5. Disinfect cribs and cots before use by another child and at least weekly.
6. Launder bed coverings before use by another child and at least weekly.
7. Keep dirty linen, trash, mops, brooms, and cleaning buckets inaccessible to children.
8. Ensure infant equipment is washed and disinfected daily.
9. Sanitize toys that are mouthed before another child uses them.

### **Diapering and Toileting.**

1. Use disposable water-resistant pads to cover the changing surface.
2. Place each wet/soiled diaper or garment in an individual plastic bag and tie the end before disposing of it.
3. Use only disposable diapers.
4. Disinfect the changing table immediately after use and before use by another child with sanitizing bleach water solution.
5. Prepare the bleach water solution daily and in the appropriate strength.
6. Keep food out of the diaper changing area; keep all diapers and other toilet articles out of the food area.
7. Wash hands thoroughly after changing a diaper.

**Handwashing.** Ensure children and staff follow the requirements below for handwashing.

1. Wash children's hands immediately after diapering/toileting, outside play, and handling animals; before eating and water play; and after contact with any potentially infectious materials including bodily fluids.
2. Have the staff wash their hands immediately after changing a diaper or wet/soiled garment, after wiping noses and handling animals, and before serving or preparing food.
3. Post signs near handwashing sinks reminding staff and children of handwashing procedures.
4. Ensure staff and volunteers know and follow the recommended procedures for handwashing, including washing with liquid soap and warm running water for at

least 10 seconds; using single use or disposable towels; and avoiding recontamination from faucets by turning off faucets with a towel.

5. If possible require staff members to wear gloves when contact with blood or feces is possible.