

Checklist for Integrating People with Disabilities and Others with Access and Functional Needs into Emergency Preparedness, Planning, Response & Recovery

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How to Use This Checklist

When it comes to including people with disabilities and others with access and functional needs in emergency plans, strategic plans are rarely enough. Non-specific language and broad planning steps carries a substantial risk of discriminatory response and failure. It is the detail, the who, what, where, when, why, and how embedded in the tactical plans that make the difference. These details should also be incorporated into that standard operating procedures of departments and agencies, job aids, checklists, field operation guides, and training.

This checklist is for emergency planners, managers, responders, and public information officers (PIOs) who have responsibility for developing, maintaining, testing, delivering and revising emergency plans and services. Use it to help:

- Evaluate current capacity of critical elements that integrate people with disabilities and others with access and functional needs into emergency planning, response, and recovery.
 - Identify areas needing attention
 - Set priorities
 - Assess progress
- Develop inclusive emergency plans, policies, processes, protocols, training, job aids/checklists, standard operating procedures and exercise programs.
- Periodically evaluate progress and identify elements that have been implemented, and areas that continue to need attention.

NOTE: This checklist was first posted in 2011. It is an open work in progress designed to evolve based on new learning, continuous feedback, as new methods and tools become available. You are encouraged to refine its content and provide the author (at jik@pacbell.net) with feedback. What works, doesn't work, or needs work?

ACRONYMS

ADA – Americans with Disabilities Act
ARC - American Red Cross
CART - Computer Assisted Real Time Transcription
CERT – Citizen Emergency Response Team
CMS-- Consumable Medical Supplies
DME-- Durable Medical Equipment
EOC -- Emergency Operations Center
FAST- Functional Assessment Service Team
FCC - Federal Communications Commission
FEMA - Federal Emergency Management Agency
LTCF- Long Term Care Facility
MAA - Mutual Aid Agreement
MOU - Memorandum of Understanding
PAS - Personal Assistance Services
SOPs – Standard Operating Procedures
TTY – Teletypewriter
VOADs – Volunteer Organizations Active in Disasters
VRI - Videophone Remote Interpreting

DEFINITIONS

Americans with Disabilities Act (ADA) Signed into law July 26, 1990, a civil rights legislation intended to make American society more accessible to people with disabilities. It contains five titles: Employment, Public Service, Public Accommodations, Telecommunications, and Miscellaneous, which includes prohibitions on threats, coercion, retaliation, etc., against people with disabilities.

Computer assisted real time transcription services (CART) a system in which a stenographer or court reporter using a stenograph machine transfers the words of a speaker by means of a computer to printed words on a screen. This system is commonly used by people who are hard of hearing and does not use sign language. Usually they are people who acquired their hearing loss later in life.

Community Emergency Response Team (CERT) Program educates people about disaster preparedness for hazards that may affect their area and trains them in basic disaster response skills, such as fire safety, light search and rescue, team organization, and disaster medical operations. Using the training learned in the classroom and during training exercises, members can assist others in their neighborhood or workplace following an event when professional responders are not immediately available to help. Members also are encouraged to support emergency response agencies by taking a more active role in emergency preparedness projects in their community.

Community partners involves engagement with and leveraging organizations that have routine, direct ties to local communities such as: schools, ethnic centers, civic, social and fraternal, neighborhood associations, community-based and faith-based organizations, private industry, trade associations, and businesses. These are the organizations that provide many supports and services in their communities. These organizations should continue to be a provider of such services during and/or a following a disaster. Whole community planning is a community-oriented approach to emergency planning, response, and recovery that acknowledges a government-centric approach to disaster management will not be enough to meet the challenges of a catastrophic incident.

Local collective action “of and by” as well as “for and about” individuals who live in local areas, becomes the leading edge protection. It is all about “doing better together” through effectiveness, efficiencies, utilizing promising experiences and practices, networking, building, and strengthening and maintaining relationships that foster sustained inclusion, partnerships, collaboration, connections, communication, coordination, and cooperation with the whole community (regardless of age, background, demographics, economics, abilities, or functional need).

Consumable Medical Supplies (CMS) includes, but is not limited to, catheters, ostomy supplies, gloves, bandages, and padding. These supplies are usually disposable and used by one person.

Durable Medical Equipment (DME) includes, but is not limited to, wheelchairs (multiple types), canes, white canes, walkers, shower chairs, toilet chairs, raised toilet seats, oxygen equipment, nebulizer tubing and machines, and speech generating devices.

Functional Assessment Service Teams (FAST) Trained nongovernmental organizations (NGOs) and government workers ready to respond to and deploy to disaster areas to work in shelters, temporary housing (such as hotels), and other disaster recovery centers. Team members have in depth knowledge of the populations they serve, their cultures, and support service systems including housing, resources, benefit programs, and disaster aid programs.

