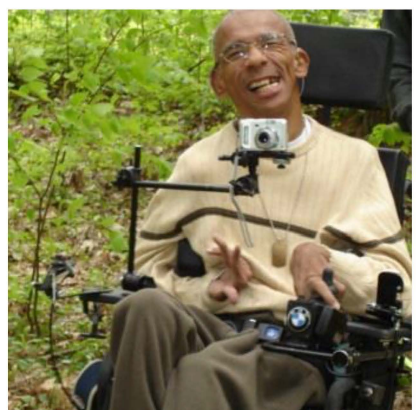
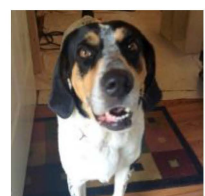


Including People With Disabilities in Emergency Planning & Preparedness

2015

New Hampshire
Disability & Public
Health Project



Institute on Disability/UCED



Contents

Introduction	1
Defines disability and functional needs, and introduces the C-MIST framework. Provides suggestions for respectful verbal and nonverbal interactions with people of all types.	
Communication	7
Highlights the importance of effective and inclusive communication in emergency preparedness, and describes how emergency management programs, emergency notification systems, and public information materials can be improved to reach people with a wide variety of abilities.	
Exercises & Planning	9
Describes how including people with disabilities in trainings, activities, planning, and drills strengthens and improves emergency planning. Provides information to consider when recruiting people with disabilities to participate in emergency exercises and activities.	
Sheltering	13
Focuses on improving the accessibility of shelter facilities across the state. Shares results from the American Red Cross Shelter Facility Survey statewide and by region. Reassessment resources are provided, along with a list of helpful tips to improve shelter accessibility.	
Contacts	17
Includes both statewide and regional disability contacts to aid with recruiting partners and participants for emergency planning and exercises. Space is provided to add personal contacts.	
Training	23
Provides an overview of the DPH train-the-trainer opportunity for community emergency personnel, including how to schedule training in your region. Links to additional resources for first responders are also included.	
References	25
Resources	26

Alternative formats available on request.

Suggested Citation

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[**http://nhdisabilityhealth.org/ep**](http://nhdisabilityhealth.org/ep)

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twitter.com/nhdph

List of Acronyms

ADA	The Americans with Disabilities Act
APHA	American Public Health Association
ASL	American Sign Language
C-MIST	Communication, Medical Needs, Maintaining Independence, Supervision, Transportation
CDC	U.S. Centers for Disease Control and Prevention
DPH	NH Disability& Public Health Project
EMD	Emergency Management Directors
EP	Emergency Preparedness
ESF	Emergency Support Functions
FEMA	Federal Emergency Management Agency
NRF	National Response Framework
PHN	Public Health Network
TA	Technical Assistance



DPH NH Disability & Public Health Project

DISABILITY & EMERGENCY PREPAREDNESS Technical Assistance Packet

About DPH

The New Hampshire Disability & Public Health project (DPH), funded by the U.S. Centers for Disease Control and Prevention (CDC), is a collaboration between the Institute on Disability at the University of New Hampshire and the NH Division of Public Health Services. The project goal, to promote and maximize health, prevent chronic disease, improve emergency preparedness and increase the quality of life among people with disabilities, is achieved through activities that focus on infusing disability components into existing public health programs and initiatives.

Packet Overview

The results of a recent technical assistance survey distributed to NH's Public Health Network (PHN) Coordinators and Emergency Management Directors (EMDs) led to the development of this technical assistance (TA) packet. Highlights from the survey include the following:

- 68% of respondents indicated that public information materials were not always made available in alternative formats (such as large print, Braille, audio description, subtitles, etc.);
- 55% of respondents did not target or include people with functional or support needs in their public exercises in the last 2 years. The main barriers cited by respondents included lack of funding, time, volunteer power, and lack of understanding how to integrate people with disabilities;
- 77% of respondents would like help to establish or improve a plan to recruit individuals with different types of functional needs to participate in trainings for first responders; and
- 80% would like technical assistance to address accessibility issues that were identified during the shelter assessments.

This TA packet provides a variety of resources and tips in response to these findings and requests. The goal of this information is to assist PHN Coordinators and EMDs to include people with disabilities in state public health planning, programming and services regarding emergency preparedness.

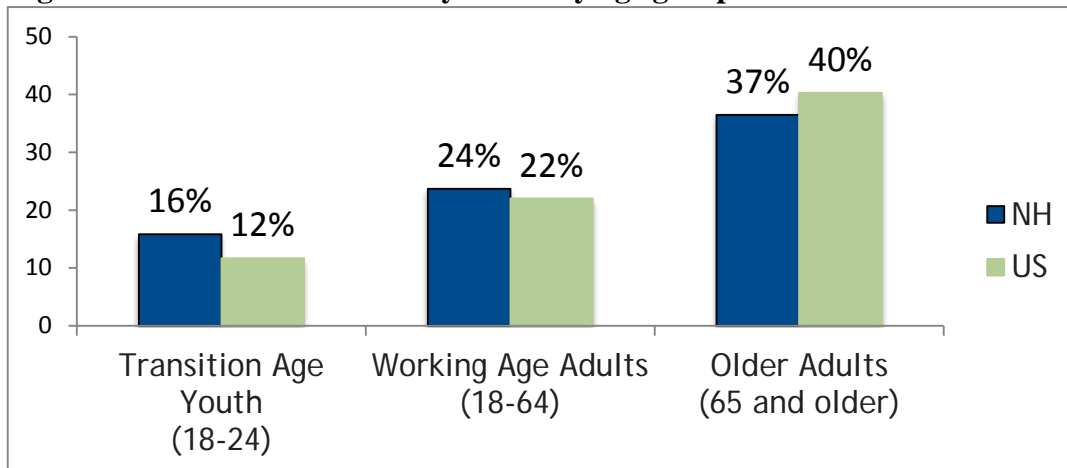
Electronic copies of all included materials are available on the DPH website at <http://nhdisabilityhealth.org/ep>.

