

# **Southern Baptist Disaster Relief**



## **Temporary Child Care Manual (DRTCC) 2008**

**North American Mission Board, SBC**

**April 2008**

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## Terminology

ARC	American Red Cross
Cambro	Hard, plastic container that keeps hot food hot and cold food cold for 24 hours or until the lid is opened.
Canteen	A mobile unit that delivers food and water to residents of a damaged area.
DRC	Disaster Relief Center
DROP	Disaster Relief Operations Procedures
DRTCC	Disaster Relief Temporary Child Care
EOC	Emergency Operations Center
ERV	Emergency Response Vehicle
ESF	Emergency Service Function
Family Processing Center	Location within the disaster area where agencies give assistance to disaster victims.
Feeding Unit	Temporary unit that prepares food.
FEMA	Federal Emergency Management Agency
ICS	Incident Command System
In-Kind Donations	Non-monetary donations
Licensing Agency	State agency responsible for giving permission for DRTCC to function onsite in the aftermath of disasters.
Mass Care	Refers to coordination of all emergency functions to meet the needs of disaster victims.
MOU	Memorandum of Understanding
NAMB	North American Mission Board
NGO	Non-Governmental Organization
NIMS	National Incident Management System

NVOAD	National Voluntary Organizations Active in Disaster
SBC	Southern Baptist Convention
SOP	Standard Operations Procedure
TPFDL (“Tipfiddle”)	Time Phased, Force and Deployment List
TSA	The Salvation Army
VOAD	Voluntary Organizations Active in Disaster

## **A Brief History of Disaster Relief Temporary Child Care (DRTCC)**

In 1979, the Texas Baptist Men's disaster relief unit set up a DRTCC (formerly Temporary Emergency Child Care/TECC) response ministry at Wichita Falls, Texas as a result of a devastating killer tornado. Karl Bozeman developed four teams of DRTCC across Texas and published a book describing in the clearest details how to build equipment and resource modules for several age groups; how to train volunteers in child care ministry; and how to build and equip the response trailer. Chris Shelby was the site coordinator of the first DRTCC response team at Wichita Falls. Her diary is still used today to train men and women in DRTCC across the country.

The multistate responses of DRTCC in 1994 during the Albany flood in Georgia and in 1997 during the Red River Valley flood in North Dakota/Minnesota led to the development of a Temporary Child Care Manual as part of the Southern Baptist Convention (SBC) *Disaster Relief Operational Procedures (DROP) Manual*. It was important to correlate temporary child care with the other Baptist disaster relief ministries being performed at each disaster. A meeting was called by Mickey Caison in November 1997 for the purpose of developing the first DRTCC manual, which was completed in 2000.

The DRTCC Manual continues to be revised as the needs of our society change.

April 2007  
DRTCC Subcommittee  
2007 Disaster Relief Roundtable

## Chapter One: Ministry of DRTCC

### Ministry Statement

Disaster Relief Temporary Child Care is the caring for children in the aftermath of a disaster. It is a ministry where children and parents are shown the love of Jesus at a time when care and attention are vital needs in their lives.

### Ministry Objectives

**Providing for children** – When providing for children during a disaster, they will need:

- Love – Loving, caring workers help the child through a trying time.
- Continuity – Bringing some order and continuity to children’s lives when awareness of and attention to their needs is usually erratic.
- Safety – A safe environment while parents attend to necessary activities.
- Schedule – A normal routine of meals, rest, play, and attention.
- Cleanliness – Provide and maintain a clean, sanitary environment.
- Acceptance – Accepting children as they are and providing them with a feeling of well-being.
- Calm atmosphere – Calm workers in a calm environment.

**Providing a ministry** – We provide a ministry to families in the aftermath of a disaster through:

- Relief – Providing temporary child care so parents are free to deal with many circumstances needing attention, including disaster services assistance for the home (relocating/reconstruction) by FEMA, ARC, and other disaster agencies
- Understanding – Accept others without judgment or criticism
- Compassion – A friendly smile, a listening ear, and a sense of caring
- Love – Modeling the love of Jesus
- Referrals – Help provide the parents with the information of the types of disaster assistance available
- Sharing the gospel - Giving a verbal presentation of the gospel

**Providing coordination of ministry** – DRTCC will coordinate with other relief organizations through cooperation with other Southern Baptist disaster relief ministries and partners. We will continue to communicate with NAMB, state Baptist conventions, Baptist associations, local church ministries, and other disaster relief agencies. We will be adaptable to the changing needs which occur in a disaster.

**Providing information for mission opportunities** – Mission opportunities for the local church and association include evangelism and follow-up ministry. DRTCC workers are “ambassadors for Christ” and as representatives of the local church and association can assist in the building of a caring atmosphere and reputation. We develop awareness for mission opportunities and provide information among the membership of local churches and associations for follow-up.

## Chapter Two: Organization of DRTCC

### General

In Southern Baptist Disaster Relief, the North American Mission Board and state Baptist conventions are responsible for the organization and administration of the disaster relief ministry within their jurisdiction. Disaster Relief Temporary Child Care (DRTCC) is part of the program that individual states have chosen to develop and support as a part of their state Baptist convention ministry. State Baptist conventions are solely responsible for the recruitment and enlistment of their DRTCC volunteers. The credentials as well as background checks of the volunteers are the responsibility of the state Baptist convention disaster relief directors.

The updating and debriefing of DRTCC volunteers, as well as travel and maintenance costs, are negotiated between the state Baptist convention and their volunteers.

The DRTCC units are activated by the state Baptist conventions. The purchase of the units, equipment, and supplies is the sole responsibility of the state Baptist convention, association, or church that owns the unit. The cost of transportation, maintenance, insurance, and additional equipment is handled by the entity that owns the unit. The state Baptist convention will ensure that equipment, supplies, and training meet industry standards.

### Chain of Command

#### A. National Leadership

1. Disaster Operation Center (offsite coordination)
2. Incident Command Team (onsite coordination)
3. State area coordinators

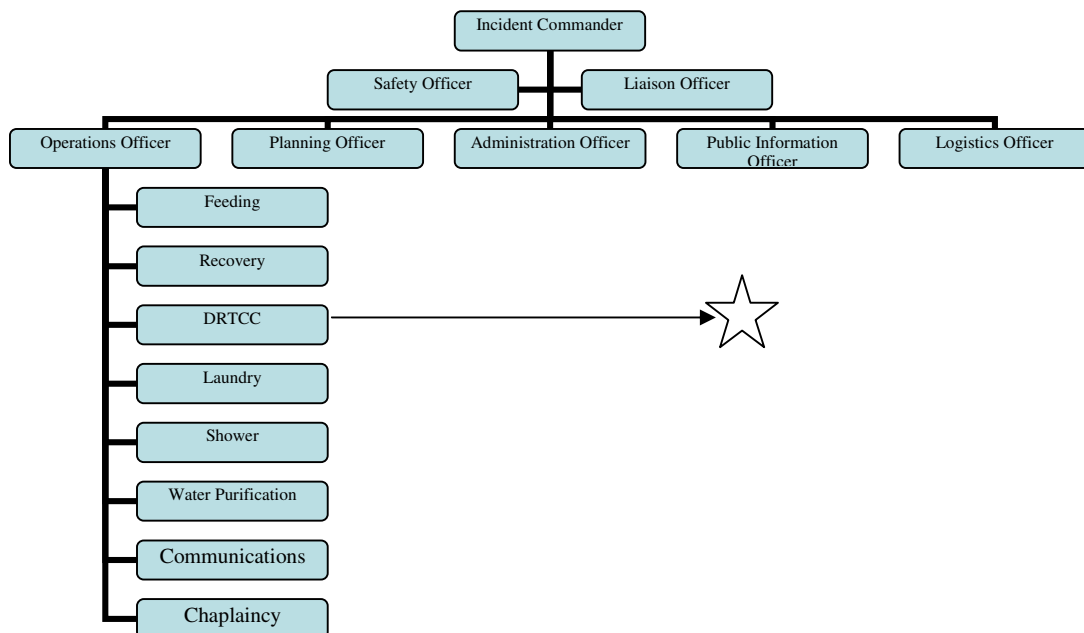


Figure One: ICS Command Chain



## B. State Leadership

1. State disaster relief director
2. Offsite coordinator
3. Onsite coordinator
4. Unit director(s)

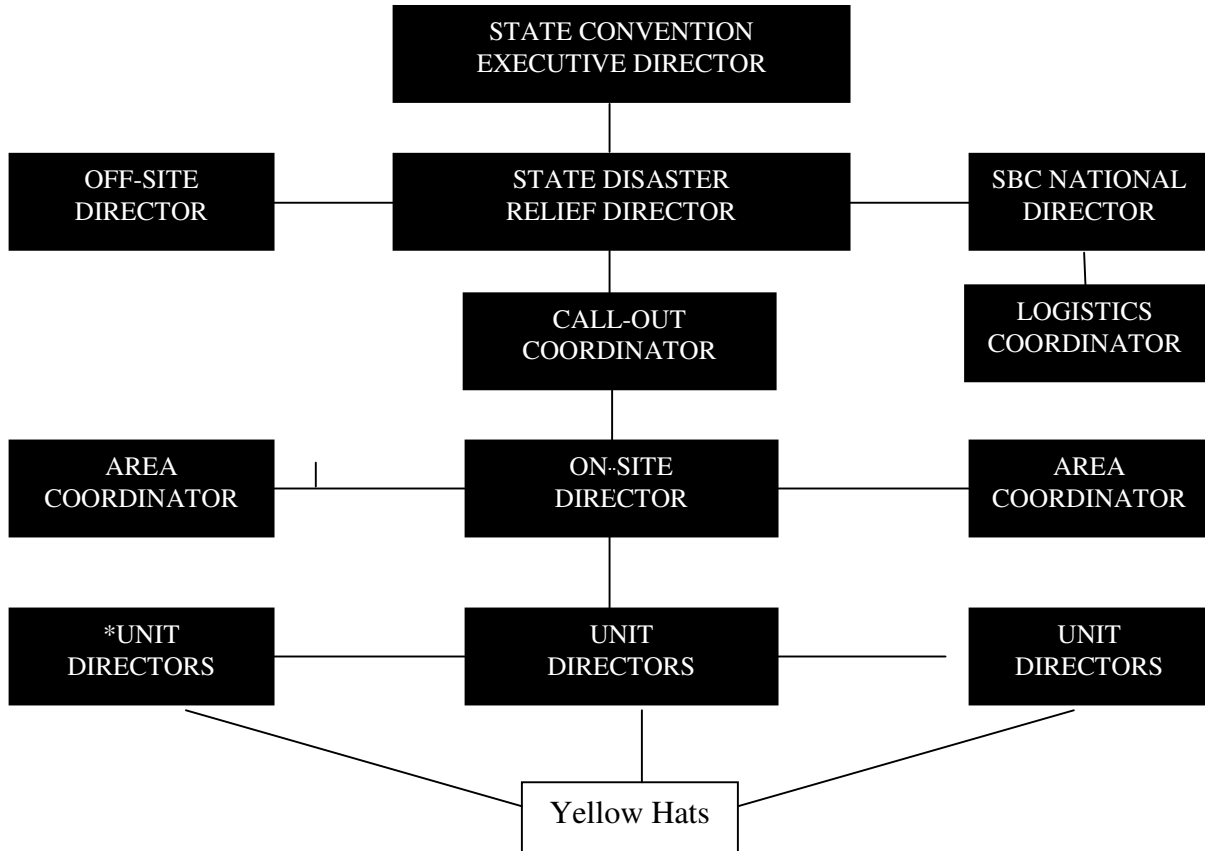


Figure 2: State Convention Chain of Command

## Child Care Unit Organization

### A. Leaders

1. Onsite Coordinator/White Cap
2. Unit Director/Blue Cap

### B. Staffing Personnel and Ratios

1. Always have a minimum of two trained workers for each age group.
2. Preferred ratio for multiple groups:
  - one adult to three children – two-years-olds and under
  - one adult to five children – three- to five-year-olds
  - one adult to eight -- elementary school children
3. Ethnic/bilingual team members.

