



## National Commission on Children and Disasters



### **Preparedness Indicators for Children** **Adapted from “Incorporating Children” List** **FEMA’s Comprehensive Planning Guide 101 Version 2.0**

#### **Preparedness**

- Does the planning group include individuals with expertise in pediatric issues, as well as relevant advocacy groups, service providers, child serving agencies and subject matter experts?
- Does the plan include demographic data and information on the number of children and where they tend to be (e.g., schools, daycare facilities)?
- Does the plan identify the agency with the lead role for coordinating planning efforts and ensuring that children are incorporated into all plans?
- Does the plan identify support agencies to assist the lead agency in coordinating planning efforts and ensuring that children are incorporated into all plans?
- Does the plan identify a child coordinator to provide expertise for the emergency planning process and to support the Incident Commander, the Planning Section, and/or the Operations Section during an emergency?
- Does the plan include mechanisms or processes to effectively identify children and families who will need additional assistance with their specific health-related needs in advance of, during, and following an emergency?
- Does the plan address procedures to secure medical records to enable children with disabilities and/or other special health care needs to receive health care and sustained rehabilitation in advance of, during, and following an emergency?
- Does the plan identify which position/agency is authorized to direct supporting departments and agencies to furnish materials and commodities for children with disabilities and/or other special health care needs?
- Does the plan identify critical human services and ways to reestablish these services following a disaster for children and their families?
- Does the plan identify roles and responsibilities for supporting children?
- Does the plan prioritize governmental and nongovernmental resources to meet critical needs such as accessible housing, rental assistance, debris removal, and emergency repairs for families of children with special health care needs?
- Does the plan identify training and exercise opportunities for first responders and emergency managers to learn how to fully incorporate children into emergency management plans and operations?
- Does the plan describe vetting, training, and use of spontaneous volunteers who may offer their services to families with children?
- Does the plan include mechanisms or processes for provision of emergency childcare services?
- Does the plan include mechanisms or processes for the reunification of children with families?
- Do exercises include children and child congregate care settings such as school, childcare, child welfare, and juvenile justice facilities?
- Does the plan integrate child congregate care settings such as schools, child care, child welfare and juvenile justice centers and child serving agencies?
- Does the plan identify means to address a surge of pediatric patients in need of medical or mental health services?
- Is a sufficient amount of pediatric medical countermeasures stockpiled and accessible in case of a pandemic influenza, chemical, biological, radiological or nuclear threat?

## **Evacuation Support**

- Does the plan identify which official has the authority to order an evacuation?
- Does the plan identify the roles and responsibilities for advanced/early evacuation, which is often necessary to accommodate children with mobility issues?
- Does the plan identify the agency that has the lead role in coordinating an evacuation and ensuring children are incorporated into all evacuation considerations and planning?
- Does the plan include affirmative recognition of the need to keep children with disabilities with their caregivers, mobility devices, other durable medical equipment, and/or service animals during an evacuation?
- Does the plan outline procedures to ensure the availability of sufficient and timely accessible transportation to evacuate children with disabilities whose families do not have their own transportation resources?
- Does the plan identify means and methods by which evacuation transportation requests from schools, specifically schools with children who have disabilities, are collected and consolidated?
- Does the plan identify means by which incoming transportation requests will be tracked, recorded, and monitored as they are fulfilled?
- Does the plan identify accessible transportation resources (including paratransit service vehicles, school buses, municipal surface transit vehicles, drivers, and/or trained attendants) that can provide needed services during an evacuation?
- Does the plan address re-entry?

## **Shelter Operations**

- Does the plan include mechanisms or processes for ensuring there will be adequate accessible shelters that fully address the requirements of children, including those with medical needs?
- Does the plan address adequate shelter space allocation for families who have children with special needs (i.e., disabilities and chronic medical needs) who may need additional space for assistive devices (e.g., wheelchairs and walkers)?
- Does the plan address necessary developmentally appropriate supplies (e.g., diapers, formula, age appropriate foods), staff, medicines, durable medical equipment, and supplies that would be needed during an emergency for children with disabilities and other special health care needs<sup>1</sup>?
- Does the plan include mechanisms or processes for handling of and providing for unaccompanied minors in shelters?

## **Public Information and Outreach**

- Does the plan identify ways to promote personal preparedness among children, as well as their families and caregivers (including school and daycare personnel)?
- Does the plan identify mechanisms for disseminating timely and accessible emergency public information using multiple methods (e.g., television, radio, Internet, sirens) to reach families of children with sensory and cognitive disabilities, as well as families with limited English proficiency?

## **Pediatric Emergency Response Training**

- Is basic pediatric emergency response training, appropriate for each position, provided to emergency managers, first responders, pre-hospital medical care providers, hospital care providers, other health and mental health care professionals, school personnel, child care and early education providers, social services providers?

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<sup>1</sup> National Commission on Children and Disasters. 2010 Report to the President and Congress. AHRQ Publication No. 10-M037. Rockville, MD: Agency for Healthcare Research and Quality. October 2010: Appendix F, <http://www.ahrq.gov/prep/nccdreport/nccdreport.pdf>.

### **Pediatric Medical Supplies and Equipment**

- Are first responders and pre-hospital medical care providers, equipped with recommended<sup>2</sup> pediatric supplies and equipment?
- Are hospitals equipped with recommended<sup>3</sup> supplies and equipment?

### **Child Congregate Care Settings**

- Do child congregate care settings, such as schools, child care, and child welfare and juvenile justice centers have comprehensive emergency operations plans that include procedures for evacuation, shelter-in-place, caring for children with disabilities and chronic medical conditions, and communication and reunification with families?
- Do child congregate care settings plan collaboratively with community partners including first responders, public health and emergency management officials?
- Do child congregate care settings regularly train their personnel and exercise their plans with community partners, including first responders, public health and emergency management officials?
- Can child congregate care settings be restored quickly ? Have potential sources of support, including government, non-government, and private sector sources, been identified to assist in restoration of operations?
- Are personnel trained to recognize signs of distress, adjustment difficulties, and other behavioral and emotional issues in children and provide basic supportive services?

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<sup>2</sup> American College of Surgeons Committee on Trauma, American College of Emergency Physicians, National Association of EMS Physicians, Pediatric Equipment Guidelines Committee – Emergency Medical Services for Children Partnership for Children Stakeholder Group, and American Academy of Pediatrics, Equipment for Ambulances, (Washington, DC: Children's National Medical Center, 2009): 2-5, [http://www.childrensnational.org/files/PDF/EMSC/PubRes/Equipment\\_for\\_ambulances\\_FINAL.pdf](http://www.childrensnational.org/files/PDF/EMSC/PubRes/Equipment_for_ambulances_FINAL.pdf).

<sup>3</sup> American Academy of Pediatrics, American College of Emergency Physicians, and Emergency Nurses Association, “Joint Policy Statement: Guidelines for Care in the Emergency Department,” 1234.