Who Are “People with Disabilities”?

Disability can take many forms and is not always visible or readily apparent. Disability can occur at any point during the lifespan and may be present at birth or originate from genetic predisposition, illness, injury, or aging. People with disabilities have as wide a variety of skills, abilities, and needs as people without disabilities. Different types of disability may affect a person’s ability to read, write, see, hear, move about, speak, or understand.¹ Adhering to the principles of universal design will ensure the broadest inclusion to meet the diverse needs of all people. Learn more about universal design at <http://www.universaldesign.com>.

The *New Hampshire Disability and Public Health Needs Assessment* reports the prevalence of disability among adults in New Hampshire compared to the United States (Figure 1). Prevalence rates are one available metric that helps to determine levels of need and demonstrates the importance of including a disability perspective in public health programming and services within the state.²

Figure 1. Prevalence of disability in NH by age group



Communicating with and about people with disabilities

There are many ways to talk about disability. Sometimes even the same or similar ideas of disability are discussed in multiple ways. No matter what professional perspective you take, and regardless of the definition and terms you use, paying close attention to the way you interact verbally, physically, and socially can ensure effective communication. The next page (page 4) covers more about respectful approaches to communication and interaction.³

In emergency planning and response, disability is discussed in terms of functional needs. The U.S. and the state of New Hampshire have adopted the C-MIST Functional Needs Framework. The framework is introduced on page 5.

Respectful communication involves focusing on the whole person, not just one aspect (such as a disability or a difference). It is not about a list of rules that govern political correctness and what one can or cannot say. It is about openness and finding common ground. The tips on this page are designed to help. Be yourself, and realize mistakes do happen.

Here are some basics that are preferred by many people with whom you might interact:⁴⁻⁶

- Say a **person with a disability** (rather than handicapped, retarded, or crippled);
- Say a **person without a disability** (rather than normal, or healthy);
- Use language that avoids **assumptions** about another person's experience (e.g., *has* Cerebral Palsy rather than suffers from, overcomes or is courageous about, and *uses* a wheelchair rather than is confined or bound by); and
- When in doubt, **ask** a person how they would like you to refer to them.

Verbal Communication	Nonverbal Communication
<ul style="list-style-type: none"> • Speak directly to a person rather than to a caregiver or support personnel who may be present. • Avoid correcting another person's language. • Give directions and ask questions one step at a time. • Be prepared to repeat questions or provide the same information multiple times in different ways. • If a person has a visual impairment, provide directions with accurate cues that do not rely on visual input. For example, describe the environment, including obstacles in the path of travel. • Inform a person when you are entering or leaving the room, or when there are others present. • If a person has a hearing impairment, face them when speaking to facilitate lip reading. Speak at a regular volume, and articulate clearly. 	<ul style="list-style-type: none"> • Pay attention to your body language; convey a relaxed and approachable attitude. • Hold yourself at eye level with a person (but avoid forcing eye contact if it seems to make the person uncomfortable). • When possible, approach a person from the front. • Nod to express comprehension. • Avoid touching a person's mobility device unless they assent to it. • Walk on the opposite side of any service animal or assistive device (e.g., cane). • Keep mobility devices (e.g., crutches, walkers, wheelchairs) within the person's reach. • If a person has a visual or hearing disability, touch the person lightly on the arm or use other physical signs to initiate communication. • Write down information if needed or draw simple pictures.

C-MIST Functional Needs Framework

The U.S. Department of Health and Human Services and the state of New Hampshire use a functional needs framework to identify and understand at-risk individuals' needs in emergency planning and preparedness. The framework includes five essential functional needs categories: communication, medical needs, maintaining independence, supervision, and transportation (C-MIST). C-MIST provides a useful and flexible framework for emergency planning and response, emphasizing a person's functional needs rather than a disability.^{7,8}

C	Communication
	Some people have difficulties receiving and responding to information. People with communication needs may have reduced or no ability to see, hear, or speak; or have limitations understanding or learning. This category also includes people who cannot speak, read, or understand English.
M	Medical Needs
	For the purposes of emergency planning, this category includes people who need assistance with activities of daily living such as grooming, bathing, eating, dressing, or toileting; as well as people who are managing chronic, contagious, or terminal illnesses; and people requiring medications, IV therapy, feeding tubes, dialysis, oxygen, suction, catheters, and ostomies.
I	Independence
	Some people use medication or assistive devices to function independently on a daily basis, such as: mobility aids (wheelchairs, walkers, canes), communication aids (hearing aids, computers), medical equipment (syringes, oxygen), or service animals.
S	Supervision
	People may require supervision when they experience Alzheimer's or other forms of dementia; psychiatric conditions such as Schizophrenia, severe depression, or chronic and severe mental illness; intellectual or developmental disabilities; or brain injury. Needs in this category sometimes require a more supervised and protected setting in an emergency.
T	Transportation
	Transportation is an essential part of emergency planning. People who do not drive because of a disability, legal restriction, temporary injury, age, poverty, or lack of access to a vehicle are included in this category.

Communication

Ensure that your emergency management program is accessible for all people

The Americans with Disabilities Act (ADA) asks:



“Do you have written procedures to make sure that you regularly seek and use input from persons with a variety of disabilities and organizations with expertise in disability issues in all phases of your emergency planning, such as those addressing preparation, notification, evacuation, transportation, sheltering, medical and social services, temporary lodging and/or housing, clean-up, and remediation?”



