

2

YOUR EMERGENCY PLAN



ACTIVITY 5: GET KIDS INVOLVED!



Goal: Engage children in important and fun preparedness activities.

Stage a scavenger hunt with your child. Ask them to find things for their go-bag or take a walk outside and look for examples of emergencies in your neighborhood.

Have a dress rehearsal where you walk through your emergency plan. Take an hour after dinner or on a weekend and practice what you've discussed so far. Make a game of this every few months to keep your child's memory fresh and help them feel calm and comfortable in case you must evacuate during a disaster.



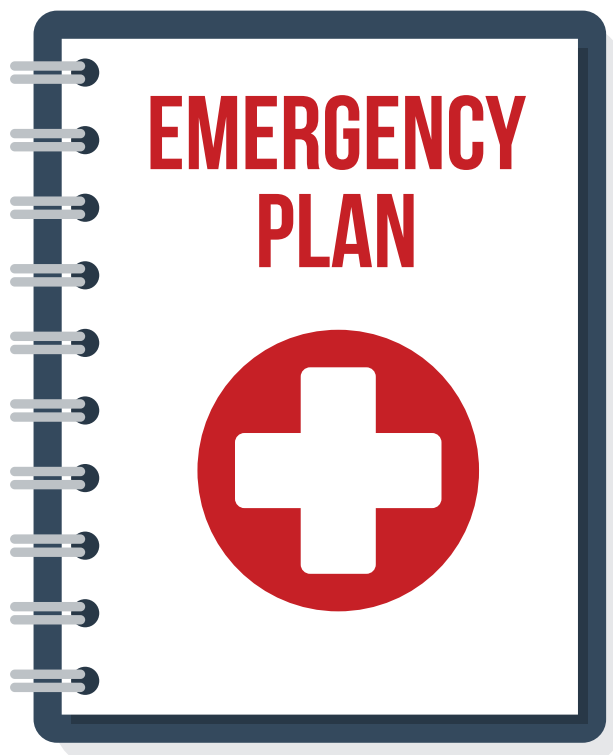
ACTIVITY 6: BUILD YOUR EMERGENCY PLAN



Goal: Develop an emergency plan for those you care about.

This activity is at the heart of being 2 Weeks Ready! It's okay to do it in small pieces and a little at a time; consider tackling one activity each week or month until it's complete.

The Navigation Tool To Build A Be 2 Weeks Ready Disaster Plan And Stash is a series of charts that helps you build your entire 2 Weeks Ready emergency plan and stash. Use these charts to determine what you can do in steps based on what you have time for (what is easiest and takes the least effort to what takes the most effort) and what you can afford (lowest cost to highest cost).





NAVIGATION TOOL: BUILD A 2 WEEKS READY DISASTER PLAN AND STASH



The charts that follow can help you build your entire 2 Weeks Ready stash. You can do this, especially because it doesn't need to be done all at once! Use these charts to help you determine what you can do along the way to becoming ready.

CONTAINERS			
ITEM	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Old backpack	X		
Large plastic bin		X	
Waterproof container			X
PERISHABLE ITEMS			
ITEM	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
First-Aid Supplies		X	
Water			
a. Empty water containers	X		
b. Filled water containers		X	
c. Two weeks of water stored for all			X
d. Water purifications, filtration supplies		X	
Food			
a. Some items added to the emergency kit	X		
b. Three days of food		X	
c. Two weeks of food for all			X
NONPERISHABLE ITEMS			
ITEM	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Flashlights and lanterns		X	
Radio (battery, hand crank or solar powered)		X	
Extra batteries		X	
Plates, cups and utensils	X		
Infant and small children's needs (if appropriate)		X	
Fire extinguisher			X
Tools to shut off utilities		X	
Clothing	X		
Bedding	X		
Footwear		X	
Matches or lighters in a waterproof container		X	

Cash		X	
Plastic sheeting and duct tape for sheltering in place		X	
Cell phone chargers		X	
Solar chargers			X
Set of keys, including cars and house			X
Work gloves		X	
SANITATION AND TOILETRY ITEMS			
ITEM	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Sanitizer	X		
Sunscreen and bug spray		X	
Feminine care products		X	
Prescription medicines			X
Common over-the-counter medicines		X	
Filtered masks for nose and mouth	X		
Moist wipes		X	
Garbage bags	X		
Disinfecting wipes		X	
Paper towels	X		
Soap	X		
CRITICAL DOCUMENTS			
ITEM	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Copy of driver's license and passport		X	
Social Security card or number	X		
Copy of birth certificates		X	
Property titles or lease agreements for your car and home		X	
Bank, credit card and investment account numbers and corresponding customer service telephone numbers			X
Health insurance and life insurance account information		X	
Home possessions catalog		X	
Wills			X
Marriage certificate		X	
Adoption and citizenship papers		X	
Medications and eyeglass prescriptions		X	
Important files backed up on an external hard drive		X	
ENTERTAINMENT ITEMS			
ITEM	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Books	X		
Games	X		
Cards	X		
Comfort foods		X	
Paper and pencils, coloring books	X		

