

PACIFIC ADA CENTER

ADA National Network/FEMA Webinar Series: "EMERGENCY MANAGEMENT AND PREPAREDNESS: INCLUDING PEOPLE WITH DISABILITIES"

"FEMA PROMISING PRACTICE: INCLUDING EMERGENCY MANAGEMENT IN INDEPENDENT LIVING CENTERS TO MAXIMIZE POTENTIAL FOR WHOLE COMMUNITY PREPAREDNESS"

Dr. Patricia Yeager & Nick DeSutter

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>> Lewis Kraus: Welcome to the Emergency Management and Preparedness Inclusion of Persons with Disabilities Webinar Series. I'm Lewis Kraus from the Pacific ADA Center, your moderator. This series of webinars is brought to you by the Pacific ADA Center as a collaborative effort between the ADA National Network and FEMA's Office of Disability Integration Coordination. The ADA National Network is made up of 10 regional centers that are federally funded to provide training, technical assistance and other information as needed from the Americans with Disabilities Act. You can reach your regional ADA Center by dialing 1-800-949-4232.

This series will share issues and promising practices in emergency management inclusive of people with disabilities and others with access and functional needs. The webinars will provide an exciting opportunity for emergency managers, people with disabilities, and others with access and functional needs, first responders, planners, community organizations, and other community partners to exchange knowledge and information on promising practices in inclusive emergency preparedness and management for the whole community. This year's topics will cover emergency preparedness and disaster response, recovery and mitigation, as well as accessibility and reasonable accommodation issues under the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, the ADA, and other relevant laws.

The series will alternate monthly between the ADA Network Learning Sessions and FEMA Promising Practices. We encourage you to review the series website and familiarize yourself with the full array of sessions available in the series at www.adapresentations.org/schedule.php. These monthly webinars will occur on the second Thursday of the month at 2:30 eastern. By being here you are on the list to receive notices for future webinars in this series. The notices go out two to three weeks before the next webinar and open that webinar to registration.

We are very excited to have FEMA's ODIC as a partner in these webinars. Today's session is the first of the FEMA promising practices. Before we begin, I want to introduce the Director of FEMA's Office of Disability Inclusion and Coordination for a few words. Marcie?

>> Marcie Roth: Thank you, Lewis. Welcome, everyone, to the first of our webinars on promising practices in inclusive emergency management. We're thrilled to be collaborating with the ADA National Network on six webinars. Thank you for the submitted proposals. We received dozens and we are excited to see progress across the country. I'm not just planning for people with disabilities and others with access and functional needs, but rather many promising examples of partnerships with people, people who have disabilities and engaging the advocacy and community services leaders who are

invested in inclusive practices in communities across the country. The webinars highlight practices that will illuminate effective communication access and modifications to achieve equal access before, during, and after disasters for the whole community.

In 2010 and 2011 FEMA offered getting real conferences that identify many promising practices. Since then, our ability to host national conferences has been more limited despite the many advancements underway across the country. So when the ADA National Network invited us to join with them in seeking and sharing promising practices, this webinar series was established. The intent to continue the series and will once again be seeking proposals after the new year. Please share your promising practices with us each time.

I want to give a special thanks to Lewis Kraus and Jay Jones and Jacob for their hard work on getting the series off the ground and launched today. I want to thank you all for all of the work that you're doing every day to prepare for, protect against, respond to, recover from, and mitigate the hazards we all may face and wish to expressly address the needs of the whole community.

And now let me say that I've collaborated with Patricia Yeager for enough years to not say how many, a lot of them, and I am very excited for her and Nick to share the promising practices from their hard work on disability inclusive preparedness, response, recovery and mitigation since they've had quite a bit of practice.

I'm going to turn this back over to Lewis. Again, thank you all very much for joining us.

>> Lewis Kraus: Thanks, Marcie. Before we get to Patricia and Nick, I wanted to introduce and review some of the webinar features platform before we begin the session today.

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All right. Individuals joining us today -- actually, let's talk about today's speakers. Today's talk is entitled Including emergency management, including emergency preparedness and disability organizations. Without cooperative approaches, people with disabilities will be greatly impacted during all phases of disaster. This presentation will engage audiences on how offices of emergency management can work with disability organizations to increase inclusive emergency management practices within local communities. Additionally, this session will explore innovative ways disability organizations can organize to provide resources toward disaster systems. Our speakers today are Dr. Patricia Yeager and Nick DeSutter.

Patricia is the Chief Executive Officer for the Independence Center in Colorado Springs. She has more than 30 years of experience with the independent living movement and efforts to provide accessibility for people with disabilities. Patricia has championed change in her community by ensuring

the discussion of preparedness and safety for people with disabilities is included in emergency planning and response efforts.

Nick DeSutter is the Independence Center's Emergency Program Manager. He served eight years in the U.S. Army and brings an emergency management perspective to the disability community. In his role, he provides emergency training workshops and works in partnership with city and county offices of emergency management to ensure efforts include systems for people with disabilities.

I am going to turn it over to Patricia and Nick. Here you go.

>> **Nick DeSutter:** Thanks for joining us today. We're excited about sharing some of the experiences we've had over the past couple of years and just outlining our program nested within our independence living center. With that we're going to move on to slide two.

So why does an Independent Living Center have an Emergency Preparedness Program? These five statements on here outline that. I'll highlight just a couple. Historically, persons with disabilities and others with access and functional needs are greatly impacted by emergencies and disasters. So we've seen that historically in Hurricane Katrina and other natural disasters globally. Since Independent Living Centers know their community, specifically people with disabilities, there's really no better fit for an organization to align the effort with that. So that's with that. So these reasons are the primary reasons we believe that Independent Living Center should look at taking this mission on. I don't know, Patricia, if you have anything you would like to add to that.