Functional Needs Populations (formerly Special Needs Population) Populations whose members may have additional needs before, during, and after an incident in functional areas, including but not limited to: maintaining independence, communication, transportation, safety, support, and health care. Individuals in need of additional response assistance may include those who have disabilities; who live in the community or long term care facilities; who are elderly; who are children; who are from diverse cultures; who have limited English proficiency or are non-English speaking; or who are transportation disadvantaged.

Integrated Public Alert & Warning System (IPAWS) is an alert system that was designed so that the President could deliver a message to the American people. Messages include presidential alerts, imminent threat alerts and amber alerts utilizing geographic targeting. The alerts are delivered directly from cell tower to cell phone through a one way broadcast.

Life-safety-wellness checks are conducted, which may include door to door, for those stranded in home, on their own, not needing life-saving search and rescue, but needing power, food, medications, supplies, transportation for health care, etc. This might include the National Guard, public health workers, CERTs, nongovernmental organizations (who can realistically commit to assisting in visits/searches), and mail carriers. Life-safety checks should evaluate needs and provide assistance in obtaining essential items, and not just medical needs. This would include water, food, medical, medications, supplies, equipment, power (batteries, etc.), waste disposal, home health, and personal assistant services. These visits may also result in evacuation and transportation if warranted. This transportation might be round-trip short-term (i.e. to facilitate trips to life-sustaining treatments such as dialysis, chemotherapy and other infusion therapies, or accessible warming or cooling centers) or for a longer stay at shelter.

Long Term Care Facilities includes licensed care facilities, congregate facilities, residential facilities, nursing homes, group homes, assisted living facilities, group homes, intermediate care facilities and incarceration facilities.

Non-Traditional Shelter a location, generally in a large structure or open space shelter, where a significantly large number of people can take refuge and be sheltered for short or long periods of time. These locations require an expanded amount and diversity of internal infrastructure and support services which may include infrastructure operations such as logistics, utilities, security, and traffic control and services such as laundry, medical care, and recovery support.

Personal Assistant Services (also referred to as PAS, personal attendant services, personal care services or attendant care services) are people who assist those with a physical, hearing, seeing, speaking, mental, or learning disability. This includes a range of activities of Daily Living Activities (feeding, dressing, toileting, transferring, dressing, etc.)

These services can be provided to people of all ages. They are generally classified into two categories: (1) Informal (unpaid) services provided by family members, friends, and neighbors, and (2) formal services paid either directly out-of-pocket, by public payers, private insurance, or other sources.

People with disabilities are a protected class; protected from discrimination as defined by federal civil rights laws such as ADA and other state civil rights protections that detail the right to equal participation to enjoy and use services. Civil rights definitions protect a broad group of people who meet specific criteria for participation in the class.

People with disabilities and other access and functional needs is used in this document with the intent to include the broadest group of people who benefit from physical, communication, and program access. This includes people who have functional needs who may or may not meet the definitions of civil rights laws or some of the other 60 plus diverse and sometimes conflicting definitions of disability. By accommodating the needs of “people with disabilities” a much larger portion, estimated to be up to 50%) of the population benefits (people of ALL ages with vision and hearing loss, physical disabilities, mental health disabilities, developmental, intellectual and other cognitive disabilities, behavioral health issues, people with learning, understanding, remembering, reading, and speaking and mobility limitations, and people from diverse cultures; who have limited English proficiency or are non-English speaking; and who are transportation disadvantaged).

Videophone Remote Interpreting (VRI) is an interactive video teleconferencing system. VRI uses a sign language interpreter at a call center to interpret between sign language users and non-sign language users through video-conferencing equipment. This differs from Video Relay Service (VRS) in that the hearing and deaf parties can be present in the same room. Additionally, VRI is not regulated or reimbursable by the Federal Communications Commission and costs are incurred by the party hiring the VRI service.

Evaluation Key

S = SUFFICIENT

- completely addressed
- formal mechanisms

PS = PARTIALLY SUFFICIENT

- partially addressed
- informally addressed
- under development
- being updated

NS = NOT SUFFICIENT

- not addressed
- may be addressed in other policies and procedures, but there is no evidence that this element is addressed

