



Family Emergency Evacuation Plan

my southern health

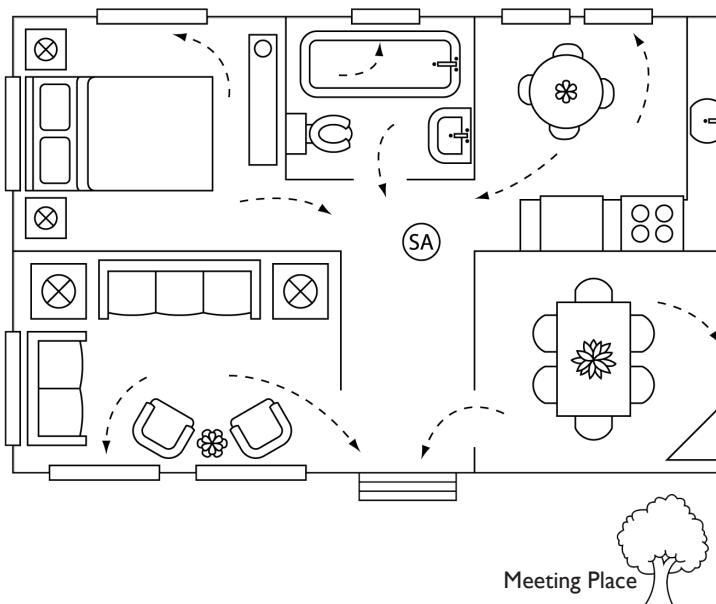
EMERGENCY EVACUATION PLAN

Please take time to develop an emergency evacuation plan with your family using this grid as a guide. Here are a few helpful hints when designing your family's escape plan:

- Make the plan large and easy for your child(ren) to read. If you have children who are too young to read, then use drawings to identify items specific to each room.
 - Your plan should include each level and every room in your home.
 - You should identify safe places in your home for different emergencies (i.e. an interior room or basement for a tornado).
 - You should identify a meeting place outside of the home for the entire family to meet in case of a fire or other emergency and mark it on your plan.
 - Have your child(ren) help you mark two exits (a door and a window) from each room in your home in case one exit is blocked.
 - Have your child(ren) help you draw a path from each room to the safe places and meeting place.
 - Include phone numbers for your local emergency departments on your plan.
 - Practice your emergency evacuation plan at least twice a year with your child(ren).
 - Post your emergency evacuation plan somewhere in your home it can be easily reviewed.
 - It may be helpful to take a picture of the meeting place that you and your child(ren) selected and post it in your child(ren)'s room(s) or on the refrigerator to help them remember the meeting place.

SAMPLE EVACUATION PLAN:

* SA stands for smoke alarm



Make copies of this page for each floor or level of your home. Remember to include:
Two exits from each room, safe places within the home, a meeting place outside of home,
plans for each floor of home, and phone numbers for local emergency departments.

LOCAL EMERGENCY DEPARTMENT PHONE NUMBERS

Police

Fire

Ambulance

Family Meeting Place

Other

EMERGENCY EVACUATION KIT

Recommended items to include in your kit



Family Evacuation Kit

- Large backpack or container for all emergency items
- Health profile of everyone in my family
- Medications (update regularly)
- Copy of insurance and benefits cards
- Copy of important paperwork (i.e. driver's license or ID card, bank information, immunization records, deeds, will, certificates)
- List of model and serial numbers of medical equipment
- Spare keys
- Cash, checks, or change
- First aid kit
- Wrench or pliers for utility shut-off valves
- Pen, pencil, and paper
- Cell phone charger
- Pre-paid calling card
- Extra batteries for medical devices or equipment
- Work gloves, rope, tarp, and utility knife
- Fire smothering blanket
- Emergency whistle
- Filter mask for each family member
- Flashlights with a crank operation or batteries
- Radio with crank operation or batteries
- Extra batteries for radio and flashlights
- Light sticks/glow sticks
- Can opener (manual)
- Plastic bags and waste bags
- Alcohol-based hand sanitizer or moist towelettes
- Non-perishable food for up to three days for each family member (update regularly)
- Bottled drinking water (1 gallon for each family member)
- Blanket (emergency silver blanket) or warm clothing for each family member
- Baby items (diapers, wipes, formula and water for 3 days, if applicable)
- Pet items (water and food, if applicable)

EMERGENCY EVACUATION KIT

Items specific to a disability or health care need. Not all areas will apply to each family.



Mobility Impairment

- If using a manual wheelchair; a pair of gloves to protect hands from fallen debris
- Extra battery for power chair
- Wheel patch kit for flat tires on wheelchair
- Spare cane or walker
- Lighting device to light walking path
- Ice picks for feet of walker or cane in case of snow/ice
- Bag or basket with emergency numbers, communication device, basic first aid items, and backup prescription medications
- AlbacMat, Pakkie, or other evacuation device to move to a safe area



Wanderer or Runner

- Updated pictures of my child
- Dental records of my child
- Fingerprints of my child
- Extra batteries for my tracking device



Hearing Impairment or Auditory Sensitivity

- Pen and paper pad to communicate with rescue personnel
- Preprinted card stating "I use American Sign Language (ASL)" or "Please use pen and paper to communicate with me" or "I can read lips"
- Extra hearing aid batteries



Visual Impairment or Visual Sensitivity

- Heavy gloves for protection if there is broken glass or debris on the floor
- All emergency supplies marked with large print or Braille, if applicable
- Extra folding cane, if applicable



Speech Impairment or Nonverbal

- Pen and paper pad to communicate with rescue personnel
- Preprinted card stating "I cannot speak"
- Whistle to alert emergency personnel

EMERGENCY EVACUATION KIT

Items specific to a disability or health care need. Not all areas will apply to each family.

Cognitive or Emotional Disability

- Emergency whistle
- Copy of emergency evacuation plans
- A favorite item (e.g. small videogame or book) to help your child maintain focus
- Extra batteries for communication device (if applicable)
- Paper and writing materials

Medication Use

- A three day supply of current medication (update regularly)
- Updated medical information including names of medications and dosage
- Cooling supplies to keep medicines cold if needed
- Extra medicine dispensers (i.e. droppers, pill splitters, syringes)
- Bottled water to take oral medications
- Updated snacks to take medications that require food intake
- Instruction on administering medication for emergency personnel
- Extra copies of prescriptions

Use of Service Animal

- Medications and vaccination/medical records (stored in a waterproof container)
- Animal first aid kit
- Sturdy leashes, harnesses, and/or carriers
- Current photos of service animal in case in case of separation
- Food, potable water, bowls, and can opener
- Information on feeding schedules, medical conditions, and behavior issues
- Plastic bags and paper towels for disposing feces
- ID and vaccination tags (including your name and phone number)

EVACUATION NEEDS ASSESSMENT

Check off each action step that applies as you complete it.

Family Evacuation Needs Assessment

- We are familiar with disasters that may impact our local area
- We know the local community emergency plans
- We have registered with our community emergency personnel that someone in our home has a disability to alert rescue services prior to an emergency
- We have a home evacuation plan
- Each family member practices the evacuation plan twice a year
- Each family member knows the location of all possible exits in our home
- Each family member knows the family meeting place outside the home if we need to evacuate
- Each family member knows the best place in our home to go during a tornado, hurricane, or earthquake (whichever applicable)
- We have at least one non-cordless phone in our home
- We have an emergency contact list near all telephones
- Everyone in our home knows how and when to use 9-1-1
- We know where our emergency shut off valves are for the water and electricity
- We can access and use all shut off valves
- We have a copy of important medical information and documents in a safe place (i.e. a safe deposit box, a fire/water proof safe, or with out-of-state contact person)
- We have a support network close to home who can assist us during an emergency if needed
- Each family member knows where all fire extinguishers are in our home
- Each family member knows how and can use a fire extinguisher
- We test the smoke detectors monthly
- We change the batteries in our smoke detectors twice a year
- We test the carbon monoxide detectors monthly
- We change the batteries in our carbon monoxide detectors twice a year
- We have prepared an emergency evacuation kit
- We have a NOAA Approved All-Hazards Alert Radio
- We have communicated with the electric company that someone in our home uses medical equipment that requires electricity to receive priority return to services status during a power outage

EVACUATION NEEDS ASSESSMENT

Specific to a disability or health care need. Not all areas will apply to each family.