>> **Dr. Patricia Yeager:** This is an advocacy issue just like buses, just like attendant care. It needs to be approached somewhat in the same way. Independent Living Centers are going to need to meet emergency managers and learn their language and be a channel to connect emergency managers, first responders with individuals. So we play a critical role in this. I'm not sure that we have thought so much about that in the past. So we think that with the increasing complexity of emergency management, climate change, all of those things that are happening, the centers have a stake and an obligation to help the community, the OEM folks, Office of Emergency Management folks, and individuals, two distinct groups that have responsibilities here. We need to get them all planning and thinking ahead.

>> **Nick DeSutter:** We're going to move on to the next slide. So this slide represents acknowledging that there's a problem.

We have identified and we are at the point where we understand the problem but if there's two different worlds. So each arrow on this slide represents -- the left-hand arrow represents the emergency management community and then the right-hand arrow represents the disability community or an Independent Living Center's perspective. And really, at the end of the day, we need some sort of system to bridge the cultural differences between those two communities. One is not more right than the other. It's just a different way of communicating.

So I've found in my position that I'm oftentimes in the middle where that black arrow that has some green around it, and I provide that to communication and the expectation management piece, which is important because everyone needs to keep their doors open to overcome this complex problem.

We'll move on from there. What the disability organizations bring to the table? Recognizing that many of you online already understand what they bring to the table, but there may be folks that don't, let's just try to -- we're going to quickly review what it is, the different kinds of disability organizations can bring to the table, ways in which persons with disabilities communicate.

As Lewis was articulating before we started, communication access realtime, and making sure that that's included when we do public broadcasts, ASL interpreters, and things like that. We know how different types of people with disabilities communicate effectively and what sort of Assistive Technology there is out there that can support that.

What resources persons with disabilities use. Again, it goes back to Assistive Technology and all kinds of different resources in a community.

Another highlight are transportation systems used by persons with disabilities. Oftentimes people with disabilities rely upon public transportation. It can be overlooked. Independent Living Centers and other disability organizations are experts on that. In fact, in our building right now, we probably have five or six maps that are distributed throughout the building that show those transportation routes, the hours of service, and things of that nature.

How persons with disabilities maintain independence, and that's at the core of what Independent Living Centers do, and the advocates' efforts that we try to provide.

>> Dr. Patricia Yeager: I know that we have a number of emergency management folks on the line. The disability advocates will know this, but we all know that oftentimes people who are able-bodied come with the best intentions but they really don't have an understanding of what it is we need and

often overplan or make assumptions about we need to be taken care of, that sort of thing. It ratchets up the expense when you take that approach. So I want to really promote that we are a resource, Independent Living Centers, disability organizations, and consumers are a resource to management folks, emergency management folks to create a viable, workable plan that doesn't go overboard. So you really need the disability perspective around the table when you're making that plan. And that's a huge plus for what we bring to the table.

How I got into this is kind of an interesting story. I left California in 2005 but prior to that we had begun to have major fires, San Bernardino comes to mind. And I had had some experience in seeing all of the issues that were happening. When I moved to Colorado, I did some educational work and happened to land at the center in Colorado Springs.

In 2012, the Waldo Canyon Fire started. I would say that we were not very well prepared. That was the experience that I saw. I had a number of messages on my phone from consumers saying we don't know what to do; what are we supposed to do; there's no accessible beds; there's nothing -- we don't know what to do. So we saw that the plan wasn't well set up, wasn't well executed not only for people with disabilities but for the whole community. Up until the Waldo Canyon Fire, we really hadn't thought much. We didn't know where to go, how did we get out of our homes, the emergency routes for able-bodied people let alone for people with disabilities.

I'm going to tell the story in a minute, but towards this slide we had an after action meeting. This is a term of art in the emergency management field where after an emergency you regroup and say, ok, what worked and what didn't work. It was contentious with the city of Colorado Springs and with the county so we had our own after-action report. The ADA Rocky Mountain ADA Center assisted with this. We were partners. And we asked people who had problems in the fire to come and tell us what those issues were. And we did our own after action report.

We found that there was a complete lack of multifaceted communication during emergency broadcast. We had significant issues and shelters. We had an old high school that was used. Of course, it had stairs but had some accessible areas; no accessible showers. At one point meals were being provided upstairs. It was just a bit chaotic to say the least.

Transportation was an issue, mobility was an issue. We had a first responder ask someone to leave their wheelchair behind. She would not do that. And so that was a flash point at that point. Also we had deaf people living there. Manitou Springs evacuated early on. We have anecdotal evidence that there were at least two people who were deaf left at home. They had no idea what was going on. It took them

a while to figure out. One heard it from her family member in another state. The other person happened to text somebody and say where is everyone and find out that, oh, you've been evacuated. It doesn't work.

So those were major issues. And, again, both families and individuals really hadn't planned. They hadn't thought about, well, what am I going to do if I can't get out? So that was the shout across the bow that woke us up to say we have to do something about this.

I'm going to step back a little bit and tell the story to give you a timeline here. In March -- not March. In October of 2011, David Schad from FEMA, Disability Emergency Integration Specialist, contacted me and said let's talk about emergency prep in Colorado Springs. He was having some trouble talking to the city and county folks. It's important to find out who has your plan and if our area, the county, has a major plan. The city has its own plan for within the county. So we talked. We did a training. I knew from my experience in California that this was an issue we needed to address.

In March 2012, I invited the leaders of the Emergency Management folks in town. We had a very nice meeting. Yes, they have a plan. And, no, they probably wouldn't share it. Rest assured that it was going to be fine. I said, well, can we help with training; can we do something? And we did help train volunteers, medical volunteers, in the shelters.

>> **Nick DeSutter:** Could you talk a little bit about what they were training for?

>> **Dr. Patricia Yeager:** That training was particularly interesting because it was mostly medical people who are tasked with staffing the shelters. I had a panel of about 13 people with various disabilities including mental health, deafness, blindness, one with a dog, people in wheelchairs, people with dementia symptoms; all of those kinds of things. They talked about what they would like to see in the shelter. Keep in mind, none of us had ever been in a shelter under those circumstances. But we talked about how it would be helpful to have a quiet room. What about our aids, our personal aids? So we had a very good conversation. And people -- I think it humanized us. It made us more feel like -- they felt like, oh, these are real people with real issues and we can deal with this. So that was the training. It was very well received. That was March.