## **Multi-Unit Response**

### **A. Chain of Command**

1. White cap - coordinates all child care units
2. Blue cap - director of individual unit

### **B. Options Involving Interstate Relationships: Units and Staff (Teams)**

1. Original onsite unit remains, to be staffed with trained DRTCC volunteers from other states.
2. Replacement unit(s) is moved in as necessary and available when previous unit(s) goes home. Certainly, overlap and coordination are expected.
3. Use of local facility with child care equipment in place. This is both a beginning stage and a long range opportunity for continuing child care (after the DRTCC units have gone).

## **Protocol: Agreements and Call-Out**

The Southern Baptist Convention has formal agreements with the American Red Cross (ARC), The Salvation Army (TSA), the Federal Emergency Management Agency (FEMA), and other disaster relief agencies. The ARC agreement with SBC states “Both organizations will work in cooperation to render maximum effective services to individuals in times of disaster.” (August 31, 1994, Elizabeth Dole, president, ARC)

Definition of a Multistate Call-out

Definition of a Single State Call-out

Explanation of Call-out Protocol

## **Single State Activation Considerations**

State disaster relief units (DRTCC units, feeding units, clean-up units, et cetera) can be activated by:

### **A. Southern Baptist Disaster Relief**

1. National disaster relief director
2. State disaster relief director
3. Another state disaster relief director

### **B. Chapter, Regional, State or National ARC or Other Civil Offices**

1. The appropriate director(s) of missions will be contacted concerning the status of these requests.
2. The national disaster relief director will be given updates

### **C. Director of Missions**

1. The regional or state American Red Cross Chapter and appropriate civic and VOAD agencies will be informed, including the Governor’s office.
2. The national disaster relief director will be given updates.

## **Church or Associational Activation Considerations**

### **A. Activating the State Units**

1. Only the state disaster relief director may activate the disaster relief units within the state system.
2. An association should first contact the state director in order to activate the state system.

### **B. Activating the Local or Church/Associational Units**

1. Trained local or church/associational volunteer teams are encouraged to respond immediately to the rescue and cleanup and offer local child care on a small scale basis.
2. The local director of missions should be included in the loop.
3. It is always a good idea to quickly coordinate any response with the state system, the local police, the ARC, the local emergency services officers, and the Salvation Army. These agencies can be helpful for securing food and supplies.
4. Trained volunteers are encouraged to cautiously display the disaster relief logo and the proper identification badges when serving in a local response.

## **General Activation Procedures**

### **A. Alert**

1. Can you go?
2. This stage is updated about every 12 hours.
3. The 'alert' volunteers are notified by the state system.

### **B. Standby**

1. A unit on standby is assumed to be able to respond as soon as it is called.
2. This stage should be updated every six hours.
3. If the unit or team cannot go within 24 hours, they will revert to **alert** or be taken off the potential response plan.
4. The 'standby' volunteers are notified by the state system.

### **C. Go**

1. **Go** means the response is definite.
2. The unit will depart within six hours or less.
3. The vital information includes the circumstances, the location, the contact person and data, and how to get there.
4. The 'go' volunteers are notified by the state system.

### **D. No Go**

1. "No Go" means the unit status may revert to standby, alert, or be taken off the potential response plan.
2. The 'no go' volunteers are notified by the state system.

## **Scheduling Considerations**

- Prepare to stay up to seven days
- Plan for overlap of 24 hours for transition between teams.

## Chapter Three: The Team, Unit, and Equipment

While the strength of any state's DRTCC program, as well as any of the disaster relief ministries, does indeed depend on the strength of its team, it is important to have equipment and resources sufficient to perform the ministry that a DRTCC program promises.

### The Team

#### Training Requirements

The training required of all Southern Baptist disaster relief volunteers is listed in the DROP Manual and is summarized here with possible pertinent additions to DRTCC ministries. These trained volunteers are in turn allowed to wear the official disaster relief logo and colors to any official disaster response or official function.

#### Yellow Cap Training

Southern Baptists must have completed the following to be recognized as a trained volunteer for disaster relief ministries in DRTCC:

##### A. Required Training

1. *Involving Southern Baptists in Disaster Relief*
2. DRTCC training material
3. Introduction to DRTCC Unit
4. State required training – each state may set other requirements for DRTCC team members.

##### B. Additional Training

1. Infant and child first aid and CPR
2. Volunteers should also participate in state Baptist convention, association, and local training events that focus upon teaching and caring for preschoolers and children.
3. ARC courses: Serving the Diverse Community, Introduction to Disaster Services
4. Other disaster relief courses such as stress management through nationally recognized professional courses such as Critical Incident Stress Management (CISM) and National Organization for Victim's Assistance (NOVA); Safety and Sanitation, Food Sanitation, etc.
5. Workshops put on by regional child care resource and referral agencies (see yellow pages in phone book under child care)

##### C. Training Updates

1. Retraining will be required on a minimum of a three-year cycle.
2. A response to a disaster can be considered as a "hands-on training" update as determined by each state's policy.

## Blue Cap Training

### A. Required Training

1. The blue cap director must have completed the yellow cap minimum training.
2. Participation in a DRTCC disaster response
3. The SBC blue cap training course
  - a. Taught by the state or national disaster relief director or representative
  - b. Use SBC blue cap training material
  - c. The trainees attend by invitation only
4. Infant and child first aid and CPR
5. Additional requirements set by each state convention

### B. Elective SBC or Other Disaster Relief Courses

1. Stress management: CISM or NOVA courses
2. Serving a Diverse Community and Introduction to Disaster Services
3. Advanced Child Care Teaching Skills
4. Food Sanitation and Safety

### C. Apprentice Training

Unit directors should have several hours of blue cap apprentice training at a real or simulated disaster. States in their premiere staffing are encouraged to participate with an experienced state DRTCC unit for onsite “hands-on experience.” This is especially important for potential blue cap directors who would be responsible for the leadership of the state’s maiden response.

### D. Blue Cap Appointments

A blue cap appointment is not automatic nor is it guaranteed upon the completion of any or all of the above training. The state disaster relief director reserves the right to review all potential blue cap appointments. **These are not lifetime appointments.** Moreover, successful blue cap recipients are not always assigned a director’s position on each outing.

## White Cap Training

### A. Definition

As described in Chapter Two, the white cap directs the ministry of multistate units of the same relief ministry (i.e., Disaster Relief Temporary Child Care) and/or one or more units in a response such as a feeding unit, a child care unit, clean up units, shower unit, et cetera.

### B. For a State Response

In the case of a single state responding to a disaster with its own multiple units, the state director usually serves as the white cap and the training is by the nature of the office or by his/her appointment. In this case, the white cap will also bear the name of the state, as do the blue caps of units and onsite coordinators. (Recall that some state structures include both an overall onsite coordinator as well as unit directors for the units responding to the disaster.)

**C. For a Multistate Response**

In the case of a multiple unit/same ministry response (i.e., a multistate DRTCC response), the white cap is appointed by the national disaster relief director/NAMB (see Chapter Two, Figure 1).

**D. Minimum Requirements**

The white cap will have the skills and minimum training of a blue cap as defined above. In addition, the white cap will have a proven record of leadership in Baptist child care work, Baptist missions, and discipleship.

**E. Experience in Interagency Cooperation and Public Relations**

The white cap will be well-trained in interagency agreements and cooperation skills. The white cap should have completed the ARC course in Shelter Management and implement the agreements involved.

## **The Unit—Suggestions for Trailer, Equipment, and Supplies**

### **The Trailer**

The typical disaster relief DRTCC unit is a trailer or truck with a loading ramp sufficient to transport equipment and supplies for temporary child care. (Suggested trailer size is 8 feet wide by 16 feet long, tandem axle.) Some states have 6 feet wide by 12 feet long single axle trailers. The interstate towing regulations are significantly different for each category. A camper type pickup towing vehicle can provide extra space for equipment and supplies.

#### **The unit towing vehicle(s) should have:**

1. A logbook of the maintenance and safety equipment records
2. The log of trip and accumulative miles for each response and miles to date.
3. A safety check list of the trailer and tow vehicle including: tire pressure, tire inspections, electrical checks, hook-up safety chains, and proper ball and locking pin. (See Appendix: Trailer Pre-Flight Check).

#### **The unit trailer should have:**

1. A spare tire, tire gauge, flares, and spare electrical parts such as fuses, bulbs and flashlights
2. A toolbox, lug wrench, hydraulic jacks, and safety blocks

### **The Equipment**

#### **General equipment suggested**

1. One or more directional hanging or yard signs on wood or metal stakes depicting the information of the DRTCC provided.
2. At least one module on wheels per age group with covered plastic containers similar to the unit described by Karl Bozeman. The module should be equipped with resources sufficient to set up the initial DRTCC operation, including games, art supplies, paper, puzzles and activity resources.

3. One generator with wattage to operate equipment on trailer and emergency lighting and include one gas container; two extension cords with proper amperage (at least 50 feet long with power strip.)\*
4. An on-demand propane or electric water heater\*
5. Two electric space heaters\*
6. Portable electric lights\*
7. One electric skillet\*
8. Washer and dryer units\*

\*Each state may have regulations governing some of these suggested items because of liability concerns.

### **Infant/Toddler Equipment**

1. Changing table
2. At least two folding rocking chairs
3. At least four Pack & Plays
4. 2-4 high chairs or fold-up children's seats with tray
5. One diaper container with lid and liner
6. Trash containers, one labeled for bio-waste material
7. Electrical outlet covers
8. Pacifiers
9. Potty chairs

### **Age Appropriate Equipment**

1. Child-size tables and chairs
2. One child-size rocker
3. 2-3 CD/cassette players with activity tapes/CDs and rest time music

### **Other Basic Support Equipment\***

1. Shop vacuum and carpet sweeper
2. Hand-held communication equipment such as a set of 2 or 3 low-watt business band radios, and a cellular phone
3. First-aid kit, child/adult
4. Flashlights with plenty of batteries
5. One 15-20 gallon cooler and 2 gallon water cooler with spigot
6. Trash containers with lids and liners
7. Laundry hampers (for dirty linen)
8. Weather band radio
9. Child safe thermometer

\*Other resources are available on the field for necessary items. Check with VOAD, ARC, The Salvation Army, in-kind donations, warehousing, and local churches.

