Dear Caregiver:

This Developmental Disability Safety kit is from the Indiana University School of Medicine Safety Store and developed with a grant from Helping Challenged Children, Inc. Children with developmental disabilities may have a tendency to wander (sometimes called elopement) and lack the ability to see danger. This safety kit will help you start a safety plan for your child. This is not meant to be everything you need to know to plan for your child’s safety, but it will give you tools and steps that you can take now to help protect your child.

There are Several Types of Wandering:

- **Goal-directed wandering:** wandering to get to something (water, train tracks, park, school, or an item or place they like, etc.)
- **Bolting/Fleeing:** the act of suddenly running or leaving to quickly get away from something; this may be caused by fear, excitement, stress, or something that makes them uncomfortable
- **Other:** nighttime wandering, wandering due to boredom, confusion or a new setting, or child gets lost

Your Developmental Disabilities Safety Kit includes the following:

- Stop signs to place on doors and windows inside the home
- 2 window/door alarms
- Shoe ID tags
- Temporary ID tattoos
- Wandering Emergency Plan
- Safety Checklist
- Alert for a Missing Child with developmental disabilities form
- Teacher / Caregiver Letter
- List of Resources
- Safe Escape Family Emergency Evacuation Planning booklet

It is, of course, important that you always keep close watch of your child no matter what tools you may have in place. We hope you will find this Safety Kit a good starting point. The IUSM Safety Store also provides free safety education information on many accident prevention topics. You will find us at safetystore.iu.edu. On our website, you can also order additional safety products from our online store.

Sincerely,

The Safety Store
The Indiana University School of Medicine
How to use the items in this kit:

**Mini Alarm Window** – this alarm can be use on windows AND doors or cabinets. Batteries are included. Follow the directions included to install and check the batteries frequently.

**Kid’s Shoe ID Kit** – these attach to your child’s shoes to provide identification for your child. Follow the directions included.

**Lost & Found Temporary Tattoos** – These are good to use when you take your child to a public or crowded place. Follow directions on the back of the package. There are 6 in a package.

**Important Information for Caregivers** – This is a magnet that attaches to your refrigerator or a magnetic bulletin board. Use the dry erase marker to fill in emergency contact information for your child’s caregivers.

**Stop Signs** – these act as a reminder to your child to stop before going out a door or window. Place on exterior doors or windows.

Please call us at 1-888-365-2022 if you have any questions about how to use any of the products or materials in this kit.

The Safety Store sells over 150 safety products at the lowest possible cost. Additional window and door alarms, shoe tags, and temporary tattoos and other safety items can be purchased in our store at Riley Hospital for Children or online at [https://safetystore.iu.edu/](https://safetystore.iu.edu/)
☐ Wandering SAFETY CHECKLIST

☐ I have placed locks and alarms on the doors and windows in my home and put the STOP signs included in this kit on doors and windows to remind my child to stop before leaving the house.

☐ I have identified reasons why my child wanders and am teaching them about the dangers of wandering.

☐ I have signed my child up for swimming lessons.

☐ I have talked to my trusted neighbors about my child’s wandering behaviors and how to contact me in case of an emergency.

☐ I have let my local fire department and police department know about my child’s wandering behaviors and any nearby water so they have that information in their files.

☐ My child has an ID on them at all times (shoe tags or medical ID) that contains my contact information.

☐ I have filled out the Wandering Emergency Plan included in this kit and I have completed the Alert for Missing Child with Developmental Disabilities form.

☐ I have read the Safe Escape Family Emergency Evacuation Planning booklet included in this kit.

☐ I will remember to stay on high alert if my child is placed in a new environment, such as a move to a new home, visits to someone else’s home, trips to public places, a new school room, etc.

☐ I have let the people at my child’s school, camp and other settings know about my child’s potential for wandering and provided them with information on what to do if my child is missing.