In June of that year the Waldo Canyon Fire broke out and chaos sort of ensued for people with disabilities, really for everyone. And after that I sent a letter to the city and county. It was a California-style letter. Those of you from California will know that we have a special breed of advocacy

that probably didn't go very well in Colorado Springs. But nonetheless it did get everyone's attention. And people began to focus on the issue; became a pretty public issue.

There were issues with my boards who knew about the letter had seen the letter, but didn't realize some of the implications that might come from that. In our community it's very charity-minded. We take care of our own. Sometimes the back side of that is and you make do with what we have, which was not good enough, in my opinion. I felt like we needed to be involved. So that started the discussion in rather a rocky way.

I offered the city and county some \$30,000 for them to match, each, and hire their own coordinator to do this. They declined to do that. So several months later we then had the after action report. We distributed the after action report. I'm pleased to say that most everyone involved came to that meeting, the city, Red Cross, all of those folks –

>> **Nick DeSutter:** El Paso County attended.

>> **Dr. Patricia Yeager:** El Paso County did not attend. That's partly due to my rocky start with the letter that they were unhappy about.

We delivered a report. You can find that on the independence Center website under emergency prep.

Interestingly enough, several months later, the city and county both issued their after action report. And the city had one recommendation, one mention in terms of communication but not anything else. And I believe the county really didn't take it -- didn't add anything for people with disabilities. So clearly we had our work cut out for us.

I know we have people from the county and the city on the call. And I do want to say that they have done a terrific job in terms of coming around. But I'm just talking about the process that it took to get it there.

Because we had so many problems with the TV stations getting information out to the Deaf and Hard of Hearing community, we brought those two communities together in our center and I created a letter that talked about what their responsibilities were under the FCC. We had the station managers come and meet with us. It was a great meeting because we had it in a looped room so that people with hearing aids could hear it. And we had an interpreter. It was one of the first times that those

two communities in Colorado Springs had actually sat down and talked to each other.

We had a great meeting with all five TV stations, managers, learned a lot about how they do their captioning. In our community we are not a top 25 media community so we don't have requirements for live captioning. The FCC does say to everyone who uses the text editor in news that when there is a critical announcement, you must provide it simultaneously whether you have live captioning or not. And that was a challenge for our TV station.

I think it was really helpful for them to see that there are real people in the community who are deaf and engaged and who are hard of hearing and engaged. And I have to say, we did it. The TV stations were Johnny-on-the-spot with even weather changes after that point in time. It also helped that we knew when their certification for broadcast, for being a broadcast station, was coming up so that we could make comments if they did not change their ways. But I'm tickled to say that they were fabulous.

So, after that I tried to meet with the county commissioners to say could I please see the plan, could we be involved in the development of the plan, and was told wait like everyone else. Well, that didn't sit very well. And then fast forward a couple of months and we had the Black Forest Fire which was an entirely different animal. The TV stations were Johnny-on-the-spot. They had terrific captioning. And the Sheriff's office engaged interpreters. So we had interpreters at every media announcement. We had some problems with the interpreters being included in the camera when the camera would move, but these are things that we know we need -- we're working on with the media to remember to keep the interpreter in the shot.

The high school that was used was much better. It was a brand new high school. For sheltering. So we had showers that were accessible. Red Cross was very much prepared to provide all kinds of equipment. We had cots that were accessible. They had quiet rooms. It was really -- practice makes perfect. They really did a great job coming back around.

But still we couldn't see the plan. And at that point I decided that it would be helpful if we just hired our own emergency manager here. If you can't beat them, join them. So remember our pictures, you will know that -- you might think that Nick looks like an emergency manager, and he does talk like one, and we decided to engage them in that respect. So I stepped back. Clearly as a lightning rod, I needed to step back. Nick took over and began to forge a relationship because he talked their language.

And I can't stress how important it is to understand their language. They have more acronyms than Carter has liver pills. I have never seen anything like it and you're going to see a list of those at the

end of our slides. But he knew their acronyms and he knew people with disabilities and he worked with the Wounded Warriors program here. He was very comfortable with all of us. Not to say we still didn't teach him things but he was comfortable. That's the piece we're trying to get to where people -- the first responders are comfortable with people with disabilities and that only comes through contact. And Nick was able to do that.

We set aside money. I'll talk about that a little bit later. We actually advertised in the newspaper, if you can believe it. And Nick responded. A couple of other people responded. And that's how we found him. We spent quite a bit of time teaching him about disability issues in emergency management. He spent time getting to know the local people here on the ground and that you have to build relationships.

I do want to mention, my board -- I think they were a little naive about this when I presented the letter that sort of was the firestorm. They read it and said, oh, great, let's send it. Eventually I think we had one member resign over it. It was published in the paper, much to my dismay. And a lot of people started talking about it. And my board members got some pushback from the community. Wasn't it good enough? Why can't they go to an assisted living facility? What's wrong with going to an assisted living facility?

It was very interesting. We had a number of comments about conversations. My board took me into an executive session to say, "What did we do." We grew with the board, we bonded, and today when we do board recruitment, the board members uniformly point to this as one of the best things that we've done.

So, you have to brave the firestorm and be passionate about this and your board will come along. But you do need to let them know because this is going to touch a nerve. We want to take care of everyone and when we're told we don't, it really is upsetting to people who serve. You have to be careful about how you talk about that.

We did present at several emergency prep conferences around the community and around the region. I spoke to the governor and asked him -- told him we had a problem. I haven't been able to get the state onboard yet but we're working on that. So that's sort of the story of how this happened and how we happened to get Nick.

So during the Black Forest Fire, getting back to the slides, sign language interpreters were available, live captioning was provided, shelters were fully accessible. And I think our community of people with disabilities were much more -- ok, I got to get a plan, and I at least have some idea of

what's going to happen here.