### **The Supplies\***

#### **Refreshments for Children and Volunteers**

1. Formula for infants (several types), variety of baby food
2. Eight gallons of distilled water
3. Juice and other drinks (sugar free, decaffeinated, no red dye), water

4. Serving utensils (disposable plates, cups, forks, spoons, and napkins)
5. Baby bottles in a variety of sizes, several types of nipples
6. Monitor foods/drinks for expiration dates

### **Sanitation and Hygiene Supplies**

1. Disposable diapers and pull-ups in sizes to fit preemies through toddlers (three to six dozen each size)
2. Wet wipes
3. Zip-lock bags of all sizes
4. Paper towels
5. Facial tissues (at least six boxes)
6. Bathroom tissue (at least 12 rolls)
7. Disposable gloves (non-latex and vinyl)
8. Garbage bags in various sizes
9. Anti-bacterial liquid hand soap and hand sanitizer
10. Two gallons regular bleach (5.25% sodium hypochlorite) (has to be a 1/10 concentration) and non-chemical disinfectants
11. Three dish pans and dish drainer, one with lid for sanitizing solution for toys
12. Cleaning equipment and supplies sufficient to clean an area for the care and protection of children. (Mops, brooms, dustpans, buckets, dishpans, disinfectant solutions disposable cloths, and spray bottles.)

### **Office Supplies**

1. 1-2 drawer-file cabinet and/or one file box for registration forms, etc.
2. Pencil sharpener
3. Pencils and pens
4. Spiral notebooks or three ring binder notebooks to keep messages in order
5. Staples, stapler
6. Transparent tape
7. Rubber bands
8. ID wristbands
9. Several sizes of masking tape
10. One three-hole punch
11. Paper clips: a box each of multiple sizes is suggested
12. Post-It Notes: several packages each of multiple sizes
13. Paper: Several tablets of lined paper for clerical work; also paper for the children to draw on and use for artwork.
14. Scissors
15. Clipboards

### **Children's Supplies**

1. Art supplies
2. Games
3. Books
4. Crafts
5. Toys

\*Other resources are available on the field for necessary items. Check with VOAD, ARC, The Salvation Army, in-kind donations, warehousing, and local churches.



## Chapter 4: DRTCC Team Members

“Therefore be imitators of God, as beloved children,  
And walk in love, as Christ loved us and gave himself up for us,  
a fragrant offering and sacrifice to God.”  
Ephesians 5:1-2 (RSV)

### Qualities and Characteristics

#### DRTCC Unit Director (Blue Cap)

- A member of a Southern Baptist Church
- Blue Cap training
- An experienced child care program director/volunteer
- Supervisory skills
- A decisive individual
- Able to accept and give constructive criticism
- Receptive to diverse cultural communities
- Aware of medication guidelines and limitations
- Able to maintain a safe and secure environment
- Flexible, yet make sound quality decisions
- An understanding of developmental characteristics of preschoolers and children
- Knowledge and implementation of universal hygiene procedures
- Knowledge of organizational structure of disaster team and locations
- Knowledge of how to deal with donations
- The ability/knowledge of handling media, parents, government, and other disaster relief organizations in a Christ-like manner
- Good physical and emotional health
- Able to quickly exercise common-sense judgment
- Current certification in adult/pediatric CPR and first aid
- Background check and updates (must include National Background Check for out of state response)
- 21 years or older

#### Age Group Leader

- A member of a Southern Baptist church
- Yellow Cap training
- Experience in lesson planning
- Experience in working with young children
- Able to receive and follow directions from the Unit Director
- Flexible
- Able to quickly exercise common-sense judgment
- A caring, loving, nurturing, Christ-like manner
- 21 years or older
- In good physical and emotional health
- Background check and updates (must include National for out of state response)

## **Age Group Assistant**

- A member of a Southern Baptist church
- Yellow Cap training
- Experience in working with young children
- Able to receive and follow directions from the Unit Director
- Flexible
- Able to quickly exercise common-sense judgment
- A caring, loving, nurturing, Christ-like manner
- 18 years or older
- In good physical and emotional health
- Background check and updates (must include National for out of state response)

## **Responsibilities of Directors**

### **Onsite Coordinator and DRTCC Unit Director – Pre-opening**

1. Administrative Duties
  - a. Makes sure that the agreements are in place for scheduling and supplying all foodstuffs.
  - b. Secure a list of important phone numbers whom they may need to contact associated with the disaster.
  - c. Maintains continuous correlation with the ICS.
  - d. Conducts daily correlation with the State Unit Off-Site Coordinator or State Director.
  - e. Completes facility agreement form.
2. Public Relations
  - a. Put up signs, fliers, brochures, and advertisements announcing the free DRTCC ministry, including all the appropriate data.
  - b. Deals with any news media that may appear at the DRTCC site and is aware of guidelines for photographing children.

### **DRTCC Unit Director – Operational Stage**

1. Administration
  - a. Responsible for registering children or supervising if another staff member is in charge.
  - b. Will assign tentative age groups to each group leader. It may be necessary to change these ages or have multi-age groupings as the children begin to arrive.
  - c. Is aware of appropriate ratios and moves workers or children as necessary to maintain those ratios.
2. Team
  - a. Gives supervision to the team on location.
  - b. Checks with age group leaders regularly to assess needs of staff and children.
  - c. Coordinates healthy snacks and lunch preparation each day.
  - d. Makes sure food sanitation and other sanitation procedures are followed.
  - e. Gives encouragement and builds a “family” atmosphere with the team.
  - f. Provides a schedule for a morning and afternoon break.
  - g. Leads an evaluation session each evening with staff.
  - h. Plans “time away,” such as an evening meal, for staff.
  - i. Leads or asks a team member to lead in a devotional each day.

- j. Sees that everyone gets adequate rest.
  - k. Keeps a log book on staff arrival and departure times.
3. Parents
    - a. Is available to give guidance and encouragement to parents including referrals.
    - b. Is knowledgeable of where parents can go for different kinds of aid and is able to direct parents to the proper agencies, locations, and phone numbers.
    - c. Is cautious not to make promises. Stays within actual knowledge.
    - d. Listens to parents and takes advantage of any opportunity to share the gospel.
  4. Team Closing -- Unit Stays
    - a. In the case of multi-state responses, duplicate paperwork should be provided to the new team.
    - b. State may require a representative to participate with their unit that remains on site.
  5. Closing the Site
    - a. Is responsible for repacking the trailer.
    - b. Makes appropriate person aware of needed repairs and supplies that need to be replenished.
    - c. Provides a list of families served to the local church so they can follow up after the team has left if applicable.
    - d. Sends a “thank you” to host(s), local volunteers, and team members who helped with the children.
    - e. Send paper work pertinent to each state unit to the state office and a copy to NAMB.

### **Team**

- Clean floor space of the area to be used. This may mean sweeping and mopping to provide a safe, sanitary environment.
- Unpack ALL modules from the trailer. These shelves make excellent divisions within the room (if in one big room, cutting down on “run” space and providing a safer environment).
- Sanitize equipment.
- Set out a few toys to make the environment cheerful and inviting.
- Locate and sanitize the rest room the children and/or staff will use.
- Check work area for safety, including electrical outlets and furniture.

### **Age Group Leader and Age Group Assistants**

1. Classroom:
  - a. Meets immediate needs of the children
  - b. Provides a variety of age appropriate activities for children in their care.
  - c. Provides a loving, accepting atmosphere where children feel secure.
  - d. Always stops for a blessing before meals and snacks and takes advantage of every opportunity to bring Bible thoughts and Bible verses into activities.
  - e. Is alert to needs of children and their families in their DRTCC.
  - f. Provides feeding, diapering, and napping information to parents.
  - g. Encourages and allows children to express their feelings.
  - h. Provides creative, open-ended activities to allow children to work through their feelings.
  - i. Uses only positive guidance with the children.

2. Facility and Equipment
  - a. Empties trash at the end of the day.
  - b. Sweeps, mops, sanitize the floor at the end of each day.
  - c. Sanitize all toys and returns toys and supplies to the appropriate bins on modules.
  - d. Maintains a clean, orderly area for children.
  - e. Supervises children to maintain a clean orderly bathroom, classroom, play and eating area. (With port-a-potties, do not let children lock doors.)
  - f. Sanitizes and cleans bathroom(s) at least daily.
  
3. Team Family
  - a. Contributes to the “family” atmosphere of the team.
  - b. Participates in daily devotional and evaluation sessions.
  - c. Sensitive to the needs of other team members.
  - d. Maintains a clean, orderly meal and lodging area.
  - e. Honors or accepts others unusual sleeping habits and schedules.
  
4. Improvements and Closing
  - a. Assists site Director by suggesting materials and supplies that need to be stocked for future disasters or when currently getting low on site.
  - b. Assists site Director in re-packing the trailer at the end of the disaster.

**Be alert to the following items and practices that may hinder performing positive DRTCC.**

#### **Personal**

1. Radios, CD players, laptop computers, etc., for personal use are not recommended.
2. Be grateful for the opportunity to minister even when situations are less than ideal. Overly critiquing the site conditions in a negative manner is not recommended.
3. Realize the importance of each victim’s personal and current disaster experience.
4. Wear appropriate clothing for play and activities.
5. Valuable personal properties are not advised on a disaster site, including enroute, staging, lodging, and areas of rest.
6. Avoid bringing pets and children to a disaster site.

#### **With Children**

1. Activities that take attention away from the children should be avoided.
2. Be “ever present” while caring for children. Mahand and Brink discuss the need to teach that God is ever present. Thus, Age Group Leaders and Assistants must be “ever present and not distant” when ministering to the children. The same argument holds for item (1) above.
3. Display a courteous spirit at all times.
4. Use appropriate languages and mannerisms.
5. Be kind to the children, parent and co-workers.

For any therapeutic-type interactions with victims or parents, see Chapter 6 and 7. Recognize and accept your own limitations. Stay within your training.

## Techniques for Teaching Preschoolers

1. Because the preschooler is active, we provide a teaching-learning environment that allows for activity.
2. Play is the young child's work--he learns through play; therefore, we provide an environment and opportunities for play experiences.
3. The short attention span of a preschool child dictates the type of activities and length of stories that should be used.
4. Consideration of teaching the "individual" leads to meeting personal needs.
5. A soft voice (of the teacher) sets the stage for the noise level of the room and will motivate the preschoolers to follow the teacher's example.
6. The positive approach to teaching helps to provide security and eliminates frustration with the child and the teacher.
7. The preschooler understands the concrete, real things; therefore, we should avoid symbolism in any form.
8. All learning comes through the use of the senses, so we provide most opportunities for experiences that will involve the use of more than one of the senses.
9. The young child's small muscles or eyes are not completely developed until about age seven; therefore, we provide activities that promote the use of large muscles and avoid close work requiring small muscles.
10. Songs should be on the preschooler's level and range since his vocal muscles are not completely developed.
11. Short action words and simple stories should be used because of the young child's limited vocabulary.
12. The young child is dependent, yet he is growing toward independence which should be nurtured by his teachers.
13. Because of the teacher's important role in teaching preschoolers, his entire time and attention should be devoted to the children.
14. An important aspect of teaching young children is "the art of listening."
15. Creative art activities should be provided and do not include patterns, pictures to be colored, or "touching up" the child's work.
16. Learning begins where the individual is (with knowledge and understanding); therefore, the preschool teacher must know the individual child and his needs as well as general characteristics for the specific age group.

## Communication

### Negative

“Sh-sh-sh.”

“What did you paint?”

“Don’t drip the paint.”

“Don’t leave the puzzle like this.”

“You must finish your puzzle.”

“Don’t throw the blocks.”

“It’s time to clean up. Stack the blocks on the shelf.”

“The room looks messy.”

“Good boys and girls don’t act ...”

“Boys and girls, you must stop running.”

“You hit Jim. Now tell him you’re sorry.”

“Lisa, you’re talking too much.”

“Let’s sit straight with our feet on the floor.”

“Let’s get ready to go home.”

