Department of Benefits and Family Support Family and Children's Services

EMERGENCY PLAN FOR RESOURCE FAMILY HOMES

Type or print clearly. Post emergency numbers where easily visible.				
CAREGIVER NAME:		DATE:		
EMERGENCIES - LIFE THREATENING - Call 9-1-1- and tell them the number you're calling from:				
HOME ADDRESS:				
MAJOR:				
CROSS ROAD:				
HOME DIRECTION FROM CROSSROAD:				
2. EMERGENCIES – NON-LIFE THREATENING – List direct local number for the following.				
Fire/Paramedics:	Child Protective Services:	Foster Care Ombudsman Office:		
Physician:	Dentist:	Crisis Center:		Other:
Hospital:	Police/Sheriff:	Poison Control:		
3. OTHER EMERGENCY CONTACTS: – List numbers that may be helpful after a disaster or emergency.				
SOCIAL WORKER:			OTHER:	•
RELATIVE:				
PROBATION OFFICER:				
SUBSTITUTE CAREGIVER:				
doors are not locked from the in	me emergencies require evacuation iside. In the event of an emergency, ne. Do not let anyone return to the h	get everyone out, fo		
5. UTILITY SHUT OFF – Know where your utilities are located.			_	
GAS:			GASCO. PHONE:	
ELECTRIC:			ELECTRIC CO. PHONE:	
WATER:			WATER CO. PHONE	
	The fire department may help you wi		ation.	
FIRE EXTINGUISHER: (IF REQUIRED) SMOKE ALARM				
FIRE ALARM LOCATION (IF YOU HAVE ONE)				TYPE
 OTHER EMERGENCY EQUIPMENT – Location of first aid kit, blankets, food, water, flashlight, radio and other emergency equipment. 				
LOCATION				