Part of what Nick does for us is provides some training to consumers. We'll talk about that. Because we believe as emergency managers will tell you, this isn't just our problem. This is a problem of consumers as well. You must have a plan. And you must have a backup plan times two or three to get through this.

>> **Nick DeSutter:** So really this next slide, "So what is the point?" The observed outcome from this, from what Patricia just articulated, is that it was really important for a disability organization or an Independent Living Center to engage their community to expose that there may be some gaps and to move forward from that perspective.

So this slide where it says discussion, one of the things that Lewis had asked us to do is to kind of reflect upon - I've been with the Independent Center now for 14, 15 months -- and to kind of reflect back and forth between one another on how our perspectives have changed, some of the challenges we face. And they're natural challenges. And then the opportunities that we see. And the opportunity piece is the most exciting portion of this.

So with that I'm just going to -- so, Patricia, think back over the past few years you've been involved with the advocacy efforts on this. Can you think of some ways and express how maybe your perspective has changed at all?

>> **Dr. Patricia Yeager:** Well, I think -- I could have handled this a little bit differently in terms of not coming across so strongly. But on the other hand, I think we needed a major wake-up call and maybe that was the way to do it. I do think that emergency managers -- I've come to understand that they just really have no clue. We present as such a complex population. And all of us who are working in the disability field, we're used to dealing with deaf people, with blind people, with people who have multiple needs and it's not an issue. But for emergency managers, it is a huge -- it's just overwhelming. I mean, we've got to move masses of people. And these are all individuals. How do we accommodate that?

I think it's very easy to stick your head in the sand. And I have come to appreciate that -- how helpful we can be. I've come to appreciate that we need to know the language. David Schad told me that. And I didn't want to go through the trainings on the FEMA side. You really need to have people engaged that understand the language. And I think -- advocates, we need to have an understanding of the culture of emergency management. It's very different. In an emergency, it's very top down. It's very

centralized. And that's not how we're used to dealing with it. So that will take some adjustment.

>> Nick DeSutter: And from my perspective, the biggest takeaway that I've had, and my background is primarily military so it's not exactly first response but it is -- it is a similar mindset in bringing up, so to speak.

My biggest takeaway is if we use people with disabilities and others with access and functional needs as the planning scenario and the exercise scenario, I think the greater population will be better and best served, if that makes sense, because we're thinking about the needs of the whole community when we do that. So that's really -- you can kind of understand it in theory, but when you actually sit down and think through it for a year at a time, it really does go back to that.

And some of the challenges -- I don't think there's any doubt that there are certainly cultural challenges between disability organizations and other non-governmental organizations. It's no different than any other problem set that involves different missions. But the key with all of this is that folks need to be committed to keeping the door open, remain open-minded, and trying to find that center point where everything can merge together and overcome with solutions.

And we'll get into some of the opportunities as we move through this.

You have any major –

>> Dr. Patricia Yeager: The one challenge, I would say, is that I really wanted the city and the county to hire someone like Nick so that he was embedded with them. When he's embedded with us, outside the Independent Living Center, he has no authority. He has no way to say you must do this. So he has to play nice with everyone. So we come from not a position of authority but from a position of knowledge. We have knowledge to share with you.

Actually, I think it's worked out very well. Maybe better than it would have been had he been put in place in the bureaucracy of the city and the county.

>> Nick DeSutter: I would agree with that, Patricia. I think the time that I spent here employed at this center is crucial for the real conceptualization of the disability community. For one small example, when I walk down the streets now, I notice curb cuts. 24 months ago I didn't think twice about that and why that's important for people who use wheelchairs to navigate and have their independence in the

community. And I could go on and on with examples like that. But that really does sum up how my perspective has changed. I think that that will be important now and for the future of my career. We'll move on here.

>> **Nick DeSutter:** Since we have some people who may not understand what Independent Living Centers are -- the rest of you can take a little break here. I'm going to just run through the core service that we provide so that emergency management folks have an understanding of what we can bring.

So, Independent Living Centers are governed and managed and staffed by a majority of people with a wide variety of disabilities. Our goal is to help people create the life that they want to live. We have five services now, usually information and referral comes first. If you have a disability, you want to know how do I do this, where do I go for the right doctor and offices accessible and so forth. And we have that information.

We have peer support. People with disabilities are often devalued and thought less of. It's called learned oppression. Because most of us have disabilities and we hopefully have worked through the notion that just because society thinks we can't do things doesn't mean that it's not true. We have to show how that isn't true. So peer support is often very helpful with that.

We do independent living skills training which could be anything from riding a bus, managing your money, what kind of technology should I be using, whatever the consumer presents with. And if we don't have the knowledge, we will find it in the community.

My favorite, of course, is advocacy, individuals helping people who might have trouble with their landlord because they have a service dog and systems advocacy, which is what we're engaged in right now. We're changing the system of emergency management that includes people with disabilities.

And lastly, this is the newest one, we're working on community transitions, moving people out of the nursing home, keeping people -- preventing them from going into a nursing home or institution, and working with high school kids that are transitioning from school to work. So we have quite a bit of knowledge about all facets of disabilities.

So, now that's a commercial for independent living. We'll go back to the regular -- to the slide show.

Probably most of you are saying, well, how the heck did you afford to do this? I'm going to tell you how we did it last. First of all, I want to say to everyone, emergency managers -- I wish we had

governors' offices on here. You will need money to do this. You will need to hire -- in our opinion, you will need to hire people with disabilities, hopefully, to help you include the community and understand how to get us in the plan and what actually to put in the plan.

I would suggest that you look at a number of foundations like innovative projects. And this is certainly one. So nonprofit funding is available through grants. I'm going to empower each and every one of you to go to your governor's office and ask him, tell him, however you communicate with him or her. But FEMA had 97 funding streams that go -- various numbers go to the state. In each state FEMA cannot tell them how to spend it. But they list suggestions. And certainly -- including people with disabilities. It's one of their suggestions.