### Positive

“We use our soft voices indoors.”  
(Teachers set the mood.)

“I like the color you used.”

“We press the brush inside the jar,  
like this.”

“We finish a puzzle before we put  
it away.”

“If you need help, maybe Mary can  
help you put it together.”

“We build with blocks on the floor.”

“Let’s see how neatly we can stack  
the blocks.”

“I need helpers to straighten the  
room.”

“Are you forgetting to take turns?”

“I need your help. Can you help  
me clean the table?”

“I know you feel like hitting Jim,  
but it hurts when we use our hands the  
wrong way.”

“Lisa, I’m glad you want to tell us  
about your trip; but we need to take turns  
talking.”

“I need to see your eyes. I like the  
way Mary is listening (or sitting).”

“Let’s play a game.”

## 80 Words of Encouragement for Children

Children need encouragement. They crave it. They work hard to deserve it. When you give it to them, it fills their hearts with joy and widens their faces with smiles. It also builds their self-esteem, self-confidence, and their drive to achieve.

So that you'll never run short of appropriate words to encourage your child, the following suggestions are made:

1. You're on the right track now!
2. You're doing a good job!
3. Now you've figured it out!
4. That's RIGHT!!!
5. Now you have the hang of it!
6. That's the way!
7. You're doing fine.
8. Now you have it!
9. That's coming along nicely!
10. That's great
11. You did it that time!
12. GREAT!
13. FANTASTIC!
14. TERRIFIC!
15. TREMENDOUS!
16. How did you do that?
17. That's better.
18. EXCELLENT!
19. That's a good (boy/girl).
20. That's the best you've ever done.
21. Keep it up!
22. That's really nice.
23. WOW!
24. Keep up the good work.
25. Much better!
26. Good for you!
27. Good thinking!
28. Exactly right!
29. SUPER!
30. Nice going.
31. You make it look easy.
32. Way to go!
33. You're doing much better today.
34. I've never seen anyone do it better.
35. SUPERB!
36. You're getting better every day.
37. WONDERFUL!
38. I knew you could do it.
39. Keep working at it, you're getting better.
40. You're doing beautifully.
41. That's the way to do it!
42. You're the best!
43. Keep on trying!
44. Nothing can stop you now!
45. You've got it made.
46. You're very good at that.
47. You certainly did well today.
48. I'm very proud of you.
49. You're learning fast.
50. You've just about got it.
51. That's good!
52. I'm happy to see you working like that.
53. That's the right way to do it.
54. You're really learning a lot.
55. That's better than ever.
56. That's quite an improvement.
57. Now you've figured it out.
58. PERFECT!
59. FINE!
60. That's it!
61. You figured it out fast.
62. You remembered!
63. You're really improving.
64. I think you've got it now.
65. Well, look at you go!
66. You've got that down pat.
67. Good work!
68. OUTSTANDING!
69. I like that.
70. Couldn't have done it better myself.
71. Now that's what I call a fine job.
72. You did that very well.
73. CONGRATULATIONS!
74. SENSATIONAL!
75. That's the best ever.
76. You haven't missed a thing.
77. You've just about mastered that!
78. One more time, and you'll have it.
79. You must have been practicing!
80. You should be very proud of yourself.

## Chapter Five: Protection of Children on Response

### Security

#### Before the Disaster

- The DRTCC Director and State Director will follow guidelines to perform national security checks on team members.
- The DRTCC Director has the responsibility to review the security clearance and will not validate people without security checks.

#### On-site Security

- People entering the child care area must be cleared by the Unit Director and escorted through the area.
- Parents must stop at the check-in area to enroll children.
- The check-in area should be separate from the working area.
- Children on their own will not be allowed to leave the designated TCC area.
- Children going to the bathroom or being changed should be accompanied by two staff persons.
- No photos of children should be taken unless permission is given at registration.

#### Playground Security

- Follow recommended ratios and guidelines on playground outings (see page 6).
- A minimum of two staff members should be on the playground at all times when children are present.
- The playground must be on the same facility and free of safety risks: in an enclosed area or isolated from traffic and other hazards. The playground equipment must be in good condition & appropriate. Otherwise, do not use it! Do not take any chances on liability.
- Walks, hikes, games and sports must be confined to the playground.
- Interior facilities used for extra classroom activities and recreation must follow the same ratio guidelines and playground rules.
- Bathroom breaks and hand washing should follow playground activities.

#### Guidelines for TCC Safety

- Know fire drill procedures and the location of fire extinguishers. Keep exit pathways free of furniture and other objects.
- Wipe up spills quickly and thoroughly.
- Cover all electrical outlets with plastic caps. Check extension cords for frayed wiring. Tape down extension cords that may cause someone to trip and fall. If you are in a situation where space heaters are used, be aware that they may cause air pollution that leads to respiratory disease.
- Lock poisonous substances such as cleaning solutions in cabinets. Also, keep solutions in the original containers for safety. Medications are kept in the first aid kit. The coordinator/director will keep the keys.



- Be familiar with the location of phones and have emergency information and numbers listed nearby.
- Toys and equipment are checked daily and maintained. Broken toys are repaired or discarded because they present a hazard. No ribbons, string, cord, or yarn are to be attached to pacifiers. Observe toys for broken pieces, sharp corners and loose parts.
- Styrofoam cups and brittle plastic forks are choking hazards because small pieces can easily break off when these objects are chewed.
- Set up furniture, activities and equipment so that doorways and pathways are kept clear.
- Playground equipment should be firmly anchored. This safety measure will be checked initially when we open the child care unit. More than 70 percent of injuries on the playground are the result of falls - children pushing and shoving each other, dare devil behavior and inattention by children.
- When diapering an infant, do not leave child unattended. Keep pins and other small objects out of her/his reach. Do not leave a child unattended in a crib with the sides down.
- Be aware of poisonous plants, shrubs and trees on the playground and building areas. Warn children that the plants will make them VERY SICK.
- Pediatric CPR and first aid are emergency skills in which all the DRTCC Unit Directors are trained.
- Incident/Injury forms need to be completed in the event of an accident.

## **Registration and Dismissal of Children**

### **Forms**

- Use designated forms.
- All information given by the parent must be kept in strictest confidence unless permission is given.
- Keep on-going log that records the children's name and identification number.
- At time of registration, the registration form must be filled out completely on each child.
- Keep a log book of staff arrival and departure times.

### **Registration Procedures**

- Two or more staff people should be at the registration station especially at the peak time-for greeting the families, assisting the parent in the proper paperwork, keeping the children calm, and escorting the children to the proper care area. The "registration" person should not vacate the desk without a replacement.
- Record the child's check-in time on the back of the registration form.
- Establish clearly and effectively at the time of registration that it is necessary to present "the pickup slip" in order to pick up the child(ren).
- Each child will be assigned an identification number which is effective for the duration of the DRTCC event. The number is recorded by the Unit Director on the log and the registration form.
- Children are identified by the use of wrist bands or masking tape on the back of the child's shirt. Write the number and the child's name on the wrist band or masking tape.

- All personal items brought by the child must be labeled. Label items with wide tape (1 1/2 inch is ideal) and large, legible lettering including the child's name and identification number.
- The identification numbers will be assigned accordingly, beginning with 001 and continuing through the central list until the response is over. At any given site one central identification assignment sheet will be used. As a number is assigned to a child, the number will be marked through (i.e., 202). This will reduce the chances of duplication.

### **Dismissing (Picking Up) the Child**

- The person picking up the child is required to return the pick-up slip and show a picture ID for verification. No child will be released to anyone other than the parent or persons listed on the registration form.
- The staff person at the registration station is responsible again to greet the parent or responsible person, check the credentials (the pick-up slip) and begin the dismissing procedure.
- A staff person will locate the child by name and number and their personal belongings and return them to the check-out station.
- Record child's check-out time on the back of registration form and remove ID bracelet. Have parent sign the form.

### **Sanitation**

#### **Health and Disease Control**

- Hale and Polder, using data from the Department of Health and Human Services of the United States Public Health Service's Center for Disease Control and Prevention, suggest that these symptoms should be followed for exclusion of sick children or children with communicable situations:
- Fever--is defined as having a temperature of 100°F or higher taken under the arm, 101°F taken orally, or 102°F taken rectally.
- Diarrhea--runny, watery, or bloody stools
- Vomiting--two or more times in a 24-hour period
- Sore throat with fever and swollen glands
- Body rash with fever
- Severe coughing--child gets red or blue in the face or makes high-pitched whooping sound after cough.
- Eye discharge--thick mucus or pus draining from the eye, or pink eye
- Yellowish skin or eyes
- Child is irritable, continuously crying, or requires more attention than you can provide without hurting the health and safety of other children in your care.
- Other symptoms to watch for (not covered by Hale and Polder): head lice, discolored nasal discharge, exposure to chicken pox, began taking an antibiotic less than 24 hours prior.
- Toys/furniture should be sanitized with a bleach solution (1 tablespoon bleach to 1 quart water). This must be mixed daily and not carried over for later use.

### **Safe Food Handling and Sanitation Practices**

- Food must be served and stored at the appropriate temperatures.
- The danger temperature for food is between 40°F and 140°F.
- Use all disposable dishes and serving ware—plates, cups, eating utensils, napkins
- Use serving gloves.
- Wash hands before food preparation and serving.
- When drying hands use paper towel only or air dry.
- Team members are encouraged to take Southern Baptist Disaster Relief food preparation and sanitation courses.
- See booklet: Keeping Kids Safe - A Guide for Safe Food Handling and Sanitation *and* The ABC's of Safe and Healthy Child Care.
- Throw any uneaten food away.
- Partially consumed bottles can be refrigerated and used within two hours. Reheat only 1 time. After 2 hours throw contents out and rinse bottle and nipple.

### **Diapers**

- Disposable gloves must be worn for diaper changing. Gloves must be disposed of after each usage.
- Hands must be washed with soap and water or cleaning solution after each diaper changing.
- Only disposable towels are to be used for hand drying.
- Diaper changing surfaces must be sanitized after each use. Use 1/4 cup bleach to a gallon of water.
- Crib sheets, burp cloths, bibs and aprons must be laundered after each use.

### **Use of Disposable Gloves**

- For diaper changing
- For handling of body fluids
- For treating open wounds
- Gloves must be disposed of after each usage

### **Hand Washing**

- Upon arrival at the DRTCC site (children and staff)
- Before handling food
- After using the toilet
- After handling shared toys
- After coming in from outdoors
- During illness, after sneezing, touching eyes, nose or mouth
- After nose wiping

## **Health Concerns**

### **Abuse Prevention**

- At time of arrival, the registrar should ask the admitting adult about any abrasions or bruises. These must be recorded on the registration form.
- Staff should never be isolated where they cannot be observed by other staff.
- Staff may never hit, shake or verbally abuse a child. Doing so will result in immediate removal from the TCC unit and team. Documentation is required.

### **Accidents and Injuries**

- In the event that a child is injured, contact the Unit Director immediately to determine first aid needs.
- Any injury occurring to a child while in TCC must be reported on an accident form.
- In the event of serious injury, call 911. Staff should administer appropriate treatment until 911 arrives.

### **Behavior and Discipline**

- Guidance and discipline will always be administered in a firm, positive manner with a Christ-like spirit.
- Children will not be allowed to behave in a manner that could cause injury to anyone.
- In the event that a child cannot be controlled, it may be necessary to remove the child from the TCC program. This is at the discretion of the Unit Director. Documentation is required.