PP = PROMISING PRACTICE

- potential good practices or models they may benefit other jurisdictions

?= UNSURE

- Need to find out

NA = NOT APPLICABLE

- Does not apply

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Access and Functional Needs Position or Responsibility							
1. Designate an Access and Functional Needs position or responsibility that reports directly to the Emergency Management Director/Commissioner							
2. Responsibilities:							
3. Has the authority, responsibility, and resources to integrate the diverse needs of people with disabilities and others with access and functional needs in all phases of emergency management (preparedness, planning, response, recovery, and mitigation processes)							
4. Serve in a permanent position in Emergency Operations Center (EOC) as a technical specialist available to advise <u>The entire EOC</u> (versus limited to one emergency support function (ESF) focus, individual sections, group, or unit) this includes training for 3-deep back-up of this position							
4.1 Training for 3-deep back-up of this position (recommended)							
5. Serves as the jurisdiction-wide point of contact and coordinator for access and functional needs integration							
6. Request that each department/agency has a designated coordinator for access and functional needs integration to coordinate to facilitate planning, revisions, training, response, etc.							
7. Participates in planning teams that include impacting, developing, training, implementing, testing, monitoring, and revising processes, procedures, protocols, policies and training which affects planning, sheltering, communications, transportation and evacuation and recovery							
8. Serves as the liaison to government programs (outside of the jurisdiction i.e. cities within a county), and community partners supporting people with disabilities, and others with							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
access and functional needs							
9. Coordinates with the Joint Information Center so information is accessible							
10. Incorporate a “functional needs” framework for an effective, accurate, and flexible approach to integrating access and functional needs into emergency planning, response, and recovery. *See Reference: Moving Beyond Special Needs: A Function Based Framework for Emergency Management and Planning							
11. Institute a message review process that includes specific steps for content review for inclusion and appropriateness for people with disabilities and others with access and functional needs							
11.1. Designate knowledgeable people (3-deep) for this message review/approval process							
12. Work collaboratively with jurisdiction’s departments and agencies to develop and integrate access and functional needs content for:							
12.1. Emergency plans, annexes, appendices							
12.2. Standard operating procedures							
12.3. Job aids and checklists							
12.4. Trainings							
12.5. Just in Time Trainings							
12.6. Drills, exercises, table tops							
12.7. Situation reports							
12.8. Hot washes and after action reports							
12.9. Agreements, Contracts, MOUs							
12.10. Emergency preparedness materials							
12.11. Areas to cover, include but are not limited to:							
12.11.1. Evaluating physical access							
12.11.2. Evacuation and transportation							
12.11.3. Mass care							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Community Partners / Public Engagement / Service Force Multipliers *See Reference: Whole Community Planning - Effectively Including People with Disabilities in Policy and Advisory Groups							
1. Involve qualified representatives from disability communities “of and by” as well as “for and about,” in the development, review, practice, and update process (advocates, disability and older adults’ service organizations, and local government service programs). *See Reference: Whole Community Planning - Effectively Including People with Disabilities in Policy and Advisory Groups							
2. Methods are used to coordinate, expand, deepen, strengthen, maximize, and sustain community partners – talents, skills, communications, connections, and capacities that maximize access to resources and leverage the development of additional resources							
2.1.1. Network building fosters communication, coordination, cooperation and collaboration with and among disability communities’ advocates, service organizations, and emergency managers through utilizing: expertise, skill sets, capabilities, resources, collaborative management, and response and reimbursement agreements, example where applicable, define and detail FAST expectations, accountability, response, request procedures, and reimbursement. *See Reference: Functional Assessment Service Teams							
3. Options for involvement of community organizations:							
3.1. Agreements / MOUs are in place that detail responsibilities							
3.2. Providing ‘Just in Time’ supplies of usable assistive technology or Durable Medical Equipment, such as							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
mobility devices or communication aids							
3.3. Recruiting people with access and functional needs for drills, table tops and exercises, and offer guidance on making these activities accessible							
3.4 Providing recovery information and services							
3.5 Communication - Emergency Messaging (includes alerts and warnings, updates, invitations to educational events, Request for Proposals (RFPs), Preparedness information, etc.)							
3.6. Expand the numbers of those receiving, understanding and trusting information from the government by pushing it out using:							
3.6.1. Trusted customized messaging for validation and translation of government materials using understandable methods and formats via:							
3.6.1.1. Social networks (Facebook, Twitter, YouTube, etc.)							
3.6.1.2. Accessible and reliable websites							
3.6.1.3. E-mail dissemination lists							
3.6.1.4. Links to emergency information on websites and social media							
3.6.1.5. Phone calls							
3.6.1.6. Visual presentation for emergency information given (pictures in addition to, or instead of text or voice)							
3.6.2. Help individuals during large emergencies by engagement in life safety/ wellness checks – example by using: “ check-in system ” to reach out to those who have self-identified as needing assistance [Note: This may include people who:							