☐ I will write down the details of any wandering events (time, day, place, situation) so I can better understand what causes them and discuss this information with my child’s doctor to help prevent these in the future.
Wandering Emergency Plan

It is important to make a plan so you are immediately ready if your child is missing. Your plan needs to include:

1. An up-to-date **Alert for Missing Child with Developmental Disabilities form** to be given to people trying to locate your child. **MAKE MULTIPLE COPIES OF THIS** and keep it in several places where you can get to it easily. Mark your calendar to update it at least twice a year.

2. Keep recent pictures of your child that can be texted, printed or copied. You should have both a close up picture of their face and a full body shot that shows their height and any identifying features.

3. Get a commitment from at least 5 people who can be available to immediately begin searching for your child in the event of an emergency. List their phone numbers and make sure they have your phone number.

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4. Designate an emergency **Key Person** who can contact neighbors, send your alert form to the Police and Fire Department, send photos of your child and help make arrangements for the care of your other children. Make sure this person has a cell phone and has a copy of your up-to-date **Alert for Missing Child with Developmental Disabilities form**. It is best if this is a relative or close friend who can be available immediately in the event of an emergency.

What To Do If Your Child is Missing

1. **Call 911 immediately and tell them:**
   - Your child with developmental disabilities is missing
   - Your name, relationship to the child, contact phone number and your location
   - The time you first noticed your child missing
   - What your child was wearing
   - Give them all the information on your **Alert for Missing Child with Developmental Disabilities form**
   - If your child is attracted to water, IMMEDIATELY ask them to check nearby water sources such as lakes, ponds, pools, etc.

2. Request an AMBER Alert be issued or an Endangered Missing Advisory.

3. Contact the person you have designated as your emergency **Key Person** and ask them to contact friends to help search and to make arrangements for the care of any of your other children while you search.

4. Write down any instructions the 911 operator tells you. Do not hang up until they say it is OK to do so.
Alert for Missing Child with Developmental Disabilities Form

Child’s name: ________________________________________________________________

Address:  street, city, state, zip code_______________________________________________________________

Birth date: ____________________________________________ Current age: _____________________

Gender: _____________________________________________________________________________

Height: _______________________________________________ Weight: ________________________

Hair color: _____________________________________________ Eye Color: _____________________

Some things that might help identify my child: (For example: birthmarks, teeth have braces, wears glasses, always wears a baseball hat, has an ID bracelet, wears a leg brace, has freckles, etc.)

______________________________________________________________________________________________________________________

______________________________________________________________________________________________________________________

Behaviors that might help identify my child: (For example, hand flapping, failure to give eye contact, repetitive movements, etc.)

____________________________________________________________________________

Tracker Transmitter (if child has one)  Brand: _____________________ Transmitter number: ______________

Medical conditions: ____________________________________________________________________

____________________________________________________________________________________

Current Medications: ___________________________________________________________________

____________________________________________________________________________________

About My Child

Communication: (example, uses sign language, is non-verbal, do not expect an immediate reaction, etc.)

Best way to approach my child: (example: do not touch him/her – talk to them about their favorite subject)

Likes to talk about: ______________________________________________________________________

Is attracted to: _________________________________________________________________________

Dislikes: (example: sudden changes, talking about them like they are not there, etc.)

____________________________________________________________________________________

Parent/Guardian/Caregiver Information

Name: ________________________________________________________________________

Address: ______________________________________________________________________

Phone – IMPORTANT: Include area codes  Cell  Home  Work

Emergency Contacts (include area codes):

Name: ____________________________________________ Phone:________________

Name: ____________________________________________ Phone:________________

Name: ____________________________________________ Phone:________________
Teacher / Caregiver Letter

The following letter is an example of a letter to give to your child’s teacher or caregiver to let them know more about your child if they tend to wander. This information will help them keep your child safe. The underlined areas are for you to fill in. Be sure to give the teacher/caregiver a copy of your completed Alert for a Missing Child with Developmental Disabilities form along with this letter.