### **Sanitizing the Modules**

- Pull all items from the shelf onto the floor.
- Empty three (3) plastic tubs and set them on top of the module or on a convenient table. Put soapy water in one tub, clear water in the second, and bleach water (1 tablespoon per 1 quart of water) in the third. (Alternative: If you have running water easily accessible, toys may be rinsed under running water instead of placed in the second tub).
- Using a different disposable sponge or cloth for each tub, wipe out all of the shelves with each of the waters.
- Begin washing toys and tubs and leaving them to dry on a white towel. Each toy should be in the bleach water for at least 15 seconds for thorough sanitizing.
- If a toy cannot be submerged, (if there is a hole and water would be trapped inside, or it is made in a way that it would be harmed, such as a book), use the damp sponge to wipe it off.
- Change the water as needed, when the soapy water is dirty, or the bleach or clear waters become soapy.
- As toys and tubs dry, replace them on the shelves.

### **Hygiene Practices**

- Caring for preschoolers and children includes providing a clean environment where the child can explore, create, learn and play. That means toys, teaching materials,

equipment, walls and floors need practices to ensure a safe and clean environment for the child.

## **Teachers of Infants and One-Year Olds**

### **Changing a Diaper**

- Collect a sheet of waxed paper, moist disposable towelette, a clean diaper and disposable gloves approved for medical use.
- Place the waxed paper on top of a clean diaper and slide both under the child on the changing table.
- Roll the soiled or wet diaper in waxed paper. Fasten the clean diaper securely.
- Place any wet clothing in a plastic bag before placing in diaper bag.
- Put a wet or soiled disposable diaper in a plastic bag and place it in a trash container lined with a disposable plastic bag which can be securely closed at the top when trash is emptied.
- Wipe vinyl mat with disinfectant solution (1 tablespoon bleach to one quart water), rinse in clear water and dry with disposable paper towel.

### **Cleaning a Crib**

- Remove the towel and all teaching materials.
- Spray entire bed with disinfectant spray, including mattress, sides and top edges.
- If wooden cribs are available, use warm soapy water, clear rinse water and a disinfecting solution, (1 tablespoon bleach to one quart water), to clean crib rails and all sides of the mattress. Wipe chrome crib rails dry with disposable towels to prevent rails from rusting.
- Let mattress air dry.

### **Washing Hands**

- After changing a diaper and removing disposable gloves
- After assisting a child with toileting
- After wiping a child's nose or mouth
- Before feeding a baby or serving snacks
- Before and after attending to a cut or other injury. When blood is present, use disposable gloves. Clean hands and surface with one part bleach to ten parts water.

### **Hand Washing Procedures**

- Use mild liquid antibacterial soap and warm water.
- Scrub hand vigorously for 10-15 seconds.
- Dip hands in diluted bleach solution (1 tablespoon bleach to 1 gallon water).
- Rinse hands thoroughly and dry with disposable paper towels.
- If a water source is not available in the room, use a spray bottle or pan filled with soapy bleach solution, a spray bottle (or pan) filled with clear rinse water and a dishpan for washing hands. If pans of water are used, change water frequently (at least twice during a three-hour period).

### **Washing Teaching Materials**

- In a baby/one-year-old class, fill three basins with: warm soapy water, disinfectant solution, (1 tablespoon bleach to 1 quart water, mixed fresh), and clear rinse water.
- Wash each toy, teaching picture and so forth, after use by a child during the sessions as needed. Change basins of water frequently as needed.
- After the session, wash all toys and teaching materials and set them aside on towels or in a dish drainer to air dry.

### **Wearing Disposable Gloves**

- When teachers come into contact with blood, they must use single-use, disposable gloves.
- The teacher or worker must wear a new pair of disposable gloves every time a diaper is changed.
- Wearing disposable gloves for tears, wiping noses and drooled saliva is not practical, so the worker should use tissues for this purpose, washing hands immediately thereafter.

### **Teachers of Two-Year-Olds through Second Graders**

#### **Washing Hands**

- Wash hands after assisting a child with toileting, and wiping a child's nose or mouth.
- Wash hands before and after attending to a cut or other injury. When blood is present, use disposable gloves. Clean hands and any soiled surfaces with a solution of 1 part bleach to 10 parts water.
- Use a mild liquid antibacterial soap and warm water.
- Scrub hands vigorously for 10-15 seconds.
- Dip hands in a mild diluted bleach solution (1 tablespoon bleach to 1 quart water) or fill a spray bottle with a mild diluted bleach solution (1 tablespoon bleach to 1 quart water). Keep mixture in a quart container to replenish during the session if needed.
- Rinse hands thoroughly and dry with disposable paper towels.

#### **Washing Teaching Materials**

- Clean teaching materials according to the frequency of use.
- Wash the following teaching materials with a cloth and mild bleach solution (1 tablespoon bleach to 1 quart water):
  - Teaching pictures
  - Books
  - Puzzles
  - Blocks and block accessories (wooden figures, trucks, and so forth)
  - Tables and Chairs
  - Chairs
  - Shelves (books, blocks, puzzles, nature, music, and so forth)
  - Art easel and art brushes
  - Toy telephone
  - Any hard plastic item

- Wash any home living, tablecloth, or cloth items regularly. Wipe home living table after each session with a mild bleach solution of 1 tablespoon bleach to 1 quart water.
- To clean toys with a spray bottle, place toys on white towels and spray with a solution of 1 tablespoon bleach to 1 quart water. Allow toys to air dry or wipe with clean towels.

### **Cleaning the Walls and Floors**

- Clean door/knobs regularly with a mild bleach solution of 1 tablespoon bleach to 1 quart water.
- Clean walls and floors as needed with the mild bleach solution.

### **Assisting Children in Developing Hygiene Habits**

- Provide antibacterial liquid soap for preschoolers and children to use after toileting, (for twos still wearing a diaper, encourage hand washing after diapering).
- Provide for hand washing after inside and outside activities, before snacks and food tasting experiences.
- Encourage preschoolers and children to wash hands after blowing their noses or sneezing.

### **Food Preparation Area**

- Store containers of food a minimum of 6 inches off the floor.
- To provide sanitary work areas, food contact surfaces are washed, rinsed and sanitized after each use with a mild bleach solution (1 tablespoon bleach to 1 quart water). Prepare new solution daily to maintain disinfecting strength.
- When washing dishes and kitchenware, use hot water. Instead of using dish towels for drying, air-dry dishes and kitchenware on rack and drain board, as this method is more sanitary.
- Formula is stored no longer than 48 hours after opening. Other foods are used within 36 hours after opening or must be discarded. Check expiration dates of foods before opening.
- Potentially hazardous food is refrigerated **at no more than 45 degrees F** or heated to **no less than 140 degrees F**. Store food in original containers.

### **First Aid Instructions**

- Observe the child before touching him/her. You can find out much information before you actually touch the child. Look for signals that indicate changes in consciousness, any breathing difficulty and any apparent injuries or conditions. All may change as soon as you touch the child because he or she may become anxious or upset.
- Caring for ill or injured children can be very stressful. Staying calm will show confidence and help keep the child calm.



- Explain what you are going to do before you do it. Be sure to use terms and language the child will understand. Check a conscious child from the feet to the head rather than head to toe. The child is more likely to accept you first touching the feet and progressing to the head.

## **Skin injuries**

### **Abrasions**

- Wash under running water to loosen dirt
- Cleanse gently with soap and water
- Dress with clean gauze and cloth

### **Lacerations**

- May require sutures
- Control bleeding
- Cleanse with water, mild soap or peroxide and clean cloth
- Dress with antibiotic ointment and gauze

### **Burns**

- Stop the burning. Put out flames or remove the victim from the source of the burn.
- Cool the burn. Use large amounts of cool water, (not ice or ice water). You can apply soaked towels, sheets, or other wet clothes to a burned face or other areas that cannot be immersed.
- Cover the burn. Use dry, sterile dressings or a clean cloth. Loosely bandage them in place. Covering burns helps keep out air and reduces pain. It also prevents infection.

### **Bone Injuries**

- Treat possible fractures as such until proven otherwise.
- Simple objects may be used as splints: magazines, tongue blades, pillows.

### **Insect Stings**

- Do not leave the child unattended. Watch for possible allergic reaction.
- Place a cool compress on sight of sting.

### **Poisonings**

- Prevention is the best way to avoid accidents. Keep potential poisons away from or locked up when children are present.
- Save container!

### **Things to Remember**

- PREVENTION is the best defense against accidents, but we must know how to respond quickly and appropriately to emergency situations as they arise.
- Remain calm and offer reassurance and comfort.
- Treat most serious injuries first.
- Try to get an account of what happened from child or bystanders.
- If injury seems serious, send for medical help.

A good practical resource is available from the American Red Cross called, *Till Help Arrives*.

## **Chapter Six: Characteristics of Children and Appropriate Responses**

### **Birth to Three Years Old**

Trauma is an emotional shock that can intensify characteristics such as fear, anger and jealousy. Following are general characteristics of children. Be sensitive to how they are intensified during disasters. A crisis produces stress, fear, anxiety and can result in childhood trauma.

#### **Physical**

1. His large muscles are still developing. Provide materials and activities on his level.
2. He has plenty of energy. Allow him space and time to move around.
3. He tires easily. Alternate activities with quietness.

#### **Mental**

1. His vocabulary is limited. Talk on his level.
2. His attention span is limited. Provide a variety of activities.
3. He has limited ideas of time and space. Avoid specific concepts of time.
4. He is imaginative. Provide opportunities to "play like."
5. He is curious. Give him simple, direct answers.
6. He is literal-minded. Avoid abstract ideas or symbolism.
7. He learns by imitation. Be a good example.
8. He responds by suggestion. Avoid commands.
9. He learns through his senses. Provide opportunities to see, touch, hear, and smell.

#### **Social**

1. He is self-centered. Be understanding, but encourage sharing.
2. He wants approval. Commend appropriate behavior.

#### **Emotional**

1. He has strong emotions. Control your own emotions; provide a quiet atmosphere.
2. He has feelings of insecurity. Provide structure while being flexible.
3. He has some control over crying. Encourage him to ask for things rather than cry for them.
4. He may act out his anger. Do not let tantrums be successful. Take them away from their audience. Encourage them to use words to express their needs, and respond positively when they do. They may just need someone to hold them to feel secure and loved.
5. He may become jealous for the attention of his caregiver. Avoid favoritism.
6. He may be possessive. Respect his belongings. You may need to put them out of reach of other children, but within sight of the owner. Label special toys with the child's name.

## **Spiritual**

1. His concept of God varies according to his culture and upbringing. Letting him see God in you will be more important than any words you can say.
2. His first evidence of God may be you. Make sure you represent Christ with love and compassion.

## **Four to Five Years Old**

### **Physical**

1. He is active. Provide ample space and activities that allow him to move frequently.
2. His large muscles are developing. Provide large materials and toys.
3. He can do only one thing at a time. Provide simple, one-at-a-time activities.
4. He is susceptible to disease. Keep play and sleep areas clean; sanitize toys.

### **Mental**

1. He has a limited vocabulary. Choose simple stories; use short, action words.
2. He enjoys repetition. Select good games, stories, and activities. Repeat them as often as the child seems interested.
3. His memory may be undependable. Send notes to parents. Do not expect him to remember from one day to the next.
4. He usually believes what he hears. Tell him the truth. If you do not have an answer, say so.
5. He thinks in concrete terms. Avoid symbolism.
6. His sense of time is limited. Use terms such as "a long time ago" or "after we eat lunch" as time references.
7. He learns by doing. Let him do as much for himself as he is comfortable doing.

### **Social**

1. He is dependent. Give assistance only when he requests it. Praise him for completing work himself.
2. He may be shy. Respect his shyness. Help him choose activities with which he is comfortable. Provide a variety of activities so he can choose.
3. He is self-centered. Be understanding, but encourage sharing.
4. He likes to play alone. Provide individual play experiences.
5. He has imaginary playmates. Don't encourage him to give them up.
6. He needs attention. Give attention within limits.

### **Emotional**

1. He is easily excitable. Avoid confusion. Speak in a calm, quiet tone. Distract the child, or, if necessary, remove him from a difficult situation.
2. He is afraid of the unfamiliar. Provide as much stability as possible.
3. He has many fears and can be insecure. Be reassuring without being misleading. Identify with his fears without reinforcing them. Don't make up answers or create fantastical reasons. Saying "I don't know" or "I don't understand" is OK.

## **Spiritual**

1. He "catches" his religion. Be aware of teachable moments.
2. He is beginning to see the difference between right and wrong. Praise him when he makes right choices.

## **Six to Seven Years Old**

### **Physical**

1. His finer muscles are slowly developing. Provide work on his level.
2. He likes active participation. Provide active games and projects.
3. He tires easily. Alternate energetic and passive activities, including quiet time.

### **Mental**

1. He is curious and imaginative. Answer questions as they arise. Let him act out stories and situations.
2. He likes both facts and fantasies. Use both, but help him to distinguish between them.
3. He likes to use the skills he learns in school (e.g., reading, writing, math). Provide age-appropriate activities.

### **Social**

1. He likes to talk. Value his ideas and suggestions. Provide opportunities for him to talk. Use guided conversation.
2. He likes both competitive and noncompetitive activities. Provide both.
3. He respects authority. Live worthy of his respect.

### **Emotional**

1. He is easily excited. Speak softly and calmly.
2. He has many fears. Help him feel secure; be consistent.
3. He may withdraw because of shyness. Respect his shyness. Help him choose activities that he is comfortable with. Provide a variety of activities so he can choose.

### **Spiritual**

1. He may have questions about God and is ready for some spiritual teaching. Provide spiritual experiences on his level, and give simple explanations when questions arise.
2. Some may be ready to make a decision for Christ. Be aware and ready to talk with the child about spiritual matters. However, do not force any child to make a decision.

## Chapter Seven: Ministering to Child Victims in a Disaster

### How Children Are Impacted by Disaster

#### Profound Loss and Confusion

- There is a profound sense of loss and confusion that leads to insecurities and fears.
- These losses and confusions impact children generally in the same ways as other traumatic experiences such as when families separate or divorce, a death in the family, the child going to the hospital, et cetera.
- Regular routines are broken. Adults begin responding differently to the children.
- The physical surroundings are changed. They are replaced by strange activities and unfamiliar items. The familiar items of security may be gone (i.e., personal clothes, play items, landmarks, etc.).

#### Fear

- Take a child's fears seriously.
- He is afraid of being separated from his family.
- He is afraid of being left alone.
- Fears stem from his imagination, fantasies, or the real event.
- A child who is dependent on adults for love, care, security, and food fears most of all the loss of his parents (and family) and being left alone.

#### Anxiety

- Fantasized danger can be as real and threatening as real danger.
- A child who is usually competent and unafraid may react with fear and considerable anxiety to events which threaten the family (adults).
- The adult's react with normal emotions and natural fear, whereas the child becomes terrified.

### How Children React to a Disaster

#### Emotional

- Flashbacks
- Separation anxiety
- Emotional detachment
- Regressive behavior
- Fixation of the event
- Grief
- Apathy
- Confusion

#### Physical

- Sickness without known cause
- Sleep disturbances
- Hyperactivity or aggressiveness

- Grief

## **Leading Children to Cope with Disasters**

### **Emotional Calming**

- Caring, common sense workers
- Love, a hug, understanding
- To be touched and sometimes held
- Patience from the workers
- A sense of security

### **Physical Calming**

- A clean environment
- A time for expression through play
  - housekeeping area
  - block/building center
  - books and puzzles
  - creative art
- An opportunity to talk and express feelings
- Warm clothes, nutritious food and snacks
- A time to rest

### **Social, Family and Spiritual Calming**

- Identification with the group
- Continuity of workers
- Prayer
- Curriculum directed toward non-church or non-Christian children
- Brochures directed toward helping parents deal with the needs of their children during this time of disaster

## **Suggested Methods and Techniques to Use with Children Following a Disaster**

Focus on the disastrous event in this sequence

- General events – If a flood – Talk/draw about the flood in general. Floods happen when....Then....
- Specific events – Talk/draw about the local flood you just experienced. Then....
- Personal experience – Talk/draw about each person’s personal experience in the flood. Then....
- Conclude with quiet, reflective time.

**Talking Method – CAUTION** - Remember to keep yourself in a guiding role; not in a role of control or counseling. Reassure the children by verbally acknowledging and normalizing their experience. For some children, the talking method is not helpful. Why?

- In some cultures, talking openly isn’t comfortable, appropriate, or polite.
- In some families, talking out one’s feelings isn’t possible or supported.



- Some children have been raised in situations other than with family where talking openly was practiced.
- Some children prefer not to discuss their feelings openly due to personality type, privacy concerns or lack of trust in the process.
- All these reasons should be respected as valid.

#### Talking Method:

- Child tells a story – allow metaphors.
- Puppets tell or live a story.
- Have an open discussion – ask for volunteers to begin with and talk “general and specific.”
- Use photos, drawings, etc. to facilitate discussion.
- Use video prior to discussion.
- Create a skit, play or do role playing (provide dress up clothes, including uniforms to represent emergency workers, etc.).
- Do show and tell related to disaster.
- Inform the children about the disaster to make it less threatening to talk or act out.

**Drawing Method** – Introduce drawing as another way of talking, but silently. Drawing is a means of expression used by many; others might use singing, dancing, or talking. Drawing is an option for expression; not a required activity.

Activities – (use questions below to help as themes for drawing).

- Draw or write a book together.
- Write journals with pictures.
- Do a collective drawing – a mural. Murals tell a collective story, develop and support teamwork and some children may feel safer as opposed to individual art.
  - Adult should do very little drawing.
  - Give the mural a place of honor in the classroom.
  - Make it accessible everyday for viewing, additions, etc.
  - Fill it in on an on going basis.
  - Celebrate it. Use it to demonstrate getting through something tough. Facilitate discussion.
  - Take photos when completed.
- Draw aspects of the event (people, places, activities). Suggest rather than say draw a fireman helping someone – say draw a person you saw doing something helpful.
- Create a collage. This is the safest form of drawing. The child feels they are losing less of self.
  - A collage can be extremely powerful.
  - They provide boundaries. (They can draw what they can’t find in magazines.)
- You can also look at pictures, drawings, paintings, and talk about what they communicate.
- Allow a full range of expression. Respect all varieties.
- Allow children to discard their artwork.

- Emphasize that their work will not be judged, graded, or necessarily shown to others. (Don't exhibit artwork if a child does not want it shared.)
- Reassure them that there is no right way to draw.
- Use various mediums (crayons, pencils, markers, paint).
- Exercise as little control as possible over the artwork.
- A key element to the drawing method is the discussion of the activities afterward. This can help to bring closure to the experience. Allow those who want to, to talk about their drawings. Use open-ended questions.

**Leading Questions** – These are some leading questions and suggested themes you can use to help children express themselves in either method.

1. Where were you when it happened?
2. What were you doing?
3. Where were your friends?
4. Where was your family?
5. What was your first thought when it happened?
6. What were you thinking during it? (Allow for silence for some with low language skills, shyness, discomfort, etc. Especially encourage peer support for these children).
7. What did you see?
8. What moved, what fell?
9. What changed? (Life style, living conditions)
10. What changed after the disaster?
11. What did you hear?
12. What sound did it make?
13. What did you smell?
14. What did you do after that?
15. What did you lose?
16. How did you feel?
17. What did other people around you do?
18. What was the silliest thing you did?
19. Were you or anyone else you know injured?
20. What happened to the animals around you?
21. What dreams did you have after it? (related or unrelated – either is fine to discuss).
22. What reminds you of it? When do you think about it?
23. What do you do differently since the disaster?
24. How do you feel now?
25. What makes you feel better?
26. Was anyone you know killed in the disaster? (Your goal is to help the child feel better.)
27. How have you gotten through rough times before?
28. What would you do differently if it happened again?
29. How did you help others? How would you help next time?

You might think of other leading questions, but make sure that the questions are open-ended. This means they can't be answered by a yes or no only. Open-ended questions facilitate verbal expression. Any of the above questions would be helpful at any time after a disaster—the next

day, the next week, or later. These questions can be used as the basis for the talking or drawing methods of activities.

Material is from “How to Help Children after a Disaster,” a guidebook for teachers. FEMA 219/Nov. 1991, Alameda County Mental Health Services

## Room Arrangements

### Service Center or American Red Cross Shelter

#### A. Room Options

1. One room - all ages together
2. Multiple rooms with ages divided (siblings or relatives may not want to be separated after a trauma)
3. Open room with children in sections of the room

#### B. Operations

1. Children participate for a few minutes to several hours (usually 3 - 4 hrs.)
2. Snacks—about every 2 hours
3. Meals—prefer parents take care of meal—evaluate situation
4. Resources for snacks and meals—American Red Cross or other servicing organization, disaster relief feeding unit, donations, parents or relatives in the building
5. Service center hours usually 8 a.m. to 6 p.m.

### Child Care Center

#### A. Room Options

1. One room with all ages together
2. Multiple rooms with ages divided (siblings or relatives may not want to be separated after a trauma)
3. Church setting, probably in preschool rooms or fellowship hall, with TCC equipment

#### B. Operations

1. Children participate all day, perhaps for several days (8 a.m. to 6 p.m.)
2. Snacks (2) in mid-morning and mid-afternoon
3. Lunch—ERV, SBC feeding unit, or if facilities available, fix on site

## Suggested Schedule for Centers

### Service Center

8:00	Open center Register children Wash hands Free play - children may choose what they would like to do Bathroom and hand washing -- as needed during the day
10:00	Snack: drink and cookie, crackers, raisins, et cetera
12:00	Lunch or snack
1:00	Quiet time
2:00	Snack
4:00	Snack
6:00	Close: clean up, sanitize, get room and paper work ready for next day

### Day Care Center

8:00	Open Register children
8:30	Snack
9:00	Free play till more children arrive
10:00	Game to acquaint children and staff Activity songs -- movement Free play
11:10	Story / wind down time Bathroom -- at least try and then wash hands
11:30	Lunch
12:15	Bathroom and wash hands
12:30	Rest time -- rub backs, if child agrees Quiet music Be flexible -- depends on how well children are resting. Some children may need to lay quietly with a book if not sleepy and disturbing others. Older children up earlier -- watch video, books, quiet activities
2:30	Up, shoes on
3:00	Snack, bathroom, wash
3:30	Free play till parents arrive
6:00	Close: clean up, sanitize, get room and paper work ready for next day

## Sample Daily Schedule for Staff

- 6:00 a.m. Arise and shine for thy light has come!!  
Devotional time – a.m. or p.m.- unit director leads or delegates
- 7:00 Breakfast at disaster relief feeding unit
- 7:45 Arrive at child care site
- 8:00 Open facility  
Begin registration
- Set up a printed schedule for:  
Breaks: One 15-minute break in the morning and afternoon  
Lunch: All together or rotate  
Registration table: rotate staff for a change of pace  
It is helpful to use a bulletin board or chalkboard to list schedules.
- 6:00 p.m. Close  
Clean up  
Sanitize room—chairs, tables, toys, etc.  
Get paper work and room ready for next day
- 7:00 Dinner
- 8:00 Debriefing  
Devotional  
Prayer time
- 10:00 Lights out!!

## Staff Personal Information—Temporary Child Care

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phones: Cell \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_ Spouse's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Emergency Contact (non-spouse):

**1st Person:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2: \_\_\_\_\_

**2nd Person:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2: \_\_\_\_\_

Profession \_\_\_\_\_

How much notice do you need? \_\_\_\_\_

Do you have any physical limitations? \_\_\_\_\_

Do you have special talents? \_\_\_\_\_

Member of what Southern Baptist church? \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Association: \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Preschool/Children's  
Experience: \_\_\_\_\_

## Staff Medical Information—Temporary Child Care

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Spouse Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact (Other):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Church: \_\_\_\_\_ Association: \_\_\_\_\_

Medical Problems: \_\_\_\_\_

Physical Handicaps: \_\_\_\_\_

Restrictions: (lifting, driving, standing, etc.) \_\_\_\_\_

**Allergies (Food):** \_\_\_\_\_

Symptoms/Reactions: \_\_\_\_\_ Antidote: \_\_\_\_\_

**Allergies (Other):** \_\_\_\_\_

Symptoms/Reactions: \_\_\_\_\_ Antidote: \_\_\_\_\_

**Medications:** Name: \_\_\_\_\_ Dosage \_\_\_\_\_ Frequency \_\_\_\_\_

Side Effects: \_\_\_\_\_

**Medications:** Name: \_\_\_\_\_ Dosage \_\_\_\_\_ Frequency \_\_\_\_\_

Side Effects: \_\_\_\_\_

Person responsible for reminding you: \_\_\_\_\_

Year of DPT Booster (need new one every 10 yrs.): \_\_\_\_\_



## Information Required for All Workers with Children and Youth

Name \_\_\_\_\_  
(First) (Middle) (Last)

Maiden Name \_\_\_\_\_ Other Last Names Used \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current Drivers License \_\_\_\_\_ State: \_\_\_\_\_

List Previous Address (10-year history) \_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of or pleaded guilty to a crime?  Yes  No

If yes, please explain. (attach a separate page, if necessary) \_\_\_\_\_

Personal References (Need three including church staff member, not former employers or relatives):

Name \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Name \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Name \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

### RELEASE

The above information contained herein is correct to the best of my knowledge. I authorize any and all individuals, churches, charities, employers and references you may contact to give any information (including opinions) that they may have regarding my character and fitness for ministry. I hereby release any individual, church, charity, employer, reference or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization.

I further state that **I have carefully read the foregoing release and know the contents thereof, and I sign this release as my own free act.** This is a legally binding agreement which I have read and understand.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Southern Baptist Disaster Relief Temporary Child Care Reference Form

\_\_\_\_\_ has applied for service in Disaster Relief Temporary Child Care. We consider it important to have your appraisal of this applicant's ability, conduct, personality and character. Your cooperation in answering these questions will be greatly appreciated. YOUR REPLY WILL BE CONFIDENTIAL.

What is your relationship to the applicant? \_\_\_\_\_

Give any information you can concerning home conditions and family background which bears on the applicant's suitability for this service. \_\_\_\_\_

Is there anything in the applicant's background that would hinder cooperation with our (state) Baptist program? \_\_\_\_\_ If yes, explain. \_\_\_\_\_

Does applicant have any objectionable habits? If yes, explain. \_\_\_\_\_

Does applicant have motivation and energy to be a good staffer? \_\_\_\_\_

Is applicant active in church and/or among the young people of the community? \_\_\_\_\_

What places of leadership has applicant held? \_\_\_\_\_

Taking these and other factors into full consideration about the applicant, I (check one):

- \_\_\_\_\_ Wholeheartedly recommend  
\_\_\_\_\_ With reservations recommend  
\_\_\_\_\_ Do not recommend

We welcome additional facts or comments concerning the applicant. \_\_\_\_\_

(If additional space is necessary, please attach another sheet of paper.)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Position: \_\_\_\_\_

Please return this form as quickly as possible.

**Pick-Up Slip (Temporary Child Care)**

This identification form must be presented when you come for your child.

I.D. Number: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Team Leader's Signature: \_\_\_\_\_

Phone Number of Center: \_\_\_\_\_



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I.D. Number: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

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I.D. Number: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Team Leader's Signature: \_\_\_\_\_

Phone Number of Center: \_\_\_\_\_

## Child Registration Form—Temporary Child Care (Front Page)

ID # \_\_\_\_\_ Date: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Age: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Birth Date: \_\_\_\_\_

### Contact Information:

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Person to contact if parent is not available: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of child's physician: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

In the event a parent or other contact can not be reached by telephone or email, consider this permission to treat my child.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

I authorize TCC to photograph my child for future disaster relief training or promotional purposes: \_\_\_ Yes \_\_\_ No

I give permission for my family contact information to be given to this church for follow up: \_\_\_ Yes \_\_\_ No

Parent/Guardian Signature for photo/contact release: \_\_\_\_\_ Date: \_\_\_\_\_

### Things to Know About My Child

Medications: \_\_\_\_\_

Child's special needs and restrictions: \_\_\_\_\_

Allergies: \_\_\_\_\_ Effects: \_\_\_\_\_ Antidote: \_\_\_\_\_

Allergies: \_\_\_\_\_ Effects: \_\_\_\_\_ Antidote: \_\_\_\_\_

Feeding instructions: \_\_\_\_\_

Other: \_\_\_\_\_

Have you noticed any changes in your child since the disaster? If so, what? \_\_\_\_\_

### Infants, Creepers, Toddlers Information

Child's Name: \_\_\_\_\_

Food: (circle) Solid Strained Table Formula Type: \_\_\_\_\_ How Much? \_\_\_\_\_ How Often: \_\_\_\_\_

Nap Time(s): \_\_\_\_\_ Special needs (blanket, pacifier, etc.) \_\_\_\_\_

Current Medications: \_\_\_\_\_ Times to be given: \_\_\_\_\_

The following people have permission to pick my child up in my absence with a pick-up slip and picture identification:

\_\_\_\_\_

\_\_\_\_\_



## Temporary Emergency Child Care (Front Page) Guardería Durante Emergencia Temporal

---

Name of Child \_\_\_\_\_ Birthdate \_\_\_\_\_  
Nombre de Niño \_\_\_\_\_ Fecha de Nacimiento \_\_\_\_\_

Name of Parents \_\_\_\_\_  
Nombre de Padres \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
Domicilio \_\_\_\_\_ Teléfono \_\_\_\_\_

Mother \_\_\_\_\_ Business Phone \_\_\_\_\_  
Madre \_\_\_\_\_ Teléfono del Empleo \_\_\_\_\_

Father \_\_\_\_\_ Business Phone \_\_\_\_\_  
Padre \_\_\_\_\_ Teléfono del Empleo \_\_\_\_\_

Where parent can be located if needed.  
Dónde se puede localizar a los padres si se necesitan? \_\_\_\_\_

Address \_\_\_\_\_  
Dirección \_\_\_\_\_

Person to contact if parent not reachable.  
Persona a quién avisar si los padres no se pueden localizar. \_\_\_\_\_

Name of child's physician \_\_\_\_\_  
Nombre del doctor de su niño \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_  
Dirección \_\_\_\_\_ Teléfono \_\_\_\_\_

In event of emergency and parent cannot be reached, by phone at the above numbers, consider this permission to treat my child.  
En caso de una emergencia y que no se pueda localizar a los padres por teléfono a los numeros ya mencionados, considere este permiso para tratar a mi niño.

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_  
Firma del padre \_\_\_\_\_

---

This portion must be presented when you come for your child.  
Presente esta porción cuando venga por su niño.

Team supervisor's signature/Firma del Supervisor del Grupo \_\_\_\_\_

Phone number of center/Teléfono de la Guardería \_\_\_\_\_

Sponsored by/Patrocinado por: \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

Child's Name/Nombre del Niño \_\_\_\_\_

## Child Registration Form—Temporary Child Care (Back Page)

	DATE	TIME	AGE GROUP LEADER	SIGNATURE OF PERSON PICKING UP CHILD
IN				
OUT				X
IN				
OUT				X
IN				
OUT				X
IN				
OUT				X
IN				
OUT				X
IN				
OUT				X
IN				
OUT				X
IN				
OUT				X
IN				
OUT				X

## Injury Report—Temporary Child Care

Name of Center: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Home Address: \_\_\_\_\_

Location of Accident: \_\_\_\_\_ Time: \_\_\_\_\_

### **BRIEF DESCRIPTION OF SITUATION:**

What was child doing? \_\_\_\_\_

How did the accident happen? \_\_\_\_\_

Equipment or materials involved: \_\_\_\_\_

Hazardous conditions present: \_\_\_\_\_

Describe the injury \_\_\_\_\_

### **ADULTS IN CHARGE:**

Name of adult(s) in charge \_\_\_\_\_

Present at site of accident? Yes \_\_\_\_\_ No \_\_\_\_\_ Was parent notified? Yes \_\_\_\_\_ No \_\_\_\_\_

How was parent or guardian notified? (phone or other) \_\_\_\_\_

Name of person who notified parent: \_\_\_\_\_

### **PROCEDURE:**

First aid administered? Yes \_\_\_\_\_ No \_\_\_\_\_ By whom? \_\_\_\_\_

What was the procedure of treatment? \_\_\_\_\_

Referred to physician? \_\_\_\_\_ Nurse? \_\_\_\_\_ Clinic? \_\_\_\_\_ Hospital? \_\_\_\_\_

By whom? \_\_\_\_\_ Time: \_\_\_\_\_ Parent refused treatment? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: \_\_\_\_\_

Other information \_\_\_\_\_

List other adults present: \_\_\_\_\_

Adult witnesses: \_\_\_\_\_

Child witnesses: \_\_\_\_\_

\_\_\_\_\_  
Signature of Age Group Leader/Program Nurse

\_\_\_\_\_  
Signature of Unit Director

Date: \_\_\_\_\_

Date: \_\_\_\_\_



## Incident Report—Temporary Child Care

Date \_\_\_\_\_ Time \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Unit Director (Blue Cap): \_\_\_\_\_

Person(s) Involved: \_\_\_\_\_

Injuries: \_\_\_\_\_

Emergency Notification Made By: \_\_\_\_\_

Property Damage: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Narrative \_\_\_\_\_

Unit Director Signature \_\_\_\_\_

Onsite Coordinator Signature \_\_\_\_\_

State Disaster Relief Director Signature \_\_\_\_\_

Date Reviewed: \_\_\_\_\_

Decision: \_\_\_\_\_

## Press Release—Temporary Child Care

Free child care facilities will be provided by \_\_\_\_\_ Baptist Disaster Relief  
Temporary Child Care at \_\_\_\_\_  
for children, including infants through \_\_\_\_\_ (grade).

The temporary child care program will be available for those affected by the recent disaster. Care  
will be available \_\_\_\_\_ days a week, \_\_\_\_\_ through \_\_\_\_\_,  
from \_\_\_\_\_ a.m. until \_\_\_\_\_ p.m.

