
The MA Active Planning Project

Susan Wolf-Fordham, JD
Nancy Shea, JD, MPA
E.K. Shriver Center, University of MA Medical School
May 14, 2015
Disability Community

- People with disabilities
- Families
- Support networks
- Service providers

Responders

- Public safety
- Public health
- Emergency planners/managers
- CERT/MRC
The Active Planning Project

Objectives

✧ Responder Training: 3 hour in-person course
✧ Community Stakeholder Meeting (CSM): Inclusive local planning meeting
✧ Disability community awareness raising: Self-preparedness and community emergency planning

3 Phases

Phases 1 and 2: In-person
Phase 3: Online + new name
The *Active Planning* Project

- **Audience:** Responders + disability community

- **Stakeholder involvement**
  - Advisory Committee
  - Review by expert with a disability + local emergency manager
  - Field test and feedback session

- **The Numbers**
  - Training in 29 localities
  - CSM in 21 localities (overlap)
  - Over 1000 MA people participated

- IRB determination not human subject research
Responder Training

Equity & Efficiency?

Photographs: J. Gleason, E.K. Shriver Center
Responder Training

- Demographics
- Disaster experiences
- 1:1 interactions (OARS steps)
- Functional and access needs
- ADA issues
- Community Stakeholder Meeting (CSM) process and *Active Planning* Workbook guide
Community Stakeholder Meeting (CSM)

Review local emergency plan/response practices
  • Identify gaps
  • Develop strategies
  • Create an action plan for improvement

Lively discussion

Tailored to local community
  • Participant selection
  • Roles: Community facilitator, plan “expert”, time keeper, recorder
  • Define critical issues
Active Planning Workbook

Guides the CSM process
Sparks discussion!
Records decisions and accomplishments

Step 1 - Where are we now?
- Tool 1 - Needs Assessment/Gap Analysis Checklist

Step 2 - Where do we want to be?
- Tool 2 - Priority Setting Form

Step 3 - How will we get there?
- Tool 3 - Action Plan Form to record strategies, timeline
ACTIVE PLANNING WORKBOOK

Meeting the Emergency & Disaster Needs of People with Disabilities in Our Town:
A “How To” Workbook

Where are we now?
Needs Assessment and Gap Analysis
Step 1

Where do we want to be?
Setting Priorities
Step 2

How do we get there?
Closing Gap
Step 3
Tool #1: Where Are We Now?

F. Mass Care Sheltering

A. Shelter Set Up

1. Shelter Capacity Site Selection

Our town’s shelter capacity calculation takes into account space issues relating to people with disabilities. For example, some people may have caregivers, service animals, mobility and other equipment, or may need accessible sites. The additional space needs should be included in the shelter space calculation.

Our town emergency plan includes a process to evaluate potential shelter sites for physical accessibility and to address inaccessibility with remediation or by switching sites.

Shelter site evaluation includes a review of:

- Parking areas
- Accessible restrooms and showers
- Areas in showers requiring platoons
- Space for wheelchair access
- Telephones with TTY capability
- No language barriers
- Building entrances
- Roll-up drives
- Deaf (ASL) interpreters
- Accessibility on walkways
- Accessible public transportation
- Covered waiting area
- Secure storage for medications
- Other

2. Shelter Layout Plan

Our town’s shelter layout plan takes into account the key needs of people with disabilities (i.e. accessibility, space, and space for medical needs). Our shelter includes accessible restrooms, accessible washrooms, and space for medical equipment. The shelter also includes a well-lit entryway, secure storage, and accessible transportation.

Active Planning 4/3/12 Field Test version

✔ Extensive topical checklist
Tool #2: Where Do We Want To Be?

2. Where Do We Want to Be? Setting Priorities

This tool will help your town determine what priorities to address related to gaps in your emergency plan.

1. Review part 1 of this Workbook and count the number of checked and unchecked boxes and record the information below:

   - Count the checked and unchecked boxes in Section I above and tally them below:
     - Identifying Local Needs: ___ checked, ___ unchecked boxes
     - Local Emergency Planning Process: ___ checked, ___ unchecked boxes
     - Public Emergency Preparedness Education: ___ checked, ___ unchecked boxes
     - Emergency Communication: ___ checked, ___ unchecked boxes
     - Transportation and Evacuation: ___ checked, ___ unchecked boxes
     - Mass Care Sheltering: ___ checked, ___ unchecked boxes
     - Hazardous Material Decontamination: ___ checked, ___ unchecked boxes
     - Recovery: ___ checked, ___ unchecked boxes

2. Review the unchecked boxes, which will show your town gaps in its emergency plan. Note the sections with the most and fewest unchecked boxes.

- Set priorities
- Areas for quick and inexpensive solutions
- Areas of greatest need
Tool #3: How Do We Get There?

- Summarize gaps and record strategies
- Name responsible person(s)
- Timeline
CSM Outcomes: Understanding Disability Community Needs

Gaps
- Develop more accurate picture of local disability community
- Understand specific needs

Strategies
- Meet with provider agencies to learn about people served
- US Census (American Community Survey)
- Share aggregate local data
- Outreach re PAS
- Inclusive drills
CSM Outcomes: Sharing Resources

Gaps

- Hoyer lift needed
- Extra wheelchairs needed
- American Sign Language interpreters needed
- Individuals who are blind/low vision unable to see registration forms

Strategies

- Borrow from local special ed. class
- Borrow from Council on Aging
- Local hospital to loan ASL interpreters
- Borrow CCTV video magnifier from local library
CSM Outcomes: Sharing Expertise

Gaps
- Community website down during emergencies
- City website has no emergency info for PWD
- Children with autism afraid of uniformed authority figures

Strategies
- Local computer company to be asked for help
- City disability commission volunteers to develop website info
- First responders planned program to visit school to desensitize children
Secrets to Success

• Identify a “champion”
  – Often public health personnel in MA
• Invite diverse participants
  – Balance of roles, views
  – “Worker bees”
  – Ideally 5-30 people
• Address potential barriers
  – Scheduling
  – Local politics
• Develop an “elevator story” for buy-in
Results

- **Training**: Increased responder knowledge and self-confidence

- **CSM**:
  - 100% of localities found at least 5 gaps
  - 100% of localities found gap closing strategies
  - 95% of disability community participants reported increased motivation to self-prepare
  - 8 localities reported continuing plan revision *after* project end

- **Common gaps and priorities**: communication; needs assessment; inadequate resources/services
Closing the Gap:
CSM “How To” Online

- Pilot course—in development
- Ongoing storyline; interactive role play
- Accessible
- Learners: Local emergency planners
- Field testers will receive Workbook and resource list
Want to field test?
Contact: shriver.recruit@umassmed.edu
Acknowledgements

Jennifer Brooks, BA
Patrick Gleason, MA
Charles D. Hamad, PhD
Anne Hunt, PHD
Andrew Milsten, MD, MS, FACP
Nancy Shea, JD, MPA
David Stowe, MEM
Susan Wolf-Fordham, JD

The Active Planning Project was originally funded through a grant from FEMA through the MA Executive Office of Public Safety and Security. Active Planning project materials were originally prepared under a grant from FEMA’s Grant Programs Directorate, U.S. Department of Homeland Security. Points of view expressed in this document are those of the author and do not necessarily represent the official position or policies of FEMA’s Grant Programs Directorate or the U.S. Department of Homeland Security.

Closing the Gap in Local Emergency Planning is funded by a University of MA Medical School Commonwealth Medicine Mini Grant.
For more information about our projects: susan.wolf-fordham@umassmed.edu

Visit our website: http://shriver.umassmed.edu/