But all of us have to go to the governor, go to your state, Homeland Security; you need to figure out where it is that FEMA money comes in and you need to readjust their priorities. As advocates, we've done this before. We know how to readjust people's priorities. They need to be putting some FEMA money into a system that allows people with disabilities to actively engage in planning and participating in emergency situations.

So go forward and press on the FEMA funds with your state because that is where you will find some money. It will take bringing up lawsuits. It will take threatening. But I really encourage you to do that.

How we have done this, the Independence Center has a home health component. We do both skilled -- home health and we have home and community-based services. The program revenue from these services allow us pretty much to fund the rest of the Independence Living Center and funds Nick's position as well. So those are the three ways that I can tell you about funding opportunities.

>> Nick DeSutter: The next portion of this -- we're going to speed through this because we're down to around nine minutes and then we'll open the chat up for questions. It's just kind of an overview of what my day-to-day functions are and what I was hired to do here at the Independence Center in Colorado Springs. So the first one is integrated into local emergency management community. We'll get into more detail on some follow-up slides.

Build a community advisory group. So the community advisory group is a group of people who live with various disabilities that are integrated into the emergency planning and exercise portions of emergency management. And they can also be used as a sounding block for all sorts of things.

And then, three, conduct preparedness trainings for and with people with disabilities. That's the real objective is to do trainings with people with disabilities. And then they are empowered to also train other people. So train the trainer kind of concept.

So line of effort one, as mentioned, understand the capacity role of the local offices of emergency management. So what that really means is understand that your local offices of emergency management are generally small in staff and have limited resources for various reasons. Some of the planning and resources that they will need or that the community will need will have to come from outside of government entities. So that's important to understand.

Gain stakeholders' trust and serve as a community resource. The most important word is trust. One of the areas that I find most neat about Patricia's strategy to tackle this on is that instead of utilizing lawsuits and some of those tactics, what she has done is taken on the project herself and provided a resource for the community. I think it's working very well. It doesn't mean we're done and we don't have a long way to go, but the lines of communication are open. We are establishing trust between various organizations. And it's helping to provide solutions.

I'll go back to establish the diverse working groups, focus on identifying and negotiating systems change. And that's really what all of this is about, negotiating the resources and how the resources are allocated and making sure that those resources are fairly allocated. It's also a consideration. And it goes back to one of the previous slides. We don't know what we don't know. So it's really important to disability organizations to raise the question: Hey, are we thinking about people with disabilities and others with access and functional needs?

So that's the core function one, nesting with emergency management community, understanding their perspective, and then cross-communicating that with the disability community.

Line of effort two is to build a community advisory group. I mentioned this before. This can be challenging. Sometimes folks with disabilities may not fully want to be engaged in this process but it's really important to go after it hard and strong and make sure they're included even if there's some trial and error involved.

We are fortunate right now that we have our own five folks who live with various disabilities. Some of them are invisible. Some of them are visible disabilities that are very much committed to our community advisor group near El Paso County in Colorado Springs. But it does take some energy to make sure that those folks are trained on some baseline emergency management functions and that they're committed to showing up to the table.

And then line three is to conduct preparedness trainings for and with people with disabilities. Right now we're on about a quarterly basis on conducting these workshops. We serve a five-county area. So one of our counties obviously is more urban. And then our other counties are more rural. There's different dynamics in those communities obviously. And there's also different disability dynamics in those communities. So tweaking a preparedness training program for those folks that live out in those communities requires some thought and energy.

It's a good idea to look how you can expand the training capacity by partnering with organizations such as the American Red Cross. We've been fortunate here to have a really good working relationship with our regional Red Cross partners. So we're looking at unique ways right now that we can do collaborative trainings to train people with disabilities in the greater population, for that matter.

So lessons learned. I'll go to the plans lesson learned. From my perspective, the disability has a desire to see plans and comprehend those plans. And that makes sense. However, I'm kind of from the school of thought that if we just jump into a plan that has all the right language, it's not necessarily the right place to put our energy. So we at first did that when I came onboard, started looking at plans, how can we change its language. But I think the real approach is to consider this as an evolution and to mass people with disabilities in several of the functions of emergency management and non-governmental organizations do on a day-to-day basis.

For example, exercises are a great place to do that. I have a cool photo coming up here that exemplifies recent efforts in our community to make sure that we have multi-faceted communication and things of that nature. Do you have any lessons learned?

>> Dr. Patricia Yeager: The biggest thing for me is having a person who can speak the language and be a part of them. You were hearing Nick talk about his positive relationship that didn't happen with me. It took somebody else who has the language and has the right approach to be able to create that positive relationship. So really, it's a credit to Nick and his work that this has all happened.

>> Nick DeSutter: That's right. And then I'll also mention that disability organizations and Independent Living Centers, they can be a capacity builder for emergency managers. We have access to grant funds that they may not be able to reach. We were just awarded a rather large grant that's going to help us fund an initiative to build a digital product that shows what an accessible shelter looks like. So that is

some way that we can contribute additionally to educational things and things of that nature.

There's a lot of money throughout that a disability organization can reach out to. If there's some cross dialogue between the disability community and emergency management community, I bet you can serve each other together in that respect.

So program successes. One of the areas that we were fortunate to get involved with -- and I'll let Patricia talk a little bit about -- met needs and what that looked like here at the center. Because we did experience two fires, we had an unmet needs committee here in Colorado Springs, in El Paso County, that brought funds to the table. And we decided to do that as an organization.

>> Dr. Patricia Yeager: The board allocated \$10,000 to come to be a part of the unmet needs organization that each community usually sets up when it has an emergency like this, who had to bring money. But here was where Catholic Charities and a whole group of local folks, community agencies, were meeting together to help people rebuild their homes, you know, rebuild their businesses. They had people come and apply for funding. So we took \$10,000 and went to the table and said we are here to help purchase equipment for people with disabilities who have lost things in the fire. And we can help with housing. And we can help with all of these things. What it did was -- we haven't spent all of it. We spent over half. We bought wheelchairs, hearing aids, helped people find accessible housing, the mostly faith-based groups learned about people with disabilities and learned about our services. And now we are very much a part, I believe --

>> Nick DeSutter: We are.