3.6.2.1. are geographically isolated							
3.6.2.2. lack viable support networks (relatives,							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
friends, and neighbors)							
3.6.2.3. are unable to use, understand, or be reached by existing alert and notification systems							
3.6.2.4. are transportation-dependent							
4. Involve qualified people with disabilities and others with access and functional needs with expertise and advocacy backgrounds in:							
4.1. Determining effective communication methods and procedures (include people who are deaf/hard of hearing, deaf-blind, blind/low vision, and those unable to speak so others can understand them.)							
4.2. Keeping up on emerging technology and plan for future adoption and integration into emergency warning systems							
4.3. Trainings of government personnel regarding access and functional needs to ensure accurate training content							
4.4. Trainings for people with disabilities and others with access and functional needs on emergency preparedness							
4.5. Reviewing of and or developing preparedness, education and training materials that contain accurate, clear, realistic, and helpful access and functional needs content in usable format availability (large print, electronic devices, audio, Braille, pictures, accessible web sites, plain language, and multiple languages)							
5. Providing mitigation assistance to the groups they support							
6. Recruiting and accommodating individuals access and functional needs for Community Emergency Response Teams (CERT)							
7. Assisting with regularly testing of:							
7.1. Public warnings, alerts, and notifications by tailoring							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Communication and Mass Notification Systems							
Guiding Principles							
1. Information is given in multiple ways to reach the right people, at the right time, at the right place with the right messages that can be understood and used							
2. Use redundancy for public warnings and information:							
2.1. Announce it							
2.2. Caption it							
2.3. Picture it							
2.4. Describe it							
2.5. E-mail it							
2.6. Relay it							
2.7. Text it							
2.8. Post it							
2.9. Interpret it (language & sign)							
2.10. Repeat it (frequently)							
Policies							
3. All public meetings contain an accommodation notice (example: Sign language interpreters and Communication Access Real-time Translation (CART) services are provided at each meeting. Upon request, agenda material in alternative formats and other accommodations are available to the public for xxx sponsored meetings and events. All requests must be made at least five business days prior to the scheduled meeting. For additional information contact the xxx at xxx (voice) or xxx (TTY)							
4. Message content review process includes specific steps for inclusion and appropriateness for people with disabilities and others with access and functional needs							
5. Agreements detail guidelines that all produced videos include accurate captions (captioning provided by YouTube Caption							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Downloader) is insufficient in accuracy) for public information announcements created by government. *See Reference: Website and Social Media Access							
6. In media releases ask people to share emergency information with their neighbors, friends and colleagues, especially those who may have difficulty receiving and/or understanding the information							
7. Pre-recorded messages are captioned							
Early Warning Notification Systems							
8. Product features include sending messages via:							
8.1. Directly connect with teletypewriters (TTYs)							
8.2. Landline							
8.3. Cellular							
8.4. Fax							
8.5. Electronic variable (changeable) signs							
8.6. Text message							
8.7. Weather Alert Radio							
8.8. Message board							
8.9. Text pager							
8.10. E-mail							
8.11. Video messages (using American Sign Language) to video-enabled wireless devices and e-mail							
8.12. Major languages used in the area							
8.13. Allow for targeting of specific groups							
8.14. Deliver live voice messages							
8.15. When a call is picked up by an answering machine, the system will leave a recorded message							
8.16. When the number called is busy or does not answer, the system will redial the number in an attempt to deliver the message							
8.15. Allow receivers to have the message repeated							
8.16. Provide an accessible means for people to follow up							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
with questions via live operator or alternate phone/email							
8.17. American Sign Language version of complex text information on websites							
8.18. Registration processes are accessible for people with disabilities and others with access and functional needs (call in, website)							
8.19. Resources are devoted to sustain and maintain outreach urging people to register all their devices (cell phones, additional landlines, fax, e-mail, addresses)							
9. Enhance current capacity by adding IPAWS capability. * See Reference: IPAWS							
Emergency Alert Systems (EAS) and Press Conference							
10. Regularly meet with and remind broadcasters of their obligation to ensure accessibility to emergency messages including:							
11.Ensure interpreters are in camera (screen) shot							
11.1. on-screen captions							
11.2. agreements exists for immediately provision of captioning during emergencies							
11.3. ensure scroll and crawl messages that do not interfere with captioning							
12.Provide on-screen sign language interpretation for the entire message, including cuts to public officials close-up shots, field reporters, and B-roll footage							
13.Messages must be announced for those who cannot read: scrolled messages (visual information shown for all provided telephone numbers, e-mail addresses, street closures, school closures, shelter locations, etc.)							
14.Use information that is easy to understand (3rd grade reading level) improves communication for people with learning, understanding, and intellectual disabilities)							
15.Test system regularly							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
16. Include participation and feedback from deaf/hard of hearing, deaf-blind, blind/low vision people and those who have cognitive disabilities							
Websites and Social Media							
