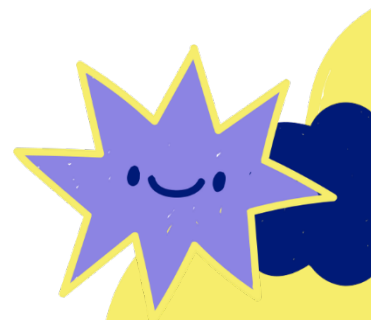
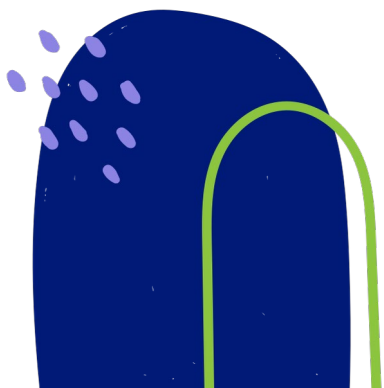


Emergency Preparedness for Children with Special Needs

You never know when there
will be an emergency...

Is your family prepared?

We care deeply about your family's well-being. Please take a moment to review the following pages to ensure you and your loved ones are ready for any situation.



Emergency Preparedness for Children with Special Needs

Adapted from Committee on Pediatric Emergency Medicine

1. Prepare a Personal Profile, a brief but comprehensive summary of information that will be important for hospital or emergency first responder management of your child's special health care needs. Your doctor and healthcare team can help. (Sample provided – page 3 – 6)
2. Update the information on a regular basis. Have the information in an accessible and useable format (do not rely on having computer/wireless access).
3. Take the Personal Profile with you to all healthcare encounters.
4. Rapid 24 hr access to the summary should be ensured. Copies should be accessible at home, preschool/daycare/school and during transport. Schools, childcare facilities and preschools should be encouraged to include the summary with the child's emergency kit and/or individual health plan
5. Caregivers (childcare/pre-school/school) should be educated to understand the use/importance of the Personal Profile.
6. Decide who in your community needs to know that there is a person with special needs in their neighborhood (Fire dept., local medical clinic, ambulance station).
7. Create a personal support network – ask a people you trust if they are willing to help you in case of an emergency. Neighbours are often the closest and most available contacts in an emergency.
8. Make an emergency escape plan – how to get out and where to go. Have an emergency kit ready and easily accessible. Remember to include your service animal in your plans.
9. Have an emergency kit ready and easily accessible.
10. Remember to include your service animal in your plans.



Personal Profile

Emergency Information Sheet

Created:		Updated:	
Name:		Personal Health Number:	Date of Birth:
Address:			Telephone:
Language(s):	Primary Language Spoken at home:	Would having an interpreter be helpful?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
*Main Living Situation & primary caregiver(s): family, foster home, MCFD Agreement.			
Advance Directives/ Code Status:	Allergies (food, medicine, latex, environmental):	Procedures and treatments to be avoided:	
Management to initiate emergently:	Techniques that promote calming in the child:		

EMERGENCY CONTACT:			
Name:		Name:	
Relationship:		Relationship:	
Address:		Address:	
Telephone (Home):		Telephone (Home):	
Telephone (Alternate):		Telephone (Alternate):	



Medical Information

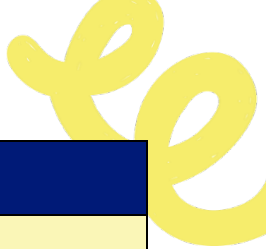
PHYSICIAN: Family Doctor	PHYSICIAN: Pediatrician/Other Specialist
Name:	Name:
Address:	Address:
Telephone:	Telephone:
Pharmacist:	Pharmacy:
Name:	Name:
Address:	Address:
Telephone:	Telephone:
Diagnosis/Condition:	Allergies:
Medications:	Dosage and Times:





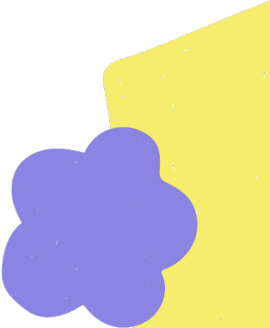
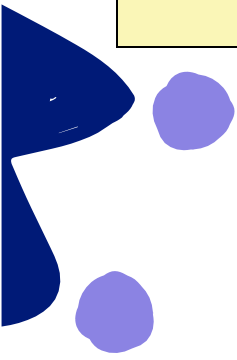
Other:	PHYSICIAN: Pediatrician/Other Specialist
Seizure Disorder? <input type="checkbox"/> Yes <input type="checkbox"/> No	Communication challenges? <input type="checkbox"/> Yes <input type="checkbox"/> No
Seizure Protocol in place? <input type="checkbox"/> Yes <input type="checkbox"/> No	Swallowing concerns? <input type="checkbox"/> Yes <input type="checkbox"/> No
Visual Impairment? <input type="checkbox"/> Yes <input type="checkbox"/> No	GI Tube? <input type="checkbox"/> Yes <input type="checkbox"/> No
Hearing Impairment? <input type="checkbox"/> Yes <input type="checkbox"/> No	Wheelchair/other equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No
Cognitive Challenge? <input type="checkbox"/> Yes <input type="checkbox"/> No	Immunizations current? <input type="checkbox"/> Yes <input type="checkbox"/> No
Behavioural Challenge? <input type="checkbox"/> Yes <input type="checkbox"/> No	

RISK FACTORS: Recent surgery; brittle bones, elopement; high anxiety under stress etc.



Other Considerations:

Additional Healthcare Providers:		Contact Information:
Physical Therapist:		
Occupational Therapist:		
Speech-Language Pathologist:		
Social Worker:		
Community Health Nurse:		



Is Your Family Prepared?

There are many resources available to help you prepare

Here are some links:

Gov't of Canada	a comprehensive guide including considerations for people with special needs	www.GetPrepared.ca
St. John Ambulance	Information, tips and kits	www.sja.ca
American Red Cross	US document in conjunctions with FEMA	www.redcross.org/services/disaster/be_prepared/disability.pdf
Emergency Management BC	Information, training, resources, overviews of emergency planning by community	https://www2.gov.bc.ca/gov/content/safety/emergency-management

If you have already started your kits, did you consider these supplies (as appropriate):

- Disposable supplies: nasal cannulas, suction catheters; feeding tubes; extra saline
- 2 week supply of all medications
- Copies of prescriptions for medical equipment, supplies and medications
- Battery back-up for any electrical equipment
- Extra batteries for hearing aids, communication devices
- Special dietary foods/textures/other supplies
- A cooler available for anything that must be refrigerated