>> Dr. Patricia Yeager: Of this social response organization to fires. I think you're the chair of the committee here?

>> Nick DeSutter: I used to be the chair of our regional. I'm not anymore though I'm still active.

I would say one of the big takeaways with disability organizations being a part of an unmet needs, yes, it's obviously providing that financial resource, but it's also being that subject matter expert to make sure that we're not skimming over the top of people who might live with disabilities as we're looking at unmet needs. That is a continuous conversation at the table. Between case management and the folks who are represented by other organizations. So that's been a huge success.

>> **Nick DeSutter:** I knew we were successful when Nick brought the entire committee here to the center to meet and most of them had not been in our center and were very interested in all of these things that we offered. So I knew we were on the right road.

>> **Nick DeSutter:** Some other program successes, I'll skim over. Inclusive exercises. We just held a -- the city of Colorado Springs very progressively held a very inclusive exercise a couple of months ago. We already talked about the granting aspect of disability organizations.

>> **Nick DeSutter:** I'm not sure people -- may not understand exercises. Do you want to expand a little bit on that?

>> **Nick DeSutter:** Sure. Actually, I'll expand on exercises on an upcoming photograph that we have coming here.

>> **Dr. Patricia Yeager:** Ok.

>> **Nick DeSutter:** I will just touch bases on -- all of this goes back to establishing sustainable relationships. Patricia pointed out that I skimmed over something. Recently, and to the city's credit, again, Colorado Springs, we hired our first ever ADA coordinator for the city. And one of the areas that I -- and this poor guy pulled in nine different directions to get the city in compliance and do all of those things, but I immediately engaged our new ADA coordinator because I wanted him to be part of the emergency management system. That doesn't mean on a day-to-day basis. That means that when we have a big -- if we have another disaster in our community, that he is positioned and has the relationships pre-established with our local OEM to ensure that he's at the table. So that's what that particular bullet means. I think that's important. I think it may be overlooked sometimes in communities.

With that being said, I also understand that ADA coordinators are not all the same. But this particular ADA coordinator has an understanding of independent living and some of the disability and advocacy efforts that exist in the community and some of those diverse needs.

Ok. So here's the positive photo that I just wanted to highlight. This was following a community exercise where a portion of our city evacuated. The city has accessible communications, both from communication access realtime and an ASL interpreter. We also -- some of the other neat things that

we did, we did a collaborative pre-assessment of the rally point or evacuation site where these community members would evacuate to. So we took a look at some barriers that might exist. Was it perfect? Absolutely not. But the system was pretty good.

I'd also like to mention that we deliberately looked for opportunities to include people with disabilities in both the planning, the execution, and the after action review which will come up with the next week to make sure that we're looking at it not entirely but looking at it from that perspective simultaneous to all the other perspectives.

>> **Dr. Patricia Yeager:** Let me describe the slide quickly. This is a picture in a gymnasium, probably a school gymnasium. People are sitting at tables. It's a wide variety. There's a person sitting in a wheelchair who has his hat on the back of his chair. And this is the emergency manager folks are in the front talking about what happened. We have ASL and CART in the room.

>> **Nick DeSutter:** And I was personally at the event. I will just comment that I deliberately observed folks. And a lot of folks really were reading the captioning, the CART service. They really were. It just served as another form for people to understand what was being said.

>> **Dr. Patricia Yeager:** There's a number of seniors in the picture. And seniors don't often know that CART exists or how helpful it will be.

>> **Nick DeSutter:** So we've already hammered a lot of this. We have to wrap this up because we'd like to get to some questions. It's really about understanding that there are differences between language and culture. As long as different organizations are committed to recognizing that difference, I personally believe that we can come up to solutions for this integration problem.

This slide just highlights -- and most notably the first acronym, CART refers to Communication Access Realtime Translation. And then I'm going to move on to the next slide. The emergency management world CART means Community Animal Response Team. So it's the exact same acronym that means two different things. Just to highlight how culturally different we can be but yet at the same time use different language.

So some tools - let's say you're a community who is relatively new to this concept. What are

some things that you can do in your community to advance things and move it forward so that there is better integration and overcome some problems? I would highly recommend requesting FEMA's L917 training. I know that sounds a bit direct, but what that training is about is integrating access and functional needs in the emergency planning.

I'm sure Marcie and her team are almost always involved with that training and they articulate how communities can begin to open that dialogue and move forward. It's a really good tool.

Engage in nearby Center for Independent Living. If you're an emergency manager online, approach your independent living center. If they don't give you positive feedback, feel free to reach out to me and I will try from a different perspective to see if they may be more perceptive to communication and developing from there.

For Independent Living Centers, engage your Offices of Emergency Management. Just begin that conversation and dialogue. You can reach out to the ADA -- to your regional ADA Center or the National ADA Network which Lewis articulated at the beginning. Just set up a meeting. If you don't know where to go, just set something up and open the dialogue. I bet you that you will find someplace to start. There is a lot of stuff to tackle.

And then seek opportunities to cross train. That could be disability etiquette provided by an Independent Living Center or disability organization, or it could be a table-top exercise that your community's having why not invite somebody from a disability community, someone like Patricia, myself, to just come and observe and then give you feedback after the event. That's a good place to start that dialogue.

We're getting close on time. We want to leave ample time for questions. We're going to move forward here these are downloaded to the archives. What looks promising. I do want to just touch on this. We are seeing access and functional needs working groups establish across Colorado. So to me that's really neat. I think as competitive Americans, which we are, we all want to be leading. That's good. Because at the end of the day it doesn't really matter who's accessing -- whose group works best. What matters is that collectively as a nation we're thinking about this and prioritizing it as a need. I won't even go into our aging population. I think everyone's aware of that and why this is so significant.