17. Accessibility is built in and maintained by following 508 and W3C guidelines. * See Reference: Website Access and Social Media Access							
18. Website videos are captioned (captioning provided by YouTube Caption Downloader) is insufficient in accuracy for public information announcements * See Reference: Website and Social Media Access - Improving the Accessibility of Social Media in Government							
19. Links are activated before people are instructed to check websites							
20. Staff are designated for website maintenance, updating, and quality compliance checks							
21. Include emergency preparedness information for people with disabilities and others with access and functional needs. * see Reference: Individual Emergency Preparedness for People with Disabilities, Their Families and Support Networks							
22. PIOs SOPs, job aide/ checklist includes the above processes, procedures, protocols, and policies							
23. PIOs training includes the above processes, procedures, protocols, and policies							
Door-to-door Notification							
24. Use of the following to ensure people with disabilities and others with access and functional needs get the information:							
24.1. Flashlights							
24.2. Methods are attention-getting methods such as vibration/movement, i.e., using the butt of an axe or baton to concuss a door, porch, wall, window, etc.							
24.3. If necessary, in life threatening conditions:							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Evacuation and Transportation Adapted and expanded with permission from Access & Functional Needs Evacuation Planning Toolkit * See Reference: Evacuation							
1. Evacuation emergency operation plans (EOP) account for needs of people with access and functional needs							
2. Evacuation EOPs created w/input from people with access and functional needs							
3. Likely evacuation events identified and analyzed							
4. Evacuation assets identified and inventoried							
4.1. Transportation asset inventory is complete and updated every XX months / years including providers with capacity to evacuate people with disabilities and others with access and functional needs from facilities (i.e. schools, medical facilities, neighborhoods, and congregate care facilities) to include transit and non-traditional fleets such as:							
4.1.1. Fixed-route buses							
4.1.2. ADA mandated paratransit systems							
4.1.3. Dial-a-Rides							
4.1.4. Disability and senior transportation service Providers							
4.1.5. Taxi systems							
4.1.6. Non-medical emergency vans / ambulances							
4.1.7. School district transportation systems							
4.1.8. Colleges/Universities transportation systems							
4.1.9. Airport car rentals, shuttle buses / vans							
4.1.10. Healthcare center vendors							
4.2. Transit assets are typed by passenger capacity:							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
4.2.1. Secure wheelchair locations							
4.2.2. Fuel type							
4.2.3. Fuel range							
4.2.4. Vehicle turning radius							
4.3. Contract language mandates the emergency use of access vehicles funded by government resources							
5. Plans include evacuating areas of the community not covered by public transit							
6. Plans include method(s) for communication between service providers, evacuees, and first responders							
7. Procedures for scheduling emergency trips include fare waivers							
8. Pre-warning and no-warning event plans are in place so accessible vehicles and drivers are pre-positioned and immediately available to first responders during evacuations							
9. Plans include authorizing transit vehicles to act as emergency vehicles in evacuations							
9.1. How vehicles will access evacuation zones when roads are closed to non-emergency vehicles							
9.2. Emergency vehicle identification systems							
9.3. Escort of transit vehicles through danger areas							
10. Thresholds and protocol for evacuation orders clearly defined							
11. Time estimates exist for executing moderate and large-scale evacuations							
12. Plans project response time both during and after non-operational hours							
13. A pre-established process to mission task accessible transit resources							
14. Timetable for mobilization of transportation resources once tasked							
15. Protocol for how to prioritize resources when demand exceeds availability							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
16. Jurisdiction clearly defines evacuation responsibilities:							
16.1. Governing entity							
16.2. Executive							
16.3. Office of emergency services							
16.4. Sheriff							
16.5. Airport							
16.6. Animal care and regulation							
16.7. Fire services							
16.8. Health and human services							
16.9. Public information officer							
16.10. Public works							
16.11. Social services							
17. Local evacuation responsibilities:							
17.1. Air quality agency							
17.2. Paratransit agency							
17.3. Transit agency							
17.4. Water resources agency							
18. Non-governmental organizations evacuation responsibilities clearly defined							
19. Faith-based organizations evacuation responsibilities clearly defined							
20. Responsibility assigned for evacuation of:							
20.1. Long term care facility * See Definitions							
20.2. Retirement communities							
20.2. Medical facilities							
20.3. People with disabilities from schools							
21. Plan for service animals in transit equipment							
22. Plan for comfort animals (pets) in transit equipment							
23. Plan for mobility devices and durable medical devices on transit equipment							
Training							
24. Evacuation EOPs coordinated with:							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
24.1. Transit							
24.2. Paratransit							
24.3. School transit							
24.4. Taxi, shuttle, private bus							
24.5. Elderly/disabled service providers							
24.6. 211, 311							
25. Essential staff trained on evacuation plan							
26. Train personnel to carry with them and use picture and symbol with text (pictograms), pen and paper, in addition to loudspeakers when making door-to-door emergency evacuation announcements. This increases the chances of communicating with people with limited English proficiency, hearing loss and limited speech, as well as very young children, people under severe stress, and those with cognitive or intellectual disabilities							
Long Term Care Facilities (LTCFs)							
