The following contains recommendations for centers in general and for evacuations specifically, based on the responses from this survey.

1. Support for Centers

• Create a centralized place, or person, where common information and assistance to all facilities is available.

Centers want to protect their children. They want to write stronger plans. In the absence of overarching coordination, the safety of children is contingent upon the resources of the individual facility, with whatever strengths and limitations those resources entail.

• Provide in-person and video training on how to improve emergency plans.

These materials should focus on *how to meet the requirement*, not what the new requirement is. Several centers stated they specifically did not want another video of talking officials, nor a mailing with written regulations. Training could be general, or issue specific, such as helping facilities devise plans over how to safely communicate about threats within the building.

• Expand access to healthcare professionals, training, and planning.

Free training in First Aid, CPR, and administering medications for employees at childcare care and early education centers would promote better preparedness, whatever the crisis. Supporting the creation of healthcare plans is another way to promote children's safety in an emergency situation.

• Promote mass casualty planning, in case parents are incapacitated.

Creating specialized planning for mass casualty events, such as 9-11, is imperative to protecting our children. For example, assuming parents will pick up children may not be reasonable when mass casualty events occur in the event a parent is hospitalized. Knowing where to take children, and what to do if their parents do not claim them, is important to determine in advance. A corollary of this planning is extended shelter –in-place procedures. How children will be cared for over an extended duration, such as 72 hours, is essential to promoting safety.

2. Support during Evacuations

- **Pre-arrange transportation for children during an off-site evacuation.** Determine transportation policies for on-site emergencies requiring evacuation, local hazard situations, and mass casualty events. Part of this planning includes coordinating access to medicine and food supplies for an extended evacuation, or even sheltering in place.
- Encourage centers to create an emergency FAQ handout or card for parents to leave in their car, purse, or wallet, distributed quarterly.

This handout would identify evacuation procedures, off-site pick-up locations, and any back-up locations. The handout would also encourage reconnection even if all phone systems were crippled.

• Encourage providers to maintain both land-based and cell-based phone systems.

Dual systems would allow two avenues of responsiveness to an emergency; land-based lines for emergencies when cell phone outages occur, and cell-based lines for when an off-site evacuation of the center is required.

• Promote text-messaging for providers with cell phones.

In the event of an emergency, evacuation locations could be texted to parents far faster than calling each individually. By pre-programing parent numbers into a cell phone, this system could encourage rapid outgoing communication from provider to parent.