“Do you seek input and participation from people with disabilities and organizations with expertise on disability issues when you stage emergency simulations and otherwise test your preparedness?”⁹

If not, here are some ways to practice better inclusion:



- Invite participants from a local disability organization (see **Contacts** in this packet) to offer input and feedback on all phases of your emergency management plans;
- Reach out to statewide or local disability organizations to help you recruit and enlist volunteers with disabilities; and
- Frequently seek and utilize input from people with different types of disabilities (e.g., mobility, vision, hearing, cognitive, psychiatric, sensory) regarding issues related to planning and preparedness.

Communicate in multiple formats

Public information should be made available (and advertised as being available) in alternative formats whenever possible and well before an emergency situation. Many different types of formats, communication aids, and accommodations support effective communication. Here are some examples:

- Large print materials for people with low vision;
- Screen readers that convert text to voice;
- Qualified interpreters who know ASL or other sign languages;
- Videos with closed or open captioning; and
- Use of visual cues to focus attention.

Before you develop new materials, check to see if other organizations have accessible educational materials that you can use or adapt for your region.

Tips for effective communication:

- Identify and partner with local disability organizations. These organizations can assist with outreach and advise how to create accessible information.

- All publications should provide a clear means to request alternative formats. People who require alternative formats can indicate what format works best for them.
- Disseminate materials in places likely to reach individuals with disabilities, such as centers for independent living, group homes, senior centers, assisted living facilities, and disability service providers.

“Get Ready” an initiative of the American Public Health Association



The American Public Health Association (APHA) developed a series of fact sheets providing emergency preparedness information and tips for people with disabilities. APHA provides a general tip sheet for people with disabilities, as well as disability specific materials for people with mobility, vision, hearing, and cognitive disabilities. These are all provided in various formats on their webpage, and can be downloaded as a PDF or read text, listened to as an audio recording, and watched in American Sign Language (ASL):

<http://www.getreadyforflu.org/disabilities.htm>.

You can broadly disseminate the APHA’s preparedness materials in your region and municipalities. Here are some suggestions on how to do so:

- Feature and link to the “Get Ready” materials on PHN or local safety department websites;
- Print fliers and brochures and distribute to local disability organizations; and
- Utilize local disability organizations’ e-mail listservs to send out “Get Ready” links.

Emergency Notification Systems

Emergency warnings must reach everyone. Traditional emergency warning methods (such as radio, sirens, or other audible alerts) are not always accessible to people with disabilities. For example, a person who is blind or has low vision may not be aware of visual cues, such as flashing lights. Combining different emergency notification methods can reach a greater audience than relying on one method alone.¹⁰ For instance, use both audible and visual alerts to reach more people than either method would reach by itself. Consider incorporating the following methods:

- Telephone calls with pre-recorded messages;
- Auto-dialed TTY (teletypewriter) messages;
- Text messaging or E-mails;
- Open captioning on emergency broadcasts on local television stations; and
- Dispatch qualified sign language interpreters when emergency announcements are televised.

Web Accessibility Resources

- Web Accessibility Initiative provides strategies, guidelines, and resources to make the web accessible to people with disabilities: www.w3.org/WAI
- A great resource that highlights accessibility issues on your webpage: www.wave.webaim.org

Exercises & Planning

Maximize the benefits of inclusion

Including people with disabilities in trainings, activities, planning, and drills will strengthen and improve community emergency preparedness planning. The participation of people with disabilities can facilitate the discovery of unique and creative solutions to questions, as well as testing current protocols, and sometimes illuminating issues that may require further planning and consideration on the part of emergency personnel.

When surveyed by DPH, 75% of PHN Coordinators and EMDs responded that their region or municipality had held training for first responders within the last 2 years. Many of these trainings covered topics related to one or more C-MIST categories, but less than one-third of the trainings provided the opportunity to work with actual individuals who had the respective needs (see Table 1). Talking about issues and sometimes role playing the part of individuals with functional needs is a start, but it does not provide the real-life, hands-on experience that could really benefit first responders when it counts the most. Maximize the benefits of inclusion by recruiting real people to participate in exercises and trainings.

Table 1. NH trainings for first responders that covered C-MIST topics

	% of trainings covering topics in this area	% of trainings offering the opportunity to work with real people with needs in this area
Communication	60	11
Medical Needs	67	n/a
Independence	57	22
Supervision	36	33
Transportation	n/a	n/a

n/a = not asked

Recruit people with disabilities to participate

Recruiting representatives is most effective when it is not done haphazardly.¹¹ For example, some places invite participation from a sample of people who are most readily or conveniently available - a colleague, neighbor, or friend who happens to have a disability. With some luck, this method may satisfy the intended goals of including a person with disabilities. Another approach is to be planful

about the goals of inclusion and to recruit individuals who are particularly qualified to help meet those goals.¹¹

Take the time to think about the people you want to recruit. Including people with different disability types can help to obtain valuable information about the strengths or barriers of emergency plans and activities. Here are some examples of qualifications you may want to consider:

- An individual who has personal experience with disability and identifies as a person with a disability;
- May have experience as a disability advocate;
- Can speak about cross-disability or broad disability access issues; and
- Can facilitate communication with the communities they represent/work with.

Checklist for recruiting participants

☐ Define the goals of inclusion.

- ✓ What are the group's objectives?
- ✓ Are you staging simulations or testing the effectiveness of emergency planning that works best with a person with a mobility (or other) limitation?
- ✓ How will your organization benefit from including people with disabilities?

☐ Establish the role and responsibilities of the participant.

- ✓ Does the activity or exercise require a person with specific expertise, skills, or experience?
- ✓ How much/how long is the time commitment?
- ✓ What responsibilities will the person/people have (e.g. facilitating or leading the discussion, playing a role in a staged exercise or drill, etc.)?

☐ Consider creating a nomination form to disseminate to disability organizations (see **Contacts** section in this packet). This would include information you need about willing participants.