27. Coordinate accessible vehicles so they are not over-obligated during an incident (with double or triple booked - a common issue of multiple entities depending on the same few transit providers)							
28. Mapping of LTCFs * See Definitions and:							
28.1. Retirement communities							
28.2. Medical facilities							
28.3. People with disabilities from schools							
29. Plans do not assume LTCFs have adequate emergency plan just because they are required by state licensing regulations							
30. Meetings occur with LTCFs to discuss specifics of their emergency plans including interface with assumed reliance on jurisdiction's resources i.e. evacuation and transportation							
30.1. Promote clear understanding of roles, responsibilities, and opportunities for collaboration and partnerships							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
with LTCFs							
30.2. Offer emergency planning assistance with review of:							
30.2.1. Any dangerous overlaps and unrealistic expectations (accessible vehicles being over-obligated because of contractual agreements during an incident)							
30.2.2. Protocol for criteria to evacuate is identified: adequate number of medical personnel to assist, type of transportation vehicles needed, potential destinations and return of individuals							
30.2.3. Advance warning plans							
30.2.4. Realistic numbers of LTCF staff who will Remain and/or return to work after a disaster							
30.2.5. Identification of “like” facilities within variable distances for relocation shelters. These locations can be unconventional spaces like common areas and dining rooms							
30.2.6. Shelters that may accept LTCF residents in an emergency							
30.2.7. Procedures and policies for the communication of relevant medical information during evacuation and sheltering, including medications, DME, and CMS needs							
31. Procedures and training are established regarding assisting LTCF residents in general population shelters; for example, LTCF staff shall remain available via telephone to communicate specific daily needs when staff are unable to accompany residents to general population shelters							
32. Early evacuation triggers are in place when pre-warning allows							
33. Current database(s) exist that could be used during evacuation alert notification							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Mass Care							
Facilities include pre-identified: shelters, non-traditional shelters, medical shelters, evacuation centers, disaster assistance and resource centers, mass feeding sites, points of distribution sites (PODS), safe refuge sties, resettlement processing centers, and decontamination sites							
Guiding Principles							
1. Shelter people with disabilities and others with access and functional needs with and without support) in general population shelters							
2. Medical Shelters should be reserved as a scarce resource for people with acute medical needs i.e.: managing acute unstable, terminal, or contagious health conditions that require observation and ongoing treatment							
Physical Accessibility of Facilities							
3. Facilities are surveyed and classified for physical accessibility							
4. Written procedures are in place to survey potential pre-identified sites for ADA accessibility							
5. Surveys use the U.S. Department of Justice, Civil Rights Division Disability Rights Section's ADA Checklist for Emergency Shelters. *See Reference: ADA Compliance – Department of Justice							
6. Sites that are not traditional shelters have a customized checklist for accessibility that incorporate the DOJ ADA Checklist							
7. Surveys are complete							
8. All sites listed in plans have been assessed for type of use (i.e. shelter, POD etc.) capacity and accessibility:							
9. Upon completion of access surveys a usable facility list/matrix or database is developed that includes categories regarding degree of accessibility, such as							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
9.1. Readily Accessible Facilities: - sites <u>substantially comply</u> (few facilities will meet every access element) with DOJ ADA Checklist. All facilities on this list are rated 'very good' to 'excellent.' These sites provide ground level access to sheltering areas and amenities. Each site is newly constructed or modernized							
9.1.1. A list is also provided to for each site that includes additional elements needed (i.e. portable restrooms, showers, tents) and equipment (i.e. portable generators) that must be brought on site to make shelter sites fully functional and accessible. This determination will depend upon on a number of factors such as what the facility will be used for, how many people will be sheltered, etc.							
9.1.2. Minor repairs needed							
9.1.3. Under Renovation - For Future consideration: Currently under alterations to be completed by (insert date). Upon completion renovation site will be re-surveyed to determine if it can be moved to the Readily Accessible category							
9.1.4. Renovation tentatively scheduled - Upon completion renovation site will be re-surveyed to determine if it can be moved to the Readily Accessible category							
10. A list of physical locations is attached to each appropriate Annex							
Physical Accessibility Site Set Up and Maintenance							
11. Site managers designate a coordinator for functional needs services to oversee:							
11.1. Once sites are set up, a customized secondary quick access site assessment is conducted to ensure access							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
elements are in place such as: * See Reference: Functional Needs Focused Care and Shelter Checklist							
11.1.1. Layout / Set Up							
11.1.2. Aisle width including and paths to areas within the site are accessible (to bathrooms, feeding areas, commodities, etc.)							
11.1.3. Bathrooms							
11.1.4. Signs							
11.1.5. Power							
11.1.6. Access (drop off areas, parking, bathroom, routes)							
11.1.7. Sleeping areas							
11.1.8. Privacy areas							
11.1.9. Suppliers who set up communication Equipment (phones, phone chargers, computers) ensure the equipment is accessible to wheelchair users, TTY users, e-mail users and people using a variety of wireless devices.							
11.2. Registration							
11.2.1. Line management							
11.2.2. Priority access							
11.2.3. Initial Intake and follow up							
11.3 Health and safety issues							
11.4. Check for barriers several times per day							