HAVE A PLAN



FAMILY MEMBERS AND OTHER VITAL INFORMATION			
	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Family and contacts	X		
Service provider information		X	
Insurance information		X	
Utility information		X	
Banking information			X

ESTABLISH A DISASTER MEETING PLACE			
	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Outside your place	X		
Outside your neighborhood		X	

EVACUATION PLANNING			
	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Notification (when do you evacuate)	X		
Location (where do you go, preferably not a shelter)		X	
Transportation (how are you getting there, have a backup plan)		X	
Communication (who do you tell you're evacuating)			X

FAMILY CONTACT PLAN			
	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Family contacts	X		
Out-of area family contact		X	

HOME SAFETY MAP			
	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Utility shut-off locations	X		
First-aid kit	X		
Evacuation kit location	X		
Smoke detectors	X		
Fire extinguishers	X		



SPECIAL FAMILY NEEDS			
ADDITIONAL KIT SUPPLIES	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Mobility devices			X
Accessibility devices			X
Backup power for critical devices			X
Extra eyeglasses		X	
A list of the style and serial number of medical devices (include special instructions for operating your equipment if needed)		X	
Written instructions, such as languages spoken, medical requirements, people to notify, etc., that can help first responders and others assisting you get you the services you need	X		
Diapers and any other personal hygiene items	X		
Establish a support network of family, friends, neighbors or co-workers who can help prepare and help you during a disaster			X
Post emergency instructions on the refrigerator or by a door easily accessible to responders — include medications, necessary equipment information and emergency contacts		X	
Sign up for emergency alerts through your city, county or state emergency management office			X
Identify the location of life-sustaining treatments, such as dialysis, at multiple sites	X		
Medical alert tags or bracelets		X	
PET CONSIDERATIONS			
	EASIEST EFFORT	MORE EFFORT	MOST EFFORT
Tag ID with contact information		X	
Microchip			X
Critical information documented including age, vet, vaccinations	X		
Current picture of pet		X	
Pet evacuation kit			
a. Kennel		X	
b. Food	X		
c. Leashes and collars	X		
d. Water	X		
e. Bowls	X		
f. Pads		X	
g. Litter		X	
h. Toys and beds		X	
i. Garbage bags for cleanup and disposal	X		



YOUR EMERGENCY PLAN

ANNUAL UPDATE:

ABOUT THE HOUSEHOLD

FIRST/LAST NAME	DATE OF BIRTH	CELL PHONE	MEDICATIONS	ALLERGIES, OTHER INFORMATION*
	/ /	()		
	/ /	()		
	/ /	()		
	/ /	()		
	/ /	()		
	/ /	()		
	/ /	()		
	/ /	()		
	/ /	()		

** Other Information (allergies, medical conditions, school, work, or anything else that might be important)*

PET NAME	AGE	SPECIES	LICENSE/ MICROCHIP	VET NAME/NUMBER	MEDICAL/BEHAVIORAL ISSUES

MEETING PLACE AWAY FROM WHERE YOU LIVE

ALTERNATE MEETING PLACE (in case the neighborhood is inaccessible)

OUT-OF-STATE CONTACT

CREATE ONE LIST FOR EACH MEMBER IN YOUR HOUSEHOLD

[illegible]

EMERGENCY NUMBERS

CREATE ONE LIST FOR EACH MEMBER IN YOUR HOUSEHOLD

INSURANCE / LEGAL

COMPANY NAME	PHONE	POLICY/ACCOUNT NUMBER	NOTE/COMMENTS
HOME INSURANCE	()		
RENTAL INSURANCE	()		
CAR INSURANCE	()		
LIFE INSURANCE	()		
DISABILITY INSURANCE	()		
EARTHQUAKE INSURANCE	()		
FLOOD INSURANCE	()		
MEDICAL INSURANCE	()		
DENTAL INSURANCE	()		
VISION INSURANCE	()		
PRESCRIPTION INSURANCE	()		
LAWYER	()		
OTHER	()		
OTHER	()		