(Today’s Date)

Dear ___________________________:  
(Teacher Name)

(Your child’s name) has a history of wandering and fleeing and requires close supervision. I hope this letter will provide you with information that can help prevent this from happening and also help you develop a plan in case they do wander.

My child is attracted to the following areas, items, attractions, or locations:
(List these, such as -- areas of water; items – such as toilets, fire hydrants, TVs; playgrounds; buildings- such as houses, stores)

Things that may cause my child to wander or flee are:
(List these, some examples are – loud noises, sudden changes in routine, being approached by new people without warning, moving from one work space to another, being distracted, etc.)

Behaviors that you may notice before my child wanders or flees may include:
(List these, some examples are -- becoming restless such as: constantly looking around, jumping or increasing in repeated behaviors; or things like physical aggression to people nearby, leaving their seat or area, pushing materials away from their area)

If my child leaves the building and is in an unknown location, please call 911 immediately. I have included a copy of our Alert for a Missing Child with Developmental Disabilities form that can be provided to police, firefighters or emergency personnel.

If my child wanders within the building, please document this by writing down the specifics of what happened and giving me that information. Please include when it happened, who they were with, and what may have caused them to wander. This will help us better understand what may cause the wandering so we can prevent it in the future.

Also, please take a moment to review some things that can help prevent my child from wandering. These include things like simple, clear instructions to my child, physical barriers such as closed doors, furniture or fences, and constant supervision. Please also make sure that anyone who works with my child is aware that they may wander and is trained on what to do to find them. They should also be trained in what to do when they find a child with developmental disabilities, for instance, how to talk to them to calm them down.

I very much appreciate your help with this! My child’s safety is my first concern and I know it is yours too. I would be glad to meet with you to give you more information to help set up safety measures and plans.

Sincerely,

_________________________________________  ____________________________________  ______________________
(Sign here)                                             (Print your name)                               Your cell number
Or contact number with
Area code
RESOURCES

Indiana Resources
- About Special Kids (ASK)  www.aboutspecialkids.org
- Family Voices Indiana  www.fvindiana.org
- Insource  www.insource.org
- First Steps  www.indianafirststeps.org

Autism Information
- Autism Society of Indiana  http://www.autismsocietyofindiana.org/home/4583901187
- National Autism Association  http://nationalautismassociation.org/
- Autism Wandering Awareness Alerts Response and Education (AWAARE)  http://awaare.nationalautismassociation.org/

Swimming Lessons
- Find Your Y – locate your local YMCA to ask about Special Needs Swim Lessons  http://www.ymca.net/find-your-y/

Child Safety Products
- The Safety Store at Riley Hospital for Children safetystore.iu.edu
  The Safety Store carries over 150 quality safety products a low cost.

Tracking Devices
- Project Life Saver  http://www.projectlifesaver.org/
  The Autism Society of Indiana works with families to help with fundraising for those who cannot afford the equipment  http://www.autismsocietyofindiana.org/project-lifesaver/4583901210
- If I Need Help  https://www.ifineedhelp.org/  Emergency information that can be accessed by entering a number code into website or by scanning a unique QR (Quick Response) code with your smart phone. Available in patches, shoe tags, ID Cards, window clings, bumper stickers, dog tags, pins, clips & more.

First Responders
- Indiana Institute on Disability and Community - Preparation for Emergencies  http://www.iidc.indiana.edu/?pageld=513

All materials in this safety Kit are provided for your information only and do not constitute medical advice or an endorsement of any clinical or therapeutic method, treatment, service, safety device, safety product, organization or vendor. The National Autism Association and the IUSM Safety Store are not responsible for the content produced by or the services rendered by any third party that is referenced via this kit. BE SURE TO CONSULT WITH YOUR CHILD’S HEALTH CARE PROVIDERS CONCERNING THE USE OF THIS SAFETY KIT.