And then this slide just shows -- this is really directed at the Independent Living Centers who might be online or other disability organizations. I just like to propose the question: What if every Independent Living Center in the nation had an emergency program or a person assigned that task? What that boils down to from an emergency management perspective is there could be Mutual Aid

Agreements between those various Independent Living Centers, which could be -- which means those resources could be flexed in a regional or state disaster and called upon for emergency management. And that's really what this slide is all about.

The basic steps to move forward, you've got to think -- we've talked about all of these things today. Funding. Patricia hammered that. Hiring. You got to hire the right person at your disability organization. You've got to hire somebody who I wouldn't say is perfect by any means but someone who is willing to take a look at the perspective from both sides and kind of negotiate that system's change that Patricia talked about.

A plan to integrate. Don't just run into bringing people with disabilities into meetings. Let's talk about how this looks. What kind of accessible communication we'll need, the location of meeting sites. Is it on transportation route? Things like that we need to think about.

Sustained community relations. Training and exercises with partners. And then continue with the process. This isn't going to change and be the perfect process overnight. It really does evolve.

These are just some references on key community stakeholders and partners that we've identified here in Colorado Springs and El Paso County. It may look different in your community. This is not the only answer. It can get you thinking.

Critical takeaways. I think we've hammered most of the critical takeaways. I think the most overarching is that this does resolve around trust and the willingness to have constructive dialogue.

>> **Dr. Patricia Yeager:** And the right vocabulary. I can't stress that enough. On both sides of the issue you've got to know the vocabulary.

>> **Nick DeSutter:** Ok. These are some tools. This first tool right here is the checklist for integrating people with disabilities and others with access and functional needs. I really like this.

>> **Dr. Patricia Yeager:** June put this together.

>> **Nick DeSutter:** It is a fabulous tool. I will say this for the emergency managers. If you do happen to download this checklist, don't be overwhelmed at first. What you can do is you can take a look at the list

and begin to prioritize and put it into a timeline about what you're going to tackle first and move forward on. It serves as a good opportunity to engage that Independent Living Center, disability organization. Hey, what do you know about this problemset? And so it opens up that dialogue again.

Our individual, our center's Individual Emergency Preparedness Workbook. FEMA's Office of Disability Integration link. American Red Cross, they are a very valuable community resource.

>> **Dr. Patricia Yeager:** The ADA Centers. We want to highlight Rocky Mountain and the ADA National Network all have information around emergency prep.

>> **Nick DeSutter:** Ok.

>> **Dr. Patricia Yeager:** Ok. Lewis, we may have sounded like the FedEx commercial there, but we are ready for questions.

>> **Lewis Kraus:** All right. Thank you so much. That was an excellent presentation.

Before we go to the questions, I want to remind everyone that the slides are available at adapresentations.org. I posted that a couple of times in the chat. That's where you went to go sign up. So please feel free to go there. And also there will be the recording of this available, I would say by the beginning of next week, if you need to review it or if you think somebody else needs to listen to this and get the transcript of it.

So, a couple of things that came up early on in what you were talking about. There was some conversation about disability -- sorry -- developmental disabilities. Ray Morris suggested also to try to get funds from a state developmental disability planning council. Every state has one and receives federal funding.

Judith Gleason followed up with a question: Are we including our DD population in this discussion? Do you want to say anything about that?

>> **Nick DeSutter:** I'll tackle that one. The answer is, is that right now -- I'm a very blunt person. We are not. And we need to do a better job of that. It's something -- again, this is a process and an evolution.

Right now our community advisory group has around five folks with various types of disabilities. Next week, actually, we're going to meet with the OEM and begin to retarget what groups we're not including. It's a process and evolution and hopefully every year it gets stronger.

>> **Dr. Patricia Yeager:** Let me chime in as well. El Paso County is a county of about 650,000 people, probably one of the largest counties land mass in Colorado. So we're kind of spread out. I want to say the intellectual disability community here in the springs has done an excellent job of making themselves known, making people aware of the needs of folks with intellectual disabilities. And when I came here in 2011, I was struck by how little information there was about everyone else. It was almost like: You mean there are people in wheelchairs here, people who are deaf and blind? There was no recognition of that. So we started at the other end of the spectrum and now we need to go back, circle back being and include people with developmental disabilities.

>> **Lewis Kraus:** Ok. And just to complete the sort of discussion of what's going on on the board; while you were speaking, Shannon shared a resource that she's used successfully with young adults with developmental disabilities, the Train the Trainer. They're educating their peers. It's listed on the chat board, "Feeling Safe, Being Safe."

>> **Dr. Patricia Yeager:** Great.

>> **Lewis Kraus:** Next question. Oh, another point. Michael wanted to make sure that there were helping that the video that you all are developing on shelters can be shared with others or viewed somewhere. So I'm assuming that that information will be available somewhere.

>> **Dr. Patricia Yeager:** Right.

>> **Nick DeSutter:** Give us six months. We got the money this week, a substantial amount. We really appreciate that. We need a few months to get this thing right. We want to run it by the right agencies to make sure that it meets the needs, if that makes sense.

>> **Lewis Kraus:** Next question -- go ahead, Nick.

>> **Nick DeSutter:** No. Go ahead. I was just going to say but absolutely the intent is to share the product as far as we can.

>> **Lewis Kraus:** All right. Jennifer from the City of Berkeley here asks: This presentation is addressing how passionate CILs can work with disinterested governments, what about if the situation of the opposite? How can interested governments get CILs to start working on this?

>> **Nick DeSutter:** That is a problem.

>> **Dr. Patricia Yeager:** That's a problem.

>> **Nick DeSutter:** Absolutely.

>> **Dr. Patricia Yeager:** There are other centers in the state. We've had floods last September so Fort Collins was impacted, Boulder was impacted, and El Paso was impacted but not nearly as much as -- [Indiscernible] was also impacted. It's very difficult. There's not enough money.

Oftentimes center directors feel like I can't do another thing and really we have to. People die. The two people who died in Waldo Canyon, one of them was a person with a disability. So I can tell you that people die. And I really -- I don't know how to get centers motivated.

We intend to go up to the Governor's Office and ask him to help us redirect, re-prioritize the state FEMA money and make money available, funds available to each of the Independent Living Centers. That's our dream. We'll see how it goes. Yeah. It's a problem.

>> **Lewis Kraus:** The next question from Ray Morris. Have you reached out or collaborated with local fire departments to locate the individuals with disabilities and their preparedness?

>> **Nick DeSutter:** Could you repeat that question?

>> **Lewis Kraus:** Have you reached out or collaborated with local fire departments to locate individuals with disabilities and their preparedness?

>> **Nick DeSutter:** The answer is yes and no. Through focusing energy and collaboration with our local Offices of Emergency Management, some of that is going on behind the scenes but me, individually, I don't have the time to reach out to each individual fire station. But that is something that we are taking a look at bringing into our overarching access and functional needs working group. How do we get battalion chiefs involved with that and what does that communication look like? So I think we're getting there.

I don't want to go down the registry conversation today, but that conversation is something that needs to be built and the capacity that surrounds that.

>> **Lewis Kraus:** And let me follow up with that as well. This is a lead into the fact that also on the ADA presentations website there's an archive. And in a previous webinar we did discuss registries and this topic came up. And I think it is very important if you are having this perspective that people need -- that the fire departments need to know where every person with a disability is. So do look that one up and listen. That will be of interest to you.

There's been a little discussion here about wheelchairs. I'm having to jump over.

Have you contacted your local utilities companies? Maybe this is a similar kind of a conversation.

>> **Nick DeSutter:** Actually, that's interesting. I did not know -- we have a city-owned utility company. They actually have an ADA coordinator. I didn't realize that. So we are starting to have conversations with them about this and how they might be a part of the discussion.

In each community you really have to figure out -- and I'm fairly new here. I've been here about three years. So we're still figuring out who are the players and what happens here.

Disabilities will take some strategy in terms of who interfaces with people during emergencies.

And we've been at this for a year and it's still evolving; like, who needs to be a part of that. And the answer is it's a lot of folks. It's just how do you coordinate all of that information and then synthesize it into a well thought out plan that really is more challenging than it may seem.

>> **Dr. Patricia Yeager:** And there's one group we haven't talked about at all. That is public health. Public Health, there's two tracks down here. There's emergency: fire, floods, terrorism, nuclear disasters, all of that. But then what about bioterrorism -- well, I don't want to go there. But what about if we have diseases or contagions or those kinds of things? Public health has a whole strain of its own of planning around how do we get people vaccinated in a hurry. We're just starting to touch that. But be aware that there's a whole other piece to all of this in public health.

>> **Lewis Kraus:** Right. And let me - there's been a little discussion. Let me clarify for everybody listening, that the resources, the slides, everything will be in the archives section of ADA presentations. So if you're looking for or you're interested in the list of resources that Nick and Patricia gave, that will be there in those slides. It's also in alternative formats if you need it that way.

Regarding that list, one person made the comment that they don't see the Colorado services for deaf and hard of hearing government agency on the list to work with, the commission on deaf, hard of hearing, deaf blind, etc. Don't know if you had anything to add about that.

>> **Dr. Patricia Yeager:** I think that was my staff that probably put up that, too. Thanks. Yeah, we have not put that up there. This practice is all about what's happening in Colorado Springs. We're just beginning to branch out across the state. So certainly if you have a deaf and hard of hearing convention -- if you have a blind convention, that falls under the category of state agencies that could have money and should be involved at the state levels with pushing state officials to reorder their priorities when it comes to emergency management.

>> **Nick DeSutter:** That reminds me that one of the neat things we are working on hopefully early next spring is -- a lot of states are already doing this. How did we train ASL interpreters on emergency ASL interpreting? And then how do we provide a resource pool of those trained professionals to be operationalized quickly on the onset of a disaster? So we have an opportunity coming up here next year where we're going to hire a firm to do that and hopefully build that capacity.

>> **Lewis Kraus:** Ok. I think we're only going to have time for maybe one more big question here. Are the elderly and those caring for adult children included in the dialogue?

>> **Nick DeSutter:** Yes. We saw that specifically in our most recent exercise part of that planning did involve people who were aging. A lot of the exercise -- the exercise itself included the aging population. So, yes. Is it perfect? Absolutely not. But they are being included in what we're doing here.

>> **Dr. Patricia Yeager:** We need to reach out to the Area Agency on Aging and see if we can involve them more closely as well. Colorado Springs is a big retirement community for the military. So we have quite a number -- a large number of people here who are retired and aging, 80 and above.

>> **Nick DeSutter:** We have actively had our Senior Resource Council which is something we have which may be unique to Colorado Springs and other like communities. The Senior Resource Council has been involved with the access and working group.

>> **Lewis Kraus:** All right. Thank you so much, Nick and Patricia. That was tremendous. We realize that many of you listening may still have questions for our speakers. We apologize if you did not get a chance to ask your question. You can contact them or also contact your regional ADA Center at 800-949-4232 if you would like to get that question answered.

You are going to receive an e-mail with a link to an online session evaluation for participating today. Please complete that evaluation for today's program as we really value that input and want to demonstrate the impact that we have here on these presentations.

Once again, let's thank Nick and Patricia for sharing their time and their knowledge with us. Don't forget that today's session was recorded. It will be available for viewing let's say the beginning of next week at adapresentations.org under the archives session. There is the adapresentation.org web address in the chat window if you need it.

Thank you for attending today's session. We look forward to seeing you on December 11 for our next webinar, "The ADA National Network Learning Session Inclusive Emergency Planning Lessons from the City of Los Angeles Lawsuit."

Thank you so much again and have a great rest of your day. Bye-bye.