Mobility Impairment

- My child is able to alert all rescue personnel on how to use their mobility devices
- My child is able to instruct rescue personnel on how best to transfer them out of their chair
- My child can reach all fire extinguishers in our home
- My child can reach all alerting devices, including our telephone
- My child has accessible telephones in all rooms
- My child can access all exits
- My child has access to ramps or other assistive equipment to move to all levels of our home
- My child can move easily down all hallways and through all doorways in our home
- My furniture does not block any door way or exit
- My child has a small emergency kit attached to their mobility device
- My child is familiar with evacuation devices specifically for persons with limited mobility
- We are familiar with local shelters who can accommodate for persons with limited mobility if needed



Wanderer or Runner

- My child has proper identification and contact numbers on them at all times
- My family uses a tracking device or locator to help find my child
- My neighbors are familiar with my child and know how to contact my family



Hearing Impairment or Auditory Sensitivity

- My child is able to alert all rescue personnel that they have a hearing impairment
- My child has a smoke detector with a light and/or vibrating transmitter
- My child has a carbon monoxide detector with a light and/or vibrating transmitter
- My child has an emergency weather radio with a light and/or vibrating transmitter
- My child has accessible telephones for an emergency (including TTY if needed)
- We are familiar with local emergency shelters who can accommodate for persons with hearing impairments
- My child has flashlights readily available in our home to access reading material and/or visual cues if electricity is out



Visual Impairment or Visual Sensitivity

- My child has practiced our evacuation plan periodically with assistive devices/ animals
- We have furniture arranged to allow for easy exit out of all doors during an emergency
- We are familiar with local emergency shelters who can accommodate for persons with a visual impairment

EVACUATION NEEDS ASSESSMENT

Specific to a disability or health care need. Not all areas will apply to each family.



Speech Impairment or Nonverbal

- My child is able to alert all rescue personnel that they have a speech impairment
- We have "Nonverbal Occupant" emergency alert stickers or window clings posted at all entrances to our home, on our child's bedroom door, and/or in our vehicle
- We have accessible telephones for an emergency (i.e.TTY or emergency connect)
- We are familiar with local emergency shelters who can accommodate for persons with a speech impairment or who are nonverbal



Cognitive or Emotional Disability

- My child has practiced how to alert emergency personnel about their needs
- My child knows how and when to use the telephones for an emergency
- My child has a contact person to call in case of an emergency
- My child knows the sound of our smoke detectors and what to do when they activate
- My child knows the sound of our emergency weather radio and what to do when it activates
- My child has practiced our emergency evacuation plans more than twice a year
- Our emergency evacuation plans are written out so that my child can understand
- We are familiar with local emergency shelters who can accommodate for persons with a cognitive or emotional disability



Service Animal

- We are familiar with local emergency shelters who can accommodate for service animals
- We have supplies for my child's service animal in our emergency evacuation kit
- We have a "Service Animal Inside" emergency alert sticker posted at all entrances to our home
- Our emergency contacts are familiar with my child's service animal
- We have an emergency caregiver lined up if we are unable to care for our child's service animal
- My child can evacuate out of our home without their service animal if needed
- We are familiar with local emergency shelters who can accommodate for persons with a service animal



Difficulties with Grasp or Grip

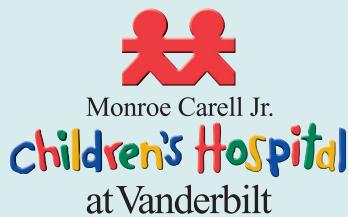
- My child can operate all fire extinguishers in our home
- My child can operate all alerting devices in our home, including our telephone
- My child can open doors to all exits of our home
- My child can open all windows in our home
- We are familiar with local emergency shelters who can accommodate for persons with difficulties with hand grasp or grip

EVACUATION CHECKLIST RECORD

Keep track of important tasks that need to be completed and/or updated regularly.

Date Completed	Dates Updated
Installed at least one smoke detector outside each sleeping area and on each level of our home	
Installed a carbon monoxide detector	
Completed all appropriate Special Needs Evacuation Assessments	
Completed an Evacuation Plan for any type of disasters that could occur in our local area	
Established a family meeting place outside of the home	
Practiced our Evacuation Plan	
Completed and posted an emergency contact list	
Put together an Evacuation Kit	
Placed important medical profiles in Family Safe Escape	
Plan portfolio	
Placed a list of model numbers and names of medical devices in Family Safe Escape Plan portfolio	
Placed important insurance information in Family Safe Escape Plan portfolio	
Talked to our doctors about prescription medicine storage and emergency needs	
Contacted local emergency agencies to alert them of a family member with a disability or special health care need	
Identified local shelters that can accommodate for our family's medical needs	
Contacted utility companies for priority return of services status during outages	
Identified where our emergency shut-off valves for water and electricity are located	

Information provided by:



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