- ✓ Name, age, and any other necessary personal information;
- ✓ Contact information;
- ✓ Why are you interested in participating;
- ✓ How do you best communicate, respond to and understand information; and
- ✓ Requests for accommodations (e.g., alternative formats).

☐ Take advantage of other dissemination venues, such as social media or local papers.

☐ Keep track of those who nominate themselves or others for future activities and exercises.

Ensure the meeting locations and content are accessible, and provide a clear means to request accommodations. For more information about planning accessible meetings, visit:

<http://www.ada.gov/business/accessibletg.htm>

"Reimbursement of expenses and providing an honorarium demonstrates that you value these individuals' expertise and time, and expect full and valuable contributions."¹¹

– June Isaacson Kailes

See www.jik.com/Effectively-Including-People.pdf for a more comprehensive recruitment matrix.¹¹

Local emergency operations plans (LEOPs)

The DPH Technical Assistance Survey asked EMDs about local plans (LEOPs), and PHN Coordinators responded to questions about regional mass care plans. Results are shown Table 2.

Table 2. Local Emergency Operations and Regional Mass Care Plans

	Yes	No	Don't know
Is your LEOP in Emergency Support Function format?	33%	11%	56%
Does your PHN have a regional mass care plan?	56%	44%	--
Is your regional plan in Emergency Support Function format?	60%	20%	20%
Does your LEOP or regional mass care plan identify shelters equipped for people with functional needs?	67%	22%	11%
Would you like technical assistance to address or prioritize accessibility issues identified during assessment of your local shelter sites?	50%	50%	--

ESF (Emergency Support Function)

ESF is the structure used by FEMA's National Response Framework (NRF). ESF describes the expected execution of tasks for various types of emergencies and assigns tasks to coordinating and supporting agencies.

ESFs align categories of resources and provide strategic objectives for their use. Support agencies are assigned based on the availability of resources in a given functional area. ESFs provide the greatest possible access to federal department and agency resources regardless of which agency has those resources.

For example, the town of Stoddard's LEOP identified the primary and support agencies for ESF #9, Search and Rescue; the town's Fire & Rescue department is the primary agency, and support agencies include the Emergency Management Director and the Police Department.

ESF format allows for a more unified response to emergency situations. For more information about ESF format, visit the national FEMA web page at:

<http://training.fema.gov/EMIWeb/edu/docs/cgo/Week%203%20-%20Producing%20Emergency%20Plans.pdf>.

Public Shelters

According to the Americans with Disabilities Act, emergency shelters must be accessible to all people. Accessibility applies to the routes to, from and within the facility, as well as the usability of public facilities, such as the restrooms and showers.^{9, 10} To ensure the safety of residents in local jurisdictions, NH emergency management officials predetermined emergency shelters which could be open during a disaster. Information from shelters, including schools, recreation centers, churches, and more, was shared with NH Red Cross for entry into the American Red Cross National Shelter System. Results of accessibility assessments at 379 shelters completed through February, 2012, are shown in Table 2 and explained in the next paragraph.

What the scores mean

Accessibility scores are based on items from the **Accessibility** section of the American Red Cross Shelter Facility Survey (Rev. 8-15-2011). Questions on the survey are Yes/No format, therefore percentages were computed as # of “yes” answers / total possible points. Shelter rankings were based on percentage scores: Fully accessible = 100%; High = 90-99%; Medium = 80-89%; Low = 70-79%; Very low <70%; or Not fully assessed (see below).

Table 2. Statewide Shelter Accessibility Ratings

Accessibility Rating	# of shelters	% of shelters
Fully accessible	1	<1%
High	11	3%
Medium	26	7%
Low	14	4%
Very low	7	2%
Assessed Total	59	16%
Not Fully Assessed	320	84%
Total	379	100%

The “Assessed Total” consists of shelters that were fully assessed (i.e., when at least two-thirds of the accessibility items were answered). Surveys with more than one-third of responses missing in the accessibility category are included in the “Not Fully Assessed” line.

Accessibility of the majority of shelter facilities in NH is undetermined due to inconclusive survey results. DPH strongly suggests reassessment in all regions of the state, including full consideration of items related to accessibility. See Reassessment Options starting on the next page (page 14).

Reassessment Options

Red Cross

DPH encourages the reassessment of shelter facilities in each region. Contact the New Hampshire American Red Cross to have the shelter facilities in your region reassessed:

Ian Dyer

Phone: (603) 225-6697 ext 212

E-mail: ian.dyer@redcross.org

DPH reassessment

The DPH staff is experienced in performing environmental accessibility assessments and has a toolkit with the needed equipment. If you are interested in receiving TA to reassess the shelters in your region, please contact DPH at dph.iod@unh.edu.

Self-reassessment

If you choose to reassess your facility without assistance from the Red Cross or DPH staff, we recommend using the Department of Justice's *ADA Checklist for Accessible Shelters*: <http://www.ada.gov/pcatoolkit/chap7shelterchk.htm#intro>. It is designed for use by state and local officials and operators of emergency shelters to determine the accessibility of shelter facilities. Use of this assessment tool does not require any prior experience. The materials and tools needed to complete this assessment include:

Metal tape measure, at least 20 feet long;

Level, at least 24 inches long;

Door pressure gauge;

Camera; and

One copy of the checklist for each shelter in the region.

Example Survey Items from ADA Checklist	Y	N
Is an accessible route provided from accessible parking spaces to the accessible entrance of the shelter?	<input type="checkbox"/>	<input type="checkbox"/>
Does at least one door or one side of a double leaf-door provide at least 32 inches clear passage width when the door is open 90 degrees?	<input type="checkbox"/>	<input type="checkbox"/>
Is the [door] hardware (e.g., lever, pull, panic bar) usable with one hand without tight grasping, pinching, or twisting of the wrist?	<input type="checkbox"/>	<input type="checkbox"/>
If a sign is provided at the toilet room entrance (e.g. Men, Women, Boys, Girls, etc.), is a sign with raised characters and Braille mounted on the wall adjacent to the latch?	<input type="checkbox"/>	<input type="checkbox"/>

For additional tips and information about improving the accessibility of shelters, check out the *ADA's Best Practices Toolkit*: <http://www.ada.gov/pcatoolkit/chap7shelterprog.htm>.