UTILITIES

PROVIDER INFORMATION	EMERGENCY CONTACT	POLICY/ACCOUNT INFO
WATER	()	
SEWER	()	
ELECTRIC	()	
GAS	()	
PHONE	()	
CABLE/INTERNET	()	
OTHER	()	
OTHER	()	
OTHER	()	

EMERGENCY NUMBERS

CREATE ONE LIST FOR EACH MEMBER IN YOUR HOUSEHOLD

BANK INFORMATION (KEEP THIS INFORMATION SECURED)

BANK	ACCOUNT	WEBSITE	CUSTOMER SERVICE PHONE

EVACUATION PLAN

WHEN will you evacuate? *(Establish criteria for leaving)*

FIRE:

FLOOD:

EARTHQUAKE:

OTHER:

HOW will you evacuate? *(First choice will likely be your regular form of transportation like a family vehicle, but have alternates just in case)*

FIRST CHOICE:

BACKUP PLAN 1:

BACKUP PLAN 2:

WHERE will you go? *(Identify friends and family you can stay with if you have to leave or local shelters, if needed)*

FIRST CHOICE:

BACKUP PLAN 1:

BACKUP PLAN 2:

ACTIVITY 7: CATALOG AND INSURE BELONGINGS



Goal: Know what you have and how to insure it.

This activity helps you track the items in your household so they can be reported as part of an insurance claim if disaster strikes. Use the **Catalog And Insure Belongings Worksheet** to track what you'd miss if it was gone.



ACTIVITY TOOL: CATALOG AND INSURE BELONGINGS WORKSHEET

ITEM DETAILED DESCRIPTION	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	
	PURCHASE PRICE	APPRAISED VALUE	APPRAISAL DATE	☐ RECEIPTS ☐ PHOTOS
	SERIAL NUMBER	DATE PURCHASED	WHERE PURCHASED	

ACTIVITY 8: TEST YOUR OUT-OF-AREA CONTACTS



Goal: Identify someone outside of your area as your contact person to communicate safety.

Phone lines can quickly become overwhelmed in a large emergency. Long-distance lines are sometimes more available, so you might be able to make a long-distance call before a local one. Identify someone outside of your area as the contact person for your household. That way, everyone has a single person to call to check in with everyone else.

ACTION STEPS



- Identify someone outside of your area.
- Check with them to be sure they're up to the task.
- Share your household list with the contact so they know who they are looking for.
- Give a wallet card to all members of the household, so everyone has the out-of-area contact phone number written down (in addition to entering it into cell phones).

ACTIVITY 9: PRACTICE PROTECTIVE ACTIONS



Goal: Learn and practice different ways to protect yourself and your loved ones.

EVACUATION: A simple and fun way to practice evacuating your place quickly is a twist on the game hide-and-seek. Start with each household member in a different room or location in your home, away from all others. Then on a cue (whistle, music starts, etc.), everyone evacuates outside the home, using one of the exit routes previously identified. Then, meet everyone at your agreed-upon meeting location – this could be a tree, mailbox, trusted neighbor's porch, etc. While this should be done quickly, it shouldn't be structured as a race; you want to avoid someone getting hurt, particularly if they are climbing out a window. This game could be repeated so everyone can hide in different rooms and practice using different escape routes. Even some pets, especially dogs, love playing hide and seek!

DROP, COVER AND HOLD-ON: In an earthquake, seconds matter. If you get an earthquake alert on your phone or feel shaking, you need to immediately *Drop, Cover and Hold-on*.

1. **DROP** where you are onto your hands and knees. This position protects you from being knocked down and allows you to stay low and crawl to shelter if it's nearby.
2. **COVER** your head and neck with both arms and hands. If a sturdy table or desk is nearby, crawl underneath it for shelter. If no shelter is nearby, crawl next to an interior wall (away from windows, hanging objects and tall furniture).
3. **HOLD-ON** to your shelter until the shaking stops. Be prepared to move with your shelter if it shifts.

A great way to practice *Drop, Cover and Hold-on* is to participate in the Great ShakeOut earthquake drill held the third Thursday of every October.

If you can't take cover under a desk or table when you get an alert, you may have to adapt to your situation and environment. This can be especially important to people with access and functional needs. People with disabilities who use a wheelchair or have other mobility impairments and can't *Drop, Cover and Hold-on* should protect their head and neck with a pillow or their arms and bend over to protect themselves if they are able. Follow the guidance provided in the infographic shown here. For more information, visit www.shakealert.org.



NOTES

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