The Unit Director of the Temporary Child Care Unit, \_\_\_\_\_,  
reported that volunteers who serve at the site have been trained in disaster services.

Southern Baptists began the Temporary Child Care program to aid those affected by disasters and  
who need someone to care for their children while they attend to disaster relief needs.

# Trailer Pre-Flight Check—Temporary Child Care

Date: \_\_\_\_\_ Destination: \_\_\_\_\_

## Hookup

1. 4 stabilizer jacks in up position
2. Hitch securely on the ball. Make sure the catch lever is properly positioned.
3. Catch lever secured -- all the way forward.
4. Safety pin in the latch -- this guarantees that the latch is in proper position. and prevents latch from coming open on the road.
5. Attach the safety chains -- crisscross them.
6. Attach electric cable for lights.
7. Remove the trailer jack and verify it is in towing vehicle.

## Other Checks

1. Check and verify all lights working
  - a. Left brake light
  - b. Right brake light
  - c. Left turn signal
  - d. Right turn signal
  - e. Tail lights
  - f. License plate light
2. Tire pressure -- use gauge
  - a. Right
  - b. Left
  - c. Spare
3. All doors closed and locked – **Carry one or more keys.**
  - a. Side door
  - b. Ramp -- L/H
  - c. R/H

## Towing Vehicle

- |                            |                       |
|----------------------------|-----------------------|
| 1. 3-ring binder w/pockets | 6. Trailer jack       |
| 2. Trailer registration    | 7. 4-5 wood blocks    |
| 3. Car insurance card      | 8. License plate      |
| 4. Maps / Atlas            | 9. Flares             |
| 5. Tool chest              | 10. Fire extinguisher |

## Odometer/Mileage

Previous \_\_\_\_\_ Departure/Return \_\_\_\_\_

Net Miles \_\_\_\_\_ Accumulative Miles \_\_\_\_\_

## Signatures

Driver \_\_\_\_\_

Inspector \_\_\_\_\_

Comments: Repairs needed, date completed, cost, recommendations.



## Site Information Sheet—Temporary Child Care

Date: \_\_\_\_\_

Temporary Child Care Center: \_\_\_\_\_

Disaster Relief Center: \_\_\_\_\_

Red Cross Center Coordinator: \_\_\_\_\_

Sleeping Center: \_\_\_\_\_

Feeding Unit: \_\_\_\_\_ (Call early to report number of meals needed and confirm pickup time.)

Area Director of Missions: \_\_\_\_\_

Secretary: \_\_\_\_\_

Local Contacts: \_\_\_\_\_

Other Local Information: \_\_\_\_\_

Child Care Coordinator: \_\_\_\_\_

Registration Desk: \_\_\_\_\_

Room	Lead Teacher	Assistant Teacher
Room #1		
Room #2		
Room #3		

Floater: \_\_\_\_\_

Laundry Location: \_\_\_\_\_

Snacks and Meals Location: \_\_\_\_\_

Notes: \_\_\_\_\_

**Be sure to update the date sign and check the ice in the ice chest.**

## Allergy Alert—Temporary Child Care

**Child's Name:** \_\_\_\_\_

Allergy	Effects	Antidote

**Parent's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Allergy Alert—Temporary Child Care

**Child's Name:** \_\_\_\_\_

Allergy	Effects	Antidote

**Parent's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Daily Child Report—Temporary Child Care**

**Child's Name:** \_\_\_\_\_ **ID #** \_\_\_\_\_

**Date:** \_\_\_\_\_

**I ate:** \_\_\_\_\_ **(All)** \_\_\_\_\_ **(Most)** \_\_\_\_\_ **(Some)** \_\_\_\_\_ **(None)** \_\_\_\_\_ **of my food.**

**I** \_\_\_\_\_ **(Slept)** \_\_\_\_\_ **(Rested)** \_\_\_\_\_

<b>Diaper Changes</b>	<b>Staff Initials</b>	<b>Time</b>

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Building Survey—Temporary Child Care

Building Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Building Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Type of Building: \_\_\_\_\_

Amount of Space to be Used: \_\_\_\_\_

### Physical Survey of Rooms/Areas to be Used

1. Room #/Location: \_\_\_\_\_ Survey: \_\_\_\_\_

2. Room #/Location: \_\_\_\_\_ Survey: \_\_\_\_\_

3. Room #/Location: \_\_\_\_\_ Survey: \_\_\_\_\_

4. Room #/Location: \_\_\_\_\_ Survey: \_\_\_\_\_

5. Room #/Location: \_\_\_\_\_ Survey: \_\_\_\_\_

List more rooms on reverse side.

TCC Unit Director \_\_\_\_\_ Date: \_\_\_\_\_

Building Contact Signature \_\_\_\_\_ Date: \_\_\_\_\_



# Daily Attendance Record—Temporary Child Care

Date: \_\_\_\_\_

Workers Today: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ID #	Child's Name	Age	Time In	Time Out	Parent's Signature

## Playground Safety Checklist—Temporary Child Care

Date: \_\_\_\_\_

1. \_\_\_\_\_ Fence is in good repair.
2. \_\_\_\_\_ Playground sign is posted.
3. \_\_\_\_\_ Gates are secure and lockable and have a safety latch.
4. \_\_\_\_\_ Sight lines are unhampered.
5. \_\_\_\_\_ Play ground equipment is six feet away from fences and building.
6. \_\_\_\_\_ Play ground equipment is anchored in ground.
7. \_\_\_\_\_ Sharp edges are covered.
8. \_\_\_\_\_ Bolts and screws are secure.
9. \_\_\_\_\_ Shock & water absorbent materials are under equipment.
10. \_\_\_\_\_ Play ground is free of poisonous plants, litter, insect nest etc.
11. \_\_\_\_\_ Play toys are in good condition.
12. \_\_\_\_\_ Area is free of electrical hazards.
13. \_\_\_\_\_ Moving parts are free of defects.
14. \_\_\_\_\_ All openings other than crawl-thru and slides are less than 8 inches.
15. \_\_\_\_\_ Electrical outlets have safety covers.
16. \_\_\_\_\_ Harmful supplies are out of reach of preschoolers.
17. \_\_\_\_\_ No protruding parts are present.

Other Comments:

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## Room Safety and Sanitation Checklist—Temporary Child Care

**Date:** \_\_\_\_\_

1. \_\_\_\_\_ Locate nearest restroom to child care location.
2. \_\_\_\_\_ Scan room for electrical outlets and protect with safety covers.
3. \_\_\_\_\_ Observe windows for broken glass and make sure they are locked.
4. \_\_\_\_\_ Determine an emergency exit.
5. \_\_\_\_\_ Ensure proper lighting.
6. \_\_\_\_\_ Remove any broken furniture.
7. \_\_\_\_\_ Remove or cover sharp objects.
8. \_\_\_\_\_ Cover any hazards in carpet or flooring.
9. \_\_\_\_\_ Sanitize floors, walls, shelving, cabinets, etc. using  $\frac{1}{4}$  cup bleach to one gallon water.
10. \_\_\_\_\_ Vacuum carpets.
11. \_\_\_\_\_ Place harmful supplies out of reach of children.
12. \_\_\_\_\_ Sanitize restrooms.

Other Comments:

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## Identification Numbers—Temporary Child Care

001	051	101	201	301	401	501	601
002	052	102	202	302	402	502	602
003	053	103	203	303	403	503	603
004	054	104	204	304	404	504	604
005	055	105	205	305	405	505	605
006	056	106	206	306	406	506	606
007	057	107	207	307	407	507	607
008	058	108	208	308	408	508	608
009	059	109	209	309	409	509	609
010	060	110	210	310	410	510	610
011	061	111	211	311	411	511	611
012	062	112	212	312	412	512	612
013	063	113	213	313	413	513	613
014	064	114	214	314	414	514	614
015	065	115	215	315	415	515	615
016	066	116	216	316	416	516	616
017	067	117	217	317	417	517	617
018	068	118	218	318	418	518	618
019	069	119	219	319	419	519	619
020	070	120	220	320	420	520	620
021	071	121	221	321	421	521	621
022	072	122	222	322	422	522	622
023	073	123	223	323	423	523	623
024	074	124	224	324	424	524	624
025	075	125	225	325	425	525	625
026	076	126	226	326	426	526	626
027	077	127	227	327	427	527	627
028	078	128	228	328	428	528	628
029	079	129	229	329	429	529	629
030	080	130	230	330	430	530	630
031	081	131	231	331	431	531	631
032	082	132	232	332	432	532	632
033	083	133	233	333	433	533	633
034	084	134	234	334	434	534	634
035	085	135	235	335	435	535	635
036	086	136	236	336	436	536	636
037	087	137	237	337	437	537	637
038	088	138	238	338	438	538	638
039	089	139	239	339	439	539	639
040	090	140	240	340	440	540	640
041	091	141	241	341	441	541	641
042	092	142	242	342	442	542	642
043	093	143	243	343	443	543	643
044	094	144	244	344	444	544	644
045	095	145	245	345	445	545	645
046	096	146	246	346	446	546	646
047	097	147	247	347	447	547	647
048	098	148	248	348	448	548	648
049	099	149	249	349	449	549	649
050	100	150	250	350	450	550	650

## Disaster Relief Temporary Child Care Resources

*Involving Southern Baptists in Disaster Relief* available as download at [www.namb.net/dr](http://www.namb.net/dr).

*Hope in Crisis* (tract) available through NAMB store at [www.nambstore.com](http://www.nambstore.com) or toll-free 866-407-NAMB.

*Successful Mission Teams: A Guide for Volunteers*, Martha VanCise, (WMU #N044I22) available through Woman's Missionary Union or LifeWay stores.

*Teams Work! A No-Nonsense Approach to Team Building*, Joyce Mitchell, (WMU #W033104) available through Woman's Missionary Union or LifeWay stores.

*Missions Moments: Foundational Messages and Activities for Children*, Mitzi Eaker, (WMU #W057113) available through Woman's Missionary Union or LifeWay stores.

*The "200+ " Series (Teaching and Activities for Preschoolers)* available through Woman's Missionary Union or LifeWay stores.

*The "First Steps in Missions"* available through Woman's Missionary Union or LifeWay stores.

*The Hurt That They Feel: Helping Preschoolers Deal with Tough Issues*, compiled by Rhonda R Reeves with contributions by Mr. Rogers and others, (WMU #N044I20) available through Woman's Missionary Union or LifeWay stores.

*Adventures of the Disaster Dudes*, Presenters Guide, video, a children's preparedness program available through American Red Cross/FEMA.

*Jason and Robin's Awesome Hurricane Adventure!* Hurricane Awareness Program for children.

*When Disaster Strikes* by Marge Heegaard, taken from *When Something Terrible Happens*, Woodland Press, Minneapolis, MN 952-926-2665

**Agencies** which offer excellent children's resources:

American Red Cross (ARC), [www.redcross.org](http://www.redcross.org)  
Federal Emergency Management Agency (FEMA), [www.fema.gov](http://www.fema.gov)  
Center for Disease Control (CDC), [www.cdc.gov](http://www.cdc.gov)

### Websites:

Your state Baptist convention  
North American Mission Board, [www.namb.net](http://www.namb.net)  
Woman's Missionary Union, [www.wmu.net](http://www.wmu.net)  
LifeWay Christian Resources, [www.lifeway.com](http://www.lifeway.com)  
American Bible Society, [www.americanbible.org](http://www.americanbible.org)



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