Examples of Improved Access

Sometimes even minor accommodations can significantly improve the accessibility of a shelter for individuals with disabilities. Consider these tips for improving shelter accessibility:⁸

- Maintain accessible routes within the facility by ensuring that all pathways are at least 36” wide.
- Offer wayfinding assistance to people with visual or cognitive disabilities to help people adjust to the shelter environment and function more independently. Wayfinding, the manner in which people orient themselves in order to navigate a physical environment, can be facilitated through the use of intuitive layout and signage that incorporates graphics, images, and directional indicators are easy to follow regardless of abilities.
- Consider setting up a “quiet-room” or “stress-free zone.” Shelter environments may aggravate some disability-related conditions, such as sensory or anxiety disorders. If the shelter is in a school’s gym, a nearby classroom may provide the necessary relief from noise and interaction for some people.
- Refrain from separating a person from a service animal. Service animals are not pets, and should always remain with the person they assist.
- Ask the person if the location of their cot works for them. For example, a person with a visual impairment may wish to have a cot placed in a location that they can easily find.
- Remove any obstructive or low-hanging objects. If the object cannot be removed, place a cane-detectable barrier on the floor beneath or next to the object. Cane-detectable barriers should not obstruct accessible routes for people using mobility devices.
- Set up a procedure for requesting modifications to sleeping arrangements. For example, a person who uses a wheelchair or scooter requires a cot that is firmly anchored with a surface that is 17-19 inches above the floor to safely transfer on and off.
- Whenever possible, provide a safe and secure refrigeration location for medications that must be kept at a cool temperature.
- When planning food supplies for shelters, consider common dietary restrictions and food allergies. For assistance, see <http://www.hss.gov.yk.ca/pdf/dietaryrestrictions.pdf>.
- Some medical conditions, such as diabetes, require access to food to prevent serious health consequences. Most shelters restrict kitchen access to preserve supplies, but reasonable accommodations can be made for people with disability-related needs to access food or beverages when needed.
- Keep families together whenever possible. Family members support, assist, and help one another to cope in emergency situations.
- Publicize the accessible shelters in the region in places that will likely reach people with disabilities (e.g. disability organizations, centers for independent living).

Statewide Contacts

Establishing partnerships with local, regional, and statewide disability organizations is an effective strategy for outreach and improved communication. Disability organizations can advise on accessibility, contact and connect with the individuals they serve or represent, and become a valuable resource for emergency management.

Alzheimer's Association

5 Bedford Farms Drive, Suite 201
Bedford, NH 03110
Phone: (603) 606-6590
Toll Free: (800) 272-3900
info@alz.org
www.alz.org

American Cancer Society

Northern New England Region 2
Commerce Drive, Suite 110
Bedford, NH 03110
Phone: (603)- 471-4101
Toll Free: 800-227-2345
www.cancer.org

American Legion Department Service

Office 121 South Fruit St.
Concord, NH 03301
Phone: (603) 856-8951
adjutantnh@nhlegion.com
www.nhlegion.com

Arthritis Foundation

6 Chenell Drive, Suite 260
Concord, NH 03301
Phone: (603) 224-9322
Toll Free: (800) 639-2113
info.nne@arthritis.org
<http://www.arthritis.org/new-hampshire/>

ATECH Services

57 Regional Drive, Suite 7
Concord, NH 03301
Phone: (603) 226-2900
atech@crotchedmountain.org
<https://www.crotchedmountain.org/Programs-and-Services/ATECH-Services/ATECH-Services/>

NH Assistive Technology Partnership Project

UNH Institute on Disability
10 West Edge Drive, Suite 101
Durham, NH 03824
Phone: (603) 224-0630
Toll Free: (800) 238-2048
www.atinnh.org

NH Association for the Blind

McGreal Sight Center 25 Walker Street
Concord, NH 03301
Phone: (603) 224-4039
Toll-free: 1-800-464-3075
services@sightcenter.com
www.sightcenter.org

Brain Injury Association of NH

109 North State Street, Suite 2
Concord, NH 03301
Phone: (603) 225-8400
Toll Free: (800) 773-8400
mail@bianh.org
www.bianh.org

Breathe NH

145 Hollis St., Unit C
Manchester, NH 03101
Phone: (603) 669-2411
Toll Free: (800) 835-8647
info@breathenh.org www.breathenh.org/

Cystic Fibrosis Foundation

114 Perimeter Rd., Unit G & H
Nashua, NH 03063
Phone: (603) 598-8191
Toll Free: (800) 757-0203
no-new-eng@cff.org
www.cff.org/Chapters/newengland/

Northeast Deaf and Hard of Hearing Services

57 Regional Drive
Concord, NH 03301
Phone: (603) 224-1850
TTY: (603) 224-0691
Video Phone: (603) 968-5889
info@ndhhs.org
www.ndhhs.org/

NH Developmental Disabilities Council

21 S Fruit Street, Suite #22
Concord, NH 03301
Phone: (603) 271-3236
www.nhddc.org/

American Diabetes Association

New England Chapter
10 Speen Street, 2nd Floor
Framingham, Massachusetts, 01701
Phone: (617) 482-4580
<http://www.diabetes.org/in-my-community/local-offices/boston-massachusetts/>

Disabilities Rights Center, Inc.

18 Low Ave
Concord, NH 03301-4971
Phone: (603) 228-0432
Toll-free: 1-800-834-1721
advocacy@drcnh.org www.drcnh.org

Disabled American Veterans (DAV)

VARO-Norris Cotton Fed. Bldg. 275
Chestnut St., Rm. 515
Manchester, NH 03101
Phone: (603) 222-5788
www.dav.org/veterans/NSOffices.aspx

Easter Seals NH

555 Auburn Street
Manchester, NH 03103
Phone: (603) 623-8863
Toll Free: (800) 870-8728
www.nh.easterseals.com

Governor's Commission on Disability

121 South Fruit Street, Suite 101
Concord, NH 03301
Phone: (603) 271-2773
Toll Free: (800) 852-3405
disability@nh.gov. www.nh.gov/disability/

Granite State Independent Living

21 Chenell Drive, Concord
Phone: (603) 228-9680
Toll Free: (800) 826-3700
info@gsil.org <http://www.gsil.org>

American Heart Association

Northeast Affiliate 2 Wall Street
Manchester, NH 03101
Phone: (603) 669-5833
Toll Free: (888) 907-6933
http://www.heart.org/HEARTORG/Affiliate/Manchester/NewHampshire/Home_UCM_FDA011_AffiliatePage.jsp

National Kidney Foundation

New England Chapter
85 Astor Ave., Ste 2
Norwood, MA 02062-5040
Toll Free: (800) 542-4001
nkfmarinhvt@kidney.org
www.kidneyhealth.org

Learning Disabilities Association of America

New Hampshire Chapter
P.O. Box 127
Concord, NH 03302-0127
information@nhlda.org
<http://www.nhllda.org/>

American Liver Foundation

New England Chapter
88 Winchester Street
Newton, Massachusetts 02461
Phone: (617) 527-5600
jfluder@liverfoundation.org
www.liverfoundation.org/chapters/newengland/

Lupus Foundation of New England

40 Speen Street, Suite 101
Framingham, MA 01701-1898
Phone: (508) 872-5200
info@lupisne.org

Alliance for the Mentally Ill of NH

(NAMI-NH)
85 North State Street
Concord, NH 03301
Toll Free: (800) 242-6242 (NAMI)
info@naminh.org www.naminh.org

Muscular Dystrophy Association (MDA)

360 Route 101, Suite 5
Bedford, NH 03110
Phone: (603) 471-2722
bedforddistrict@mdausa.org
www.mdausa.org

National Multiple Sclerosis (MS) Society

Greater New England Office 101 A
First Avenue, Suite #6
Waltham, MA 02451
Phone: (800) 344-4867
communications@mam.nmss.org
www.nmss.org

Northeast Health Care Quality Foundation

15 Old Rollinsford Road, Suite 302
Dover, NH 03820-2830
Phone: (603) 749-1641
Toll Free: (800) 772-0151
www.nhcqf.org

Parent Information Center (PIC)

54 Old Suncook Road
Concord, NH 03301
Phone: (603) 224-7005
picinfo@parentinformationcenter.org
www.parentinformationcenter.org

Parent to Parent of New Hampshire

12 Flynn Street
Lebanon, NH 03766
Phone: (800) 698-LINK
p2p@nhsupport.net
www.parenttoparentnh.org

People First Of New Hampshire

4 Park Street, Suite # 304B
Concord, NH 03301
Toll Free: (800) 566-2128
info@peoplefirstofnh.org
<http://www.peoplefirstofnh.org>

NH Speech-Language-Hearing Assn.

(NHSLHA, Inc.)
P.O. Box 1538
Concord, NH 03302-1538
Phone: (603) 228-5949
www.nhslha.org

NH Special Olympics

650 Elm Street
Manchester, NH 03101
Phone: (603) 624-1250
Toll Free: (800) 639-2608
MikeQ@sonh.org www.sonh.org

Services for the Blind and Visually Impaired

Department of Education
21 South Fruit Street, Suite 20
Concord, NH 03301
Phone: (603) 271-3537
Toll Free: (800) 581-6881
Lori.Temple@doe.nh.gov
http://www.education.nh.gov/career/vocational/blind_visu.htm

Spina Bifida Association of Greater NE

219 East Main St. Suite 100 B
Milford, MA 01757
Toll Free: (888) 479-1900
<http://sbagreaterne.org/>

Spina Bifida Clinic

Dartmouth Hitchcock Medical Center
One Medical Center Dr.
Lebanon, NH 03756-0001
Phone: (603)-653-9623(603) 653-9983
www.dhmc.org

National Spinal Cord Injury of America

NH Chapter (NH-NSCIA) Granite State
Independent Living
21 Chenell Drive
Concord, NH 03301
Phone: (603) 228-9680
Toll Free: (800) 826-3700
info@gsil.org www.gsil.org

NH State Veterans Council

275 Chestnut St # 517
Manchester, NH 03101
Phone: (603) 624-9230
Toll Free: (800) 622-9230
www.nh.gov/nhveterans/

Statewide Independent Living Council

Governor's Commission on Disability
57 Regional Drive
Concord, NH 03301
Phone: (603) 271-0476
Toll Free: (800) 852-3405
paula.ninivaggi@nh.gov www.silcnh.org/

VSA Arts NH

PO Box 78
Wentworth NH 03282
Phone: (603) 764-9159
<http://www.vsaartsnh.org/>

VA Medical Center

718 Smyth Road
Manchester, NH 03104
Phone: (603) 624-4366
Toll Free: (800) 892-8384
www.manchester.va.gov/

Veterans Administration

Dept. of Veterans Affairs
Manchester VA Regional Office
Norris Cotton Federal Bldg.
275 Chestnut Street
Manchester, NH 03101
Toll Free: (800) 827-1000
www.vba.va.gov/ro/manchester/

NH Virtual Autism Center

Maintained by NH Council on Autism
Spectrum Disorders
21 South Fruit Street, Suite 22 Concord, NH
info@nhcouncilonasd.org
<http://www.nhvirtualautismcenter.info>

Bureau of Vocational Rehabilitation

Department of Education
21 South Fruit Street, Suite 20
Concord, NH 03301
Tel: (603) 271-3471
Toll Free: (800) 299-1647
<http://education.nh.gov/aboutus/details.htm>

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Training

For EP Community Volunteers

DPH's train-the-trainer offering *Creating Emergency Kits and Plans with People with Disabilities* is designed to prepare people with a working knowledge of emergency preparedness (e.g., Community Emergency Response Teams, Medical Reserve Corps volunteers) to teach staff from disability organizations, family members, and individuals with disabilities to create emergency kits and plans.

