

Emergency Preparedness Tips for Those with Functional Needs



TIPS

Parents or Caregivers of Children Disaster Tips

www.ready.illinois.gov





The State of Illinois has developed this TIP sheet to prepare you for an emergency or disaster. This TIP sheet is designed to be used in conjunction with the "Emergency Health Information Card," which can be found at the end of this document.

1 Get A Kit

In addition to the list of recommended items to include in a Disaster Supplies Kit, which is available at www.ready.illinois.gov, Parents or Caregivers of Children should consider including the following items:

- A list of children for whom they are providing care, including:
 - Full name and nicknames
 - Date of birth
 - Copy of birth certificate
 - Recent photograph
 - Name of legal guardian
 - Authorization for medical treatment
 - List of allergies
 - List of medications taken on a regular basis (include dosage), what it's prescribed for and pharmacy name and phone number

☐ If child has "functional needs" (diabetes, cerebral palsy, visual impairment, etc.), please list the following: Type of functional need Medications (include: dosage, what it's prescribed for and pharmacy name and phone number) Physician's name, office address and phone number Name, address and phone number of school (daycare, elementary, middle school, high school or college) child attends along with the name of teacher and class (e.g. Ms. Smith's 3rd grade). ☐ Name, address and phone number of specialized



☐ Caregiver should have alternate contact numbers for parents or others who can pick up children. Digital picture of child along with pertinent information (height, weight, color of hair, color of eyes, any distinguishing marks). E-mail to self so you will always have it with you.

school/facility (e.g. Hope School for the Blind).

roles are (e.g. pick up from school/daycare).

List of other caregivers along with contact information (name, address and phone number) and what their

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Choose an out-of-town contact. Following a disaster, family members should call this person and tell them where they are. Everyone must know how to contact this person (e.g. TTY, e-mail, pager, instant message, etc.).

2 Make a Plan

Create a Personal Assessment. Decide what you will be able to do for the children you care for and what assistance you may need before, during and after a disaster. Make a list of your needs and resources for meeting them in a disaster environment. Such things to consider are:

- ☐ Meet with your family members, friends, and others who care for your children to review community hazards and emergency plans. Tell them where you keep your emergency supplies. Choose an out-of-town contact. Following a disaster, family members should call this person and tell them where they are. Everyone must know how to contact this person (e.g. TTY, e-mail, pager, instant message, etc.). ☐ Daycares/Schools Note: If daycare center/school is not accessible, list a primary and a secondary reunification site. Complete an Emergency Health Information Card for each child. Update it regularly and keep it with you at all times. Install audible and visual alarms and smoke detectors. 3 Be Informed Learn your community's response and evacuation plans.
- Learn the emergency plans and procedures for places where you and your family spend time (e.g. workplace, school, child care centers). Develop a communication

plan with them.

Ask your local fire department, police department or emergency management office about emergency special assistance programs. Some communities may ask people with a disability to register so assistance can be provided in an emergency.		
Ask your city or county how they will warn you of a disaster situation and provide information to you before, during and after a disaster.		
Know which television stations in your area broadcast the Emergency Alert System and close caption the entire emergency broadcast.		
Ask your local emergency management office if they have an emergency notification system that can interface with a communication system for the deaf and hard of hearing. This system can contact people in an affected area.		



Check Off When Completed	Date	Activity to be Completed
		Put together my Disaster Supplies Kit.
		Completed a Personal Assessment.
		Created a Support Network.
		Arranged an Out-of-Town Contact.
		Completed an Emergency Health Information Card for each family member.
		Installed audible and visual alarms and smoke detectors.
		Gathered my Emergency Documents.
		Created my Communication Plan.
		Told my family, neighbors and local emergency teams (fire, EMS and police) what I need in an emergency situation.

Emergency Health Information Card

- 1. This card should be duplicated as needed.
- 2. Cut out the card along the dotted lines.
- 3. Write in contact information for each household member. Use the back side of this card if you need additional space.
- 4. Fold the card so it fits into your pocket, wallet or purse.

Emergency Health Information Card

5. Carry your card at all times so it is available in the event of a disaster or other emergency. Place it near your driver's license, school I.D., etc.

Date Updated:				
Name:				
Address:				
City, State, Zip:				
Day Phone:				
Evening Phone:				
Cell Phone:				
E-mail:				
Birth Date:	Blood Type:			
Health Plan:				
Individual #:	Group #:			
Doctor's Name:				
Address:				
City, State, Zip:				
Phone:	Fax:			
E-mail:				

Emergency Health Information Card Emergency Contact #1:

Relationship: Address: City, State, Zip: Day Phone: **Evening Phone:** Cell Phone: E-mail:

Emergency Contact #2:

Address: City, State, Zip: Day Phone: **Evening Phone:** Cell Phone: E-mail:

Relationship:

Special Conditions:

Medications/Dosages:

Allergies:

Communications/Devices/Equipment/Other:

City, State, Zip:

Phone: Fax:

E-mail:

Address: