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YORK ADAMS COMMUNITY TENNIS ASSOCIATION

After School Care Program

**T**ENNIS AND **E**DUCATION, **A**FTERSCHOOL **M**OTIVATION

(**TEAM**)

**EMERGENCY OPERATIONS PLAN**

Revised March 2025

**PURPOSE**

The purpose of this plan is to provide for quick and effective actions to preserve life and reduce injuries whenever an emergency arises. Accidents at play, natural or man-made disasters and more can arise at any time and it’s imperative that the children and staff of YACTA’s TEAM be protected.

**SITUATION AND ASSUMPTIONS**

From 2:30 to 6 PM every day that K-8 is in session at South Western School district (SWSD), TEAM will be operating in the cafeteria of Emory H. Markle Middle School (EHMMS). For the first hour, until approximately 3:45 PM, EHMMS will be staffed as usual for a school day. After 3:45 PM, most students and staff are gone with the exception of extracurricular activities. TEAM cannot assume that normal staff, other than janitorial, is in the building after 3:45. In addition to the cafeteria, TEAM will utilize the tennis facility located just behind EHMMS, as well as the restrooms located just outside of the cafeteria. The cafeteria is a large open room and a main entrance which leads directly to the building’s main entrance in the front. Access to the cafeteria kitchens will not be available.

Children participating in TEAM will be in the cafeteria, in one of the restrooms across from the cafeteria, playing in the designated play area outside behind EHMMS, or in the tennis facility behind EHMMS. Staff should be with all children at all times. There is a plan for restroom breaks. The children will not visit the restrooms on their own.

TEAM will have a minimum of 2 adults present at all times, plus shall have an immediately accessible emergency kit. EHMMS has an Automatic Emergency Defibrillation (AED) kit available right outside the door to the cafeteria and YACTA has an AED right inside the door to the tennis center which are both within easy access for TEAM staff. TEAM staff members shall carry a cell phone at all times. Located in the emergency operations folder shall be a complete list of parent telephone numbers and emails, in the case that TEAM has to shut down operations early.

**RESPONSIBILITIES**

It is the responsibility of TEAM’s program Director or Group Supervisor to be familiar with all aspects of this plan, and to train personnel on it. In addition, the Director or Group Supervisor will ensure that the following items, comprising TEAM’s emergency kit, are immediately available to TEAM staff at all times:

- A TEAM first aid kit

- A working cell phone

- A device capable of bringing up the Internet

- Checklists for emergencies

- TEAM parent telephone numbers and email addresses

- TEAM participant attendance list

TEAM staff members shall also be familiar with this plan and its checklists and capable of enacting any portion thereof without the presence of the Director if the need arises. YACTA’s executive board shall review this plan annually and certify that it is comprehensive and complete. In addition, YACTA shall share this plan with EHMMS officials and others of SWSD.

TEAM personnel shall be prepared to follow all checklists as written. The overriding concern is the safety of TEAM participants, and of the staff.

**DISASTERS COVERED**

The following are the emergencies which may arise while TEAM is in operation. These will each be covered by a separate checklist.

Medical Emergency

Injury

Death

Lockdown

Shelter in place

Bomb Threat

Severe Weather

Tornado

Snow/Ice

Evacuation

Fire

Flooding in School

Note that each checklist is designed to be done in a certain order. In the excitement of handling an emergency, the sequence of things can be very important. As each step of the checklist is completed, mark the “TIME COMPLETED” column with either the time it is done, or an “N/A” for “not applicable.” This information will help to keep everyone appraised as to what has been accomplished and when, and will be invaluable afterward in the accomplishment of the Incident Report and other documents.

The TEAM director or Group Supervisor in charge will take the lead in handling any emergency. Staff members will assist to the point of suspending normal activities for TEAM children if the situation warrants it. Staff members must ensure they are available to the director at all times in order to assist in handling any emergencies, and do whatever is instructed as quickly as is practical.

Some responses call for the TEAM program to be relocated to a designated area. In the event of a tornado or intruder the large storage closet in the hallway around to the left of the cafeteria (when facing the cafeteria from outside) will be used if it is safe to move children to that location. If needing to stay inside the cafeteria the children and staff will be seated against the wall on the floor in the very right corner where the sinks are located. This is the least visible area from any windows. The close proximity designated area shall be under the awning in front of the high school’s main entrance (Location 1). If needing to be inside a structure the second close proximity area will be the YACTA Indoor Tennis and Pickleball facility(Location 2). If needing to be a distance greater than one half mile the designated area shall be Baresville elementary school(Location 3) and the method of transportation to the school will be on foot. When necessary, ensure the group moves together and quickly. The evacuation routes and plans will follow the South Western School district guidelines and emergency responder guidelines, see exhibit A.

As is indicated on the checklists, some emergencies may cause EHMMS to be unavailable. Should this happen, YACTA TEAM after care will close and discontinue service to clients until appropriate repairs can be made and operations can resume. Some of the actions require notifying SWSD. The numbers are on all checklists. The TEAM Director, or person in charge, shall determine whom to notify and proceed accordingly.

**MEDICAL EMERGENCY CHECKLIST**

Use this checklist when you either see a medical emergency arise, or come upon someone who appears to be suffering in some manner.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| Ensure the area around the person is safe for your approach. |  |
| Notify another TEAM staff member, and ask them to call 911, if warranted. |  |
| Keep children in a different area of the cafeteria. If occurrence is in the tennis facility, return to EHMMS with the children. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions. |  |
| Tap him/her and call out to them to see if responsive. |  |
| If yes, ask them to describe what is wrong. |  |
| If the person is non-responsive, check for breathing. |  |
| If no breathing is detected, start CPR and ask for an AED to be brought. |  |
| If the person is breathing, but non-responsive, check emergency health form to see if a condition exists, such as diabetes, and try to ascertain if this is it. Treat accordingly. |  |
| Treat anything that is obvious, like a cut or other injury. |  |
| Ensure someone stays with individual and continues treatment as appropriate. |  |
| When emergency personnel arrive, let them take over, and be ready to detail all that has been done to that point. |  |
| CALMLY notify parents each by cell phone using emergency contact form, and let them know their child needs to be picked up as soon as possible or is on the way to the hospital if they are the injured party. |  |
| Once the emergency is over, reassure remaining children, repeating as necessary. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |
|  |  |

Emergency contact numbers for SWSD after hours:

Head Custodian - Mike Weaver 717 451-3022

Maintenance Supervisor - Barry Lauchman 717 698-5650

Director of Facilities - Nate Osborne 717 353-0908

**INJURY CHECKLIST**

Use this checklist when someone gets injured. Unless vital to do so, avoid moving anyone who has been injured.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| Ensure the area around the person is safe for your approach. |  |
| Notify another TEAM staff member, and ask them to call 911, if warranted. |  |
| Keep children in a different area of the cafeteria or tennis facility. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions. |  |
| Tap him/her and call out to them to see if responsive. |  |
| If yes, ask them to describe what is wrong. |  |
| If the person is non-responsive, check for breathing. |  |
| If no breathing is detected, start CPR and get an AED. |  |
| Treat anything that is obvious, like a cut or other injury. |  |
| Ensure someone stays with individual and continues treatment as appropriate. |  |
| Be aware of the possibility of shock, and attempt to keep the person as warm as practical. |  |
| When emergency personnel arrive, let them take over, and be ready to detail all that has been done to that point. |  |
| CALMLY notify parents if necessary by cell phone using emergency contact form, that their child needs to be picked up as soon as possible or is on the way to the hospital if they are the injured party. |  |
| Once the emergency is over, reassure remaining children, repeating as necessary. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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**DEATH CHECKLIST**

Use this checklist when you become aware that someone has died. Attempt to remain calm, and don’t let the kids see you react.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| Ensure the area around the person is safe for your approach. |  |
| Notify another TEAM staff member, and ask them to call 911, if warranted. |  |
| Keep children away in different area of the cafeteria or tennis facility. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions. |  |
| If possible, cover the person as much as possible. Avoid disturbing anything in the area. |  |
| Ask emergency responders to notify parents or next of kin. |  |
| Once the emergency is over, reassure remaining children, repeating as necessary. |  |
| Notify parents by cell phone using emergency contact form that TEAM is closing early, and shut down operations as soon as practical to do so. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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**LOCKDOWN CHECKLIST**

Use this checklist when required to do a lockdown due to an intruder is either in the school or on EHMMS premises or other reason. Stay with the children at all times and NEVER attempt to be a hero. Wait on trained responders.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| All children and staff must return to the cafeteria immediately. |  |
| Lock doors into both sides of the cafeteria, and turn off all lights. |  |
| Notify 911. |  |
| Take children to wall to the right of the main exit if one is in looking out, and line them up as flat as possible along that corner. Emphasize that they must stay as still and quiet as possible. |  |
| Take attendance and account for everyone, children and staff. |  |
| Attempt to reach missing staff by cell phone – quietly. |  |
| Look for missing children within confines of the cafeteria but try not to be seen from outside. |  |
| If cafeteria is the location of the issue have children crouch in large storage closet or remain in the tennis facility. |  |
| Keep children QUIET, calm and out of sight from doors or windows. |  |
| Ensure accommodations for all children with disabilities and chronic medical conditions |  |
| When emergency responders arrive, WAIT until they let you know the area is safe before bringing children out of hiding and resuming operations. |  |
| Once the emergency is over, reassure children, repeating as necessary and begin cell phone calls to parents letting them know of pick up location for their child based on the emergency responder’s direction as to location. The new location would be arrived at on foot or walked to. |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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Director of Facilities - Nate Osborne 717 353-0908

Off site evacuation location 1- Wes Winters, South Western High School – 717-521-6880

Off site evacuation location 2 – Tennis Bubble 717-797-5891

Off site evacuation location 3 – one mile away Eric Klansek, Baresville Elementary School 717-688-5314

**SHELTER IN PLACE CHECKLIST**

Use this checklist any time a shelter in place in required. Stay with the children keep the children safe and calm at all times. Wait on trained responders.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| All children and staff must return to the cafeteria immediately. |  |
| If shelter in place is due to a natural disaster and you need to be away from windows walk children calmly and quietly to storage closed to left of cafeteria. |  |
| Notify 911. |  |
| Be very patient and calm with the children. |  |
| Ensure accommodations for all children with disabilities and chronic medical conditions |  |
| When emergency responders arrive, WAIT until they let you know the area is safe before bringing children out and resuming operations. |  |
| If emergency responders recommend evacuation walk on foot to the indicated location 1, 2 or 3. |  |
| Once the emergency is over, reassure children, repeating as necessary.  Begin to notify parents by cell phone using emergency contact form.  Offer access to school counselors and other trained professionals to assist the children in the longer term. |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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Off site evacuation location 2 – 717-797-5891

Off site evacuation location 3 – one mile away Eric Klansek, Baresville Elementary School 717-688-5314

**BOMB THREAT CHECKLIST**

Use this checklist when you receive any type of bomb threat or are notified of a threat in the building by school personnel. Take each one seriously. Much of the checklist deals with keeping a bomb threat caller on the line. This is so the call can be traced if you can keep the line open. Stay with the children at all times and NEVER attempt to be a hero. Wait on trained responders.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| Assuming the threat is phoned in, get another staff member’s attention immediately. |  |
| Without the caller being aware you’re doing it, let the staff member know the situation, and tell them to call 911. |  |
| Should school personnel notify you of a bomb threat move toward evacuation procedures listed |  |
| Evacuate children and staff to the designated area (1st the High School, if needed to be more than one mile to Baresville Elementary). Ensure TEAM’s emergency kit goes with you. |  |
| Ensure accommodations for all children with disabilities and chronic medical conditions |  |
| If taking the call yourself take note of anything which can help identify the caller: background noises, accent, key phrases, etc. |  |
| Ask questions: where is the bomb, what kind is it, when will it go off, how can it be deactivated, did you make it, where did you get it, why did you get one, etc. |  |
| Obey whatever responders tell you to do, evacuating to location 1, 2 or 3. |  |
| If given the all clear by trained responders, then resume operations. |  |
| Once safely at new location begin to notify by cell phone using emergency contact form, all parents of the relocation and where they need to pick up their children. |  |
| Once the emergency is over, reassure children, repeating as necessary |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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**SEVERE WEATHER CHECKLIST**

Use this checklist when you become aware that severe weather approaches, especially if a warning is issued vice a storm watch.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| All children and staff must return to the cafeteria immediately. |  |
| Take attendance and ensure you know where everyone is. |  |
| If time permits and it is warranted, relocate all children to the storage closet, if not shut all doors of the cafeteria. |  |
| Ensure windows are covered if possible and necessary. |  |
| Move children away from windows. |  |
| Get out flashlights. Ideally, there is one for every staff member. |  |
| Monitor weather warnings and information. |  |
| Keep children occupied with other activities. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions |  |
| If the storm occurs during pickup time, ask parents to be patient and wait out the storm. |  |
| Once the emergency is over, reassure children, repeating as necessary. |  |
| If needed to dismiss early begin to notify all parents by cell phone using the emergency contact form. |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
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**TORNADO CHECKLIST**

Use this checklist when you become aware that a tornado approaches. NEVER go outside to check. If a tornado is close, you will hear it. It sounds like a huge powerful freight train where no freight train should be.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| All children and staff must return to the cafeteria immediately. |  |
| Take attendance and ensure you know where everyone is. |  |
| Take children into storage closet with TEAM emergency kit. |  |
| Wait out the storm. |  |
| If it feels like a direct hit, have kids kneel on floor face down and cover head and neck with hands. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions |  |
| Once storm has passed, check outside the storage closet to assess damage in immediate area. |  |
| If possible, return to the cafeteria and resume normal operations. |  |
| If not possible, notify 911 as well as school emergency number. |  |
| Begin to call parents by cell phone using emergency contact form and informing them of any special pickup instructions. |  |
| Once the emergency is over, reassure children, repeating as necessary. |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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**SNOW/ICE CHECKLIST**

Use this checklist when you believe that heavy snow or ice is imminent.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| Ensure no one is outside, especially on play area. |  |
| Notify parents by cell phone using emergency contact form, that TEAM is ceasing operations early and that we operate on the school districts snow policy so that should weather indicate additional closure, our program will also be closed. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions |  |
| Walk each child by the hand to their parent’s car. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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**TOTAL EVACUATION CHECKLIST**

Use this checklist when evacuation is called for such as a gas leak. Even if you are mistaken, it’s good to have it checked out. Note that you don’t place a phone call until you relocate. This is to prevent a cell phone from igniting gas if it is in the area.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| All children and staff must return to the cafeteria immediately. |  |
| Take attendance and account for everyone, children and staff. |  |
| Have children gather belongings and get TEAM’s emergency kit. |  |
| Ensure lights are turned off. Do NOT use any electronics at this time. |  |
| Evacuate to the area designated by emergency responders or school officials, or use location 1, 2 or 3. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions. |  |
| Notify 911 and the school’s emergency number of the problem. |  |
| Wait for responders, and don’t attempt to reenter the building. |  |
| If given the all clear, reenter the cafeteria and resume normal operations. |  |
| Begin to call parents by cell phone using emergency contact form, with instructions for safe pick up of their children. |  |
| Once the emergency is over, reassure children repeatedly if necessary. |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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Off site evacuation location 2 – 717-797-5891

Off site evacuation location 3 – one mile away Eric Klansek, Baresville Elementary School 717-688-5314

**FIRE CHECKLIST**

Use this checklist when you become aware of fire or hear the fire alarm. TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| Take attendance and account for everyone, children and staff. Grab TEAM emergency kit. |  |
| Gather everyone together immediately and leave building via front door of the cafeteria or using the fire evacuation plan, exhibit A. |  |
| If you cannot leave via the cafeteria’s front door, then go out one of the rear doors, left to the first exit to the outside, on your right., Crawl if there is a lot of smoke. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions. |  |
| Ensure lights are turned off. Do NOT use any electronics at this time. |  |
| Evacuate to the area designated by emergency responders, location 1, 2 or 3. |  |
| Notify 911 and the school’s emergency number of the problem. |  |
| If given the all clear, reenter the cafeteria and resume normal operations. |  |
| If the building isn’t deemed safe, notify parents by cell phone using emergency contact form, to come and get their kids. |  |
| Once the emergency is over, reassure children, repeatedly if necessary. |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
| Fill out Incident report using this checklist to detail what took place and when and in what order. |  |

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**FLOODING IN SCHOOL CHECKLIST**

Use this checklist when there is water on the floor in the cafeteria’s section of the building.

TIME

ACTION COMPLETED

|  |  |
| --- | --- |
| All children and staff must return to the cafeteria immediately. |  |
| Take attendance and account for everyone, children and staff. |  |
| Notify the school’s emergency number of the problem. |  |
| Attempt to locate the source of the water and ascertain if you can safely stay in the cafeteria. |  |
| If not, have children gather belongings and get TEAM’s emergency kit. |  |
| Ensure accommodations for children with disabilities and chronic medical conditions. |  |
| Ensure lights are turned off. |  |
| Evacuate to designated area. |  |
| Wait for responders, and don’t attempt to reenter the building. |  |
| If given the all clear, reenter the cafeteria and resume normal operations. |  |
| If the building isn’t deemed safe, notify parents by cell phone using emergency contact form, to come and get their children. |  |
| Once the emergency is over, reassure children, repeating as necessary. |  |
| In event the program is unable to operate in the school building, services will be discontinued until repairs can be made. |  |
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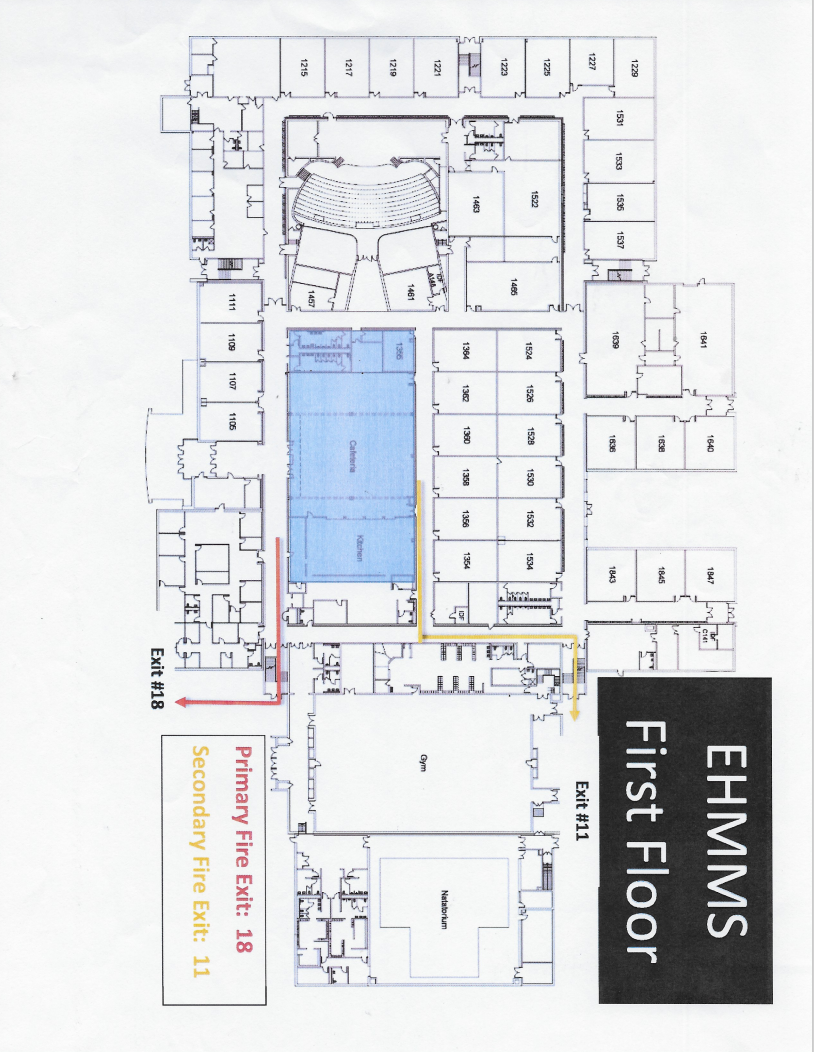


Exhibit A