Creating Emergency Kits and Plans with People with Disabilities

2015
New Hampshire
Disability & Public
Health Project



University of New Hampshire
Institute on Disability / UCED

Step 1 Prepare the Trainer

DPH Staff conduct an in-person training with community volunteers about working with people with disabilities to create kits and plans. In a 1.5-hour session, trainees are introduced to the topic of disability and encouraged to consider their knowledge of emergency preparedness through a disability lens. Copies of the handbook are disseminated and the curriculum is demonstrated.

Step 2 Conduct the Training

Trainees use the handbook to present a one-hour training that teaches staff from disability organizations and/or people with disabilities to create personalized preparedness kits and plans. The curriculum features activities and exercises to engage the audience in the learning experience.

To Learn More or Schedule a Train-the-Trainer

If you would like more information, have a group you would like us to visit, or would like to discuss hosting a train-the-trainer in your region, please contact the DPH staff at dph.iod@unh.edu. Visit the DPH website for additional emergency preparedness resources:

www.nhdisabilityhealth.org/ep

- ❖ C-Mist Personal Planning Tool
- ❖ Medication and contact information forms
- ❖ Stay Kit/ Go Bag checklists
- ❖ Resources for emergency personnel
- ❖ State and national resources

For First Responders

In any emergency situation, a first responder may need to assist a person with a disability. Many resources are available for first responders to learn more about assisting individuals with different types of disabilities. Listed below are some sites and references that offer materials and information for first responders.

Tips for First Responders, 5th Edition

<http://cdd.unm.edu/dhpd/pdfs/FifthEditionTipsSheet.pdf>

The 5th edition of *Tips for First Responders* was created at the University of New Mexico's Center for Development and Disability. These short, easy-to-understand tip sheets provide guidance for assisting people with a wide spectrum of abilities in emergency situations.

Functional Needs of People with Disabilities; A Guide for Emergency Managers, Planners, and Responders

<http://www.nod.org/assets/downloads/Guide-Emergency-Planners.html>

The National Organization on Disability's *Guide for Emergency Managers, Planners, and Responders* highlights key issues regarding disability and preparedness. The guide aims to support and consider the inclusion and insights of people with disabilities in emergency planning before, during, and after a disaster.

Do No Harm: Developmental Disabilities Awareness Training

<http://www3.uch.edu/Videos/DevDisabilitiesAwarenessTraining/player.html>

This one-hour online training session was developed for first responders by the State University of New Jersey Department of Health and Senior Services. The training is highly interactive and informative, guiding you through basic information about developmental disabilities and how to quickly identify individuals with developmental disabilities. The training concludes with a series of videos and guidelines on how to interact appropriately and safely with people with developmental disabilities in various emergency situations.

Including People with Disabilities & Others with Access & Functional Needs in Disaster Operations

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=IS-368>

FEMA's interactive web-based course takes 1 hour and 40 minutes to complete. The course aims to increase the awareness and understanding of the need for the full inclusion of people with disabilities and others with access and functional needs in disaster facilities and activities.

References

- ¹Hahn, J.E., Smart, C., & Benes, C. (2013). *Responsive Practice: Providing Health Care and Screening to Individuals with Disabilities*. Durham, NH: Institute on Disability, University of New Hampshire.
- ²New Hampshire Disability and Public Health project. (2013). *New Hampshire Disability and Public Health Needs Assessment*. Durham, NH: Institute on Disability, University of New Hampshire.
- ³New Hampshire Disability and Public Health project. (2013). *Creating Emergency Kits and Plans with People with Disabilities: Train the Trainer Handbook*. Durham, NH: Institute on Disability, University of New Hampshire.
- ⁴Centers for Disease Control and Prevention (CDC). *Communicating With and About People with Disabilities*. Retrieved May 2014 from http://www.cdc.gov/ncbddd/disabilityandhealth/pdf/DisabilityPoster_Photos.pdf.
- ⁵United Spinal Association (2011). *Disability Etiquette: Tips on Interacting with People with Disabilities*. Retrieved Sept. 2013 from <http://www.unitedspinal.org/pdf/DisabilityEtiquette.pdf>.
- ⁶National Down Syndrome Society. (n.d.). *Aging and Down Syndrome: A Health & Well-Being Guidebook*. Retrieved Oct. 2013 from <http://www.ndss.org/Resources/Publications/Printed-Materials/>.
- ⁷Kailes, J. I., & Enders, A. (2007). Moving beyond ‘special needs’: A function-based framework for emergency management and planning. *Journal of Disability Policy Studies*, 17(4), 230–237.
- ⁸Purdy, B. (n.d.). *C-MIST: A Function Based Framework for Emergency Planning*. Retrieved Sept. 2013 from <http://www.freetobe.ca/resources/pdf/C-MISTforEmergencyPlanning.pdf>.
- ⁹U.S. Department of Justice, Civil Rights Division. (2009). *Title II Checklist for Emergency Management*. ADA Best Practices Tool Kit for State and Local Governments. Retrieved March 2014 from <http://www.ada.gov/pcatoolkit/chap7emergencymgmtadd1.htm>.
- ¹⁰U.S. Department of Justice, Civil Rights Division, Disability Rights Section. (2009). *Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities*. An ADA Guide for Local Governments. Retrieved March 2014 from <http://www.ada.gov/emerpreguideprt.pdf>.
- ¹¹Kailes, J.I. (2012). *Effectively Including People with Disabilities in Policy and Advisory Groups*, Edition 2, 2012, published and distributed by the Harris Family Center for Disability and Health Policy, <http://www.hfcdhp.org>.

Resources

“A Guide for Including People with Disabilities in Disaster Preparedness Planning,” developed by the Connecticut Developmental Disabilities Network to assist people involved in preparedness planning at the municipal and regional levels.

http://www.uconnuccdd.org/pdfs/resources/a_guide_for_disaster_planning.pdf

“Accessible Information Exchange: Meeting on a Level Playing Field,” a resource from the United States Department of Justice Civil Rights Division to help plan and organize accessible meetings and present accessible meeting content.

www.ada.gov/business/accessiblemtg.htm

“ADA and Emergency Shelters: Access for All in Emergencies and Disasters,” provides additional tips and information about improving the accessibility of shelters.

<http://www.ada.gov/pcatoolkit/chap7shelterprog.htm>

“ADA Checklist for Emergency Shelters” from the United States Department of Justice Civil Rights Division, provides information about accessible surveys, offering a checklist to assess shelter accessibility that highlights typical issues and suggests temporary solutions.

<http://www.ada.gov/pcatoolkit/chap7shelterchk.htm>

“Checklist for General Effective Communication,” a resource from the United States Department of Justice Civil Rights Division for state or local governments to assess compliance with general effective communication requirements.

www.ada.gov/pcatoolkit/chap3chklist.htm

“Communication with Vulnerable Populations: A Transportation and Emergency Management Toolkit.” This toolkit from the Federal Transit Administration describes how to reach vulnerable populations regarding their transportation options in emergencies.

http://onlinepubs.trb.org/onlinepubs/tcrp/tcrp_rpt_150.pdf

Disability and Public Health (DPH) project provides resources for people with disabilities and emergency personnel. Electronic copies of the materials included in the TA packet can be found on the DPH website.

<http://nhdisabilityhealth.org/ep>

“Do No Harm: Developmental Disabilities Awareness Training” is a one-hour online training session for first responders, developed by the State University of New Jersey Department of Health and Senior Services.

<http://www3.uch.edu/Videos/DevDisabilitiesAwarenessTraining/player.html>

“Eat Smart Meet Smart,” a tip sheet from California’s Department of Health and Human Services, provides useful information about how to plan and host healthy meetings, events, and conferences, focusing on accommodating food allergies or dietary restrictions.

<http://www.hss.gov.yk.ca/pdf/dietaryrestrictions.pdf>

“Effectively Including People with Disabilities in Policy and Advisory Groups,” a resource from June Isaacson Kailes, includes tips and planning checklists to assist with including people with disabilities as contributors and collaborators.

www.jik.com/Effectively-Including-People.pdf

“Functional Needs of People with Disabilities; A Guide for Emergency Managers, Planners, and Responders” highlights key issues regarding disability and preparedness to support the inclusion of people with disabilities in emergency planning.

<http://www.nod.org/assets/downloads/Guide-Emergency-Planners.html>

“Get Ready Materials” from the American Public Health Association (APHA) are available to download as a PDF or read text, listened to as an audio recording, and watched in American Sign Language.

<http://www.getreadyforflu.org/disabilities.htm>

“Including People with Disabilities & Others with Access & Functional Needs in Disaster Operations” is an interactive web-based course that aims to increase the awareness and understanding of the need for full inclusion of people with disabilities in disaster facilities and activities.

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=IS-368>

“Learning C-MIST: Helping Individuals with Disabilities Create Emergency Preparedness Plans,” prepared by the BC Coalition of People with Disabilities, supports the creation of personal emergency preparedness plans for people with disabilities using the C-MIST framework.

<http://www.bccpd.bc.ca/docs/learningcmist.pdf>

“Moving beyond ‘special needs’: A function-based framework for emergency management and planning,” written by June Isaacson Kailes and Alexandra Enders, describes the C-MIST functional needs framework and also proposed new approaches to functional support and leadership.

<http://www.jik.com/KailesEndersbeyond.pdf>

“New Hampshire Disability and Public Health Needs Assessment,” a publication of the New Hampshire Disability and Public Health (DPH) project, stitches data snapshots together from several sources, providing a broader and more comprehensive view of people with disabilities in NH.

<http://nhdisabilityhealth.org/data>

“Producing Emergency Plans, A Guide for All-Hazard Emergency Operations Planning for State, Territorial, Local, and Tribal Governments.” This comprehensive guide from the Federal Emergency Management Agency (FEMA) assists state and local Government emergency management organizations to produce Emergency Operation Plans (EOPs).

<http://training.fema.gov/EMIWeb/edu/docs/cgo/Week%203%20-%20Producing%20Emergency%20Plans.pdf>

“Tips for First Responders, 5th Edition” was created at the University of New Mexico’s Center for Development and Disability. These short tip sheets provide guidance for assisting people with a wide spectrum of abilities in emergency situations.

<http://cdd.unm.edu/dhpd/pdfs/FifthEditionTipsSheet.pdf>

Town of Stoddard, NH, a sample from the local Emergency Operations Plan of ESF-9, Search and Rescue.

http://www.stoddardnh.org/files/esf_9srch_rescue.pdf

“What is Universal Design?” Defines and describes the concept of universal design, and includes many examples and resources of universally designed products and environments.

http://www.universaldesign.com/index.php?option=com_content&view=article&id=327:what-is-universal-design&catid=2196:universal-design&Itemid=113