11.5. Communication access							
11.5.1. Multiple methods							
11.5.1.1. Announce it							
11.5.1.2. Caption it							
11.5.1.3. Picture it							
11.5.1.4. Describe it							
11.5.1.4. E-mail it							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
11.5.1.5. Relay it							
11.5.1.6. Text it							
11.5.1.7. Post it							
11.5.1.8. Interpret it (language & sign)							
11..5.1.9. Repeat it frequently							
Decontamination							
12. Addresses specifics of decontamination of assistive technologies, DME including mobility and speech generating devices, and service animals							
12.1. Staff are trained on the importance of maintaining or replacing of equipment and/or services to people with disabilities and other with access and functional needs							
12.2. Procedures and training exists for decontamination of DME and other assistive technologies that includes:							
12.3. How to decontaminate devices and equipment							
12.4. Steps to take when devices cannot be decontaminated such as having vendors and/or supplies of equipment ready to replace contaminated equipment							
Sheltering in Place							
13. Plans are in place with law enforcement and other service providers to allow continued delivery of services, including:							
13.1. Home health aides/visiting nurse services/personal attendants							
13.2. Meals on wheels							
13.3. Proxy pick up of supplies, food, medications, etc.							
Life-safety-wellness checks * See Definitions							
14. Clear triggers for these checks exist such as sheltering -in-place which last more than 3 days, sustained power-outages, etc.							
15. Procedures for when, how and who will conduct checks and							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
the process for reporting unmet needs and fulfilling those requests are in place							
Recovery							
1. Access and Functional Needs Position leads in integrating the diverse needs of people with disabilities and others with access and functional needs into the short- and long-term recovery efforts which include:							
1.1. Coordinate ongoing work group comprised of government and community partners to coordinate and collaborate in the delivery of recovery services							
1.2. Community partners provide follow-along service coordination (case management) such as independent living, developmental disability, aging, family and faith-based, culture-specific, services, etc.							
1.3. Partners focus on issues such as replacing DME, repairing or rebuilding damaged access housing elements (temporary and permanent independent living options, i.e., ramps, grab bars, bathrooms fixtures, etc.)							
1.4. Reinforce FEMA's Individual Assistance grants can be used for non-traditional, but allowable items such as: automatic door openers, equipment; modifications (wheelchairs, scooters, battery chargers, hearing aids, computers, kitchen / bathroom access alterations, widening doorways, ramps, etc.)							
2. Offer multiple methods to complete assistance application procedures that allow everyone equal access (line management, phone, website, home visits, etc.) Information and application procedures should not limit access. For example:							
2.1. Programs requiring telephone application may exclude people who are deaf or hard of hearing or have difficulty speaking or understanding spoken							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Training							
Tabletops, Exercises, and Drills							
1. Actively recruit people with disabilities and others with access and functional needs to participate							
1.1. Avoid people without disabilities playing the role of people with disabilities and others with access and functional needs							
2. Integrate access and functional needs specific content (injects and scenarios) into:							
2.1. TTX							
2.2. Exercises							
2.3. Documentation - Outcomes - successes and failures are integrated into:							
2.3.1. Hot washes							
2.3.2. After action reports.* See Reference: Southern California Wildfires After Action Report							
2.3.3. Product improvement work plans and project updates							
3. Focus on contemporary incorporation of whole community planning, and access and functional needs inclusive practices, reduces counterproductive teaching of outdated, old model, old school, special needs content							
4. Routine integration of access and functional needs content into new and updated relevant training so subject is not considered “special”							
5. Require emergency managers, planners, and first responders to attain core competencies in integrating access and functional needs into emergency planning, response, and recovery which include:							
5.1. Complying with federal law, such as the Stafford Act and Post-Katrina Emergency Management Reform Act (PKEMRA) along with federal civil rights laws, such as							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
Agreements, Contracts, MOUs							
1. Clearly detail and pass through in contract language the jurisdiction's ADA obligations, for example responsibilities for sheltering / feeding people with access and functional needs.* See References: FEMA Guidance on Planning for Integration of Functional Needs Support Services in General Population Shelters; ADA Compliance–Department of Justice							
2. Include emergency vendor contact information for at least 3 people that can be reached with 24/7							
3. Vendors span geographical service area to include, local, regional, statewide and nationwide (especially important in a catastrophic emergency)							
4. Exists for multiple providers of similar items to protect against failure to deliver							
5. Are updated every XX months / years							
6. Document logistical support from outside providers:							
6.1. Detail true resource capacity for ARC and others organizations responsible for sheltering, feeding, commodity distribution, etc.							
6.2. Community partners (non-VOADS) pre-designated Assistance. * See Section: Community Partners / Public Engagement / Service Force Multipliers							
6.3. VOADS							
6.4. Personal assistance services (PAS) resources and agreements for children and adults who require PAS assistance to maintain their health and safety in a general population shelter							
6.5. Video Remote Interpreting (VRI)							
6.6. Installation of temporary accessibility elements, example portable ramps, removal of a door, etc., and minor repairs							
6.7. Medications							

Element	S	PS	NS	?	NA	PP	Comments & follow up questions
6.8. Durable medical equipment							
6.8.1. Walkers							
6.8.2. Walking canes							
6.8.3. Wheelchairs – multiple sizes							
6.8.4. Shower chairs							
6.8.5. Toilet chairs							
6.8.6. Raised toilet seats							
6.8.7. Accessible portable restrooms and showers							
6.8.8. Generators							
6.9. Consumable medical supplies							
6.10. Power back-up supplies							
6.11. Accessible cots							
6.12. Magnifiers							
6.13. TTYs * See Section: Mass Care - Physical Accessibility Site Set Up and Maintenance							
6.14. Interpreter boards							
6.15. Wireless laptops capacity for VRI, email, etc.							
7. Plans detail which items need to be stockpiled and which need “ just in time delivery”:							

Resources

ADA Compliance – Department of Justice, ADA website
<http://www.ada.gov/>

[ADA Guidelines on Sheltering for Mass Care](#)

[ADA Guide for Local Governments - Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities](#)

[ADA Best Practices Tool Kit for State and Local Governments](#)
(Chapter 7)

[Service Animals](#) – [Department of Justice July 2011 revised guidance](#) on the term “service animal” and the service animal provisions in the Department’s revised regulations.

Evacuation

[Access & Functional Needs Evacuation Planning Toolkit DVD](#) information to support counties in the evacuation and transportation needs their citizens during an emergency. Provides tools such as a gap analysis checklist.

[FEMA Guidance on Planning for Integration of Functional Needs Support Services](#)

(FNSS) in General Population Shelters (provides sample lists of durable medical equipment and consumable medical supplies to assist emergency managers in their planning and preparation efforts to build capacity to meet obligations to individuals with disabilities.

Federal Communications Commission

[Rules and fact sheets](#) for emergency communication:
[Accessibility of Programming Providing Emergency Information](#)
[Accessibility of Emergency Video Programming Factsheet](#)

[Functional Assessment Service Teams](#)

[Functional Needs Focused Care and Shelter Checklist](#)

Funding

Integrating Disability Access and Functional Needs Efforts [FEMA Grant Programs Directorate Information Bulletin No. 361](#)

[Individual Emergency Preparedness for People with Disabilities, Their Families and Support Networks](#)

[IPAWS](#)

IPAWS is an alert system that was designed so that the President could deliver a message to the American people. Messages include presidential alerts, imminent threat alerts and amber alerts utilizing geographic targeting. The alerts are delivered directly from cell tower to cell phone through a one way broadcast.

[Language Is More than a Trivial Concern!](#)

[Legal Issues](#)

Moving Beyond Special Needs

A Function Based Framework for Emergency Management and Planning [PDF](#), [Microsoft Word](#).

Southern California Wildfires After Action Report Formats: [PDF](#)

Website and Social Media Access

[Improving the Accessibility of Social Media in Government](#) covers agencies' responsibilities to ensure that digital services are accessible to all people, individuals with disabilities. Includes recommendations for improving accessibility of social media, tips for making: Facebook posts accessible, Tweets accessible, YouTube videos accessible; and resources, training, and how to provide feedback (2013)

[Section 508](#) of the Rehabilitation Act requires access to electronic and information technology procured by Federal agencies.

[Web Accessibility Initiative](#) (WAI) Web provides strategies, guidelines, resources to make the Web accessible to people with disabilities

Whole Community Planning

[Effectively Including People with Disabilities in Policy and Advisory Groups](#)

A “Whole Community” Approach to Emergency Management, Format: [Microsoft Word](#).

Policy Challenges in Supporting Community Resilience by Robert Bach, Robert Doran, Laura Gibb, David Kaufman, and Kathy Settle - Presented initially at the London Workshop of the Multinational Community Resilience Policy Group, November 4-5, 2010. The Group is co-chaired by David Kaufman, Federal Emergency Management Association, Department of Homeland Security, United States, and Kathy Settle, Civil Contingencies Secretariat, Cabinet Office, United Kingdom. Formats: [PDF](#)