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Once you have completed your Family Emergency Communication Plan, made copies for all the members of your household, and discussed it, it's time to practice!

Here are some ideas for practicing your plan:

To help start the conversation or remind your family why you are taking steps to prepare and practice, you may want to watch the 4-minute video, *Introduction to Emergency Planning*, at <a href="https://youtu.be/TbzvomQYJpE">https://youtu.be/TbzvomQYJpE</a>. Click on the closed captioning (CC) icon on the lower right to turn on the captioning.

Practice texting and calling. Have each person practice sending a text message or calling your out-of-town contact and sending a group text to your mobile phone group list.

Discuss what information you should send by text. You will want to let others know you are safe and where you are. Short messages like "I'm OK. At library" are good.

Talk about who will be the lead person to send out information about the designated meeting place for the household.

Practice gathering all household members at your indoor and neighborhood emergency meeting places. Talk about how each person would get to the identified out-of-neighborhood and out-of-town meeting places. Discuss all modes of transportation, such as public transportation, rail, and para-transit for all family members, including people with disabilities and others with access and functional needs.

Regularly have conversations with household members and friends about the plan, such as whom and how to text or call, and where to go.

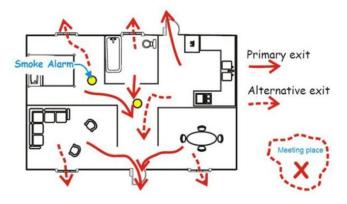
To show why it's important to keep phone numbers written down, challenge your household members to recite important phone numbers from memory—now ask them to think about doing this in the event of an emergency.

Make sure everyone, including children, knows how and when to call 911 for help. You should only call 911 when there is a life-threatening emergency.

Review, update, and practice your *Family Emergency Communication Plan* at least once a year, or whenever any of your information changes.

After you practice, talk about how it went. What worked well? What can be improved? What information, if any, needs to be updated? If you make updates, remember to print new copies of the plan for everyone.





## **FAMILY EMERGENCY COMMUNICATION PLAN**

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Home #:
Name: Mobile #: Other # or social media: Email:
Important medical or other information:
Name:
Important medical or other information:
Name:
Important medical or other information:
Name:
Important medical or other information:
Name: Address: Emergency/Hotline #: Website: Emergency Plan/Pick-Up:

SCHOOL, CHILDCARE, CAREGIVER, AND **WORKPLACE EMERGENCY PLANS** 

SCHOOL, CHILDCARE, CAREGIVER, AND WORKPLACE EMERGENCY PLANS	Name: Address: Emergency/Hotline #: Website: Emergency Plan/Pick-Up:
	Name: Address: Emergency/Hotline #: Website: Emergency Plan/Pick-Up:
	Name: Address: Emergency/Hotline #: Website: Emergency Plan/Pick-Up:
IN CASE OF EMERGENCY (ICE) CONTACT	Name: Mobile #: Home #: Email: Address:
OUT-OF-TOWN CONTACT	Name: Mobile #: Home #: Email: Address:
EMERGENCY MEETING PLACES	Indoor:

Out-of-Neighborhood: Address:.... Instructions: .....

Out-of-Town: .....

Instructions: .....

Address:....

## IMPORTANT NUMBERS OR INFORMATION

Police:	Dial 911 or	#:
Fire:	Dial 911 or	#:
Poison Control:		.#:
Doctor:		.#:
Doctor:		.#:
Pediatrician:		.#:
Dentist:		.#:
Hospital/Clinic:		.#:
Pharmacy:		.#:
Medical Insurance:		.#:
Policy #:		
Medical Insurance:		.#:
Policy #:		
Homeowner/Rental	Insurance:	
#:		
Policy #:		
Flood Insurance:		.#:
Policy #:		
Veterinarian:		.#:
Kennel:		.#:
Electric Company: .		.#:
Gas Company:		.#:
Water Company:		.#:
Alternate/Accessible	e Transporta	ation:
#:		
Other:		.#:
Other:		